

Financial Policies

We have prepared this document to help answer many of the questions patients have regarding the financial policies in this office. The receptionist will be happy to answer any questions you might have with respect to the following information.

Regarding Insurance Plans

For Patients Without Dental Insurance: For those patients that do not have dental insurance, payment is due in full at the time when treatment is rendered. If you need to make payments on your account, refer to the section below that discusses payment plan options. The term “dental insurance” refers to any type of dental benefit plan that may pay all or part of your dental care costs.

For Patients With Dental Insurance: The following is applicable to those patients with dental insurance.

NON-NETWORK PROVIDER – We are a **non-network provider** which means that **we are not members of nor do we participate in any type of dental plans** including PPO's (Preferred Provider Organizations), DMO's (Dental Maintenance Organizations), prepaid dental plans, discount plans, discount cards or any type of insurance plan or direct reimbursement plans. As such, we will collect a co-payment at the time of service in the minimum amount of thirty percent (30%) of the procedure fees. As a courtesy, we will be happy to send an insurance claim form to your insurance company along with any necessary backup information. If the claim is denied for any reason, the balance on your account is immediately due and payable. If the insurance company indicates they need additional information, upon receipt of the balance due on your account, we will provide them with any additional information requested on a one-time basis only. If an insurance company makes payment to our office and such payment creates a credit balance on your account, we will prepare a refund check to either you or the insurance company (whichever is deemed appropriate) within 48 hours of its receipt.

ULTIMATE RESPONSIBILITY - **You are ultimately responsible for the payment of all outstanding charges on your account, regardless of your insurance coverage.** Procedure codes are billed exactly as they relate to the treatment completed. We will not bill your insurance company using a procedure code that differs from the treatment performed, because such action constitutes fraud. We will assist you in obtaining payment from your insurance company as noted above, but dealing with your insurance company beyond our providing backup information for your claim is your sole responsibility.

Forms of Payment and Installment Options

We accept cash, checks, debit cards, credit cards (Visa, Mastercard, Discover, and American Express) or payment from a pre-approved credit plan from a financial institution such as Care Credit. We are pleased to offer Care Credit for your convenience if a payment plan is desired. Generally, submission of a credit application is necessary and approval is normally obtained within 30 minutes. Please ask the receptionist for details about this program. Other payment plan options may be available through your local bank or credit union. Post-dated checks are not an acceptable installment payment option.

NSF Checks and Checks Drawn on Closed Bank Accounts

If a check is returned unpaid to our office from your bank due to *non-sufficient funds*, we will apply a \$15.00 NSF charge to your account and contact you either by telephone, text or email and advise you as such. At your request, we will resubmit the check one time only and if it is returned unpaid a second time, an additional \$25.00 NSF charge will be added to your account. At your option, you can personally pick up the NSF check from our receptionist upon payment of the balance due. If you instruct us not to resubmit the check and you fail to clear the balance due within 5 working days of when the check was first returned, an

additional \$25.00 NSF charge will be added to your account at that time.

If a check is returned unpaid to our office from your bank due to a *closed account*, a \$25.00 NSF charge will automatically be added to your account. We will contact you either by telephone, text or email and advise you as to the returned check,

Account Statements and Delinquent Accounts

A statement of your account will be mailed to you each month if an outstanding balance exists. ***You will receive a statement even though a claim has been submitted to your insurance company and payment from the insurance company has not yet been received.***

On all overdue accounts, collection activity will proceed as follows:

<u>No. Days Overdue</u>	<u>Action</u>
45	- Balance due in full.
60	- Second reminder letter by mail
90	- Account is sent to a collection agency or small claims court

In all situations, the count of days overdue will begin on the date when the claim is submitted, usually on the day when treatment is started.

If an account is referred to small claims court and a judgment is rendered in our favor, in addition to your overdue balance, you will also be responsible for the payment of all court costs and attorney fees associated with obtaining such a judgment. A minimum charge of \$75.00 will be added to your account if it is referred to small claims court. *If, due to unknown circumstances, you are unable to pay your account in a timely manner prior to collection activity commencing, please contact our office to make arrangements for payment.* You can consider making arrangements with your financial institution to arrange a payment plan or make application for Care Credit through our office. If you have any questions regarding your account at any time, please feel free to contact the receptionist during normal office hours.