



Financial Agreement

Our practice is committed to providing the best service and treatment to our patients. The fees reflect our commitment to quality restorative dentistry using the latest technology. This commitment extends to all areas of the office including less frequently seen areas such as continual staff education and precise sterilization techniques. We are also committed to providing you with up-to-date information and educational tools so that you may fully participate in maintaining optimum oral health. Our financial policy is intended to facilitate excellent service to you while minimizing our administrative costs.

Finances:

- Full payment for services are due at the time they are rendered. We accept cash, checks, and most major credit cards. We offer flexible extended payment plan options with prior credit approval through third party credit agencies.

Insurance:

- All charges you incur are your responsibility regardless of your insurance coverage. We must emphasize that as your dental care provider, our relationship is with you, our patient, not with your insurance company. Your insurance policy is a contract between you, your employer, and the insurance company. If payment from your insurance company is not received within 60 days from date of service, you will be expected to pay the balance in full.
- We perform routine insurance billing procedures upon verification of coverage. However, if your claim is denied, you will be responsible for paying the full amount at that time.
- If we are not a preferred provider with your insurance company, you have the option to mail in your own claims and receive payment directly from your insurance. We will offer an administrative courtesy if you choose this option. Please be aware that all payments for treatment performed are due IN FULL at the time of the visit.

Cancellation Policy:

- Your appointment times are especially reserved for your child. Should you need to cancel, please give us **48 hours notice to avoid a cancellation fee**. This allows another child needing care to be seen by us. Thank you for understanding.

Overdue Balances and Returned Checks:

- Returned checks will be subject to a processing fee.
- Balances over 60 days may be subject to collection fees and finance charges at the rate of 1.5% per month (18% annually).

Our goal is to provide quality care with your convenience and service in mind. Please let us know if you have questions or concerns at any time.

Signature of Parent/Guardian

Date

Print Name