

# **Financial Policy**

Thank you for choosing our office for your dental care. We strive to provide you with the best care and experience possible. Please understand that some of your oral healthcare needs may require more of a financial commitment than anticipated. Our financial policy is to collect our fees the day of your visit. As a professional courtesy we will bill your insurance on your behalf.

# **Regarding Insurance**

Your insurance policy is a contract between you and your insurance company, typically selected by your employer or yourself. Please be aware that some and possibly all the treatment provided may be non-covered services and not considered reasonable, usual, and customary under the terms of your dental policy. We will commit to providing your insurance company with all the required documentation to maximize your benefit. Please understand that we keep our fees as low as possible, while providing you with our excellent stand of care.

We must emphasize that as a dental care provider, our relationship is with you, our patient, not with your Insurance company.

#### Refunds

If there is a refund on your account, we will promptly refund you from our office via check or if you choose, we will keep the credit on your account for any additional services that you may have in the future.

# **Missed Appointments**

Please understand that appointment times are valuable and have been reserved for you. Help us keep our costs low and service you best by keeping your scheduled appointments. We request a 2 day prior to appointment confirmation or cancellation. All missed appointments or short notice cancellations (less than 48 hours) are subject to a \$50 per scheduled hour fee.

# **Returned Checks**

A \$25. Fee on all returned checks will be applied.

# **Payment**

Payment is due at the time services are rendered. We accept most major credit cards, health savings account cards, cash or checks.

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