



OFFICE POLICY

Appointments

The office attempts to schedule appointments at your convenience and when time is available. Our office makes every attempt to remain on schedule throughout the day. We value your time and will do our best to keep you from having to wait.

Preschool children should be seen in the morning because they are fresher and we can work more slowly with the child for their comfort. School children with a lot of work to be done should be seen in the morning for the same reason. Dental appointments are an excused absence. Missing school can be kept to a minimum when regular dental care is continued.

Since appointed times are reserved exclusively for each patient we ask that you please notify our office 24 hours in advance of your scheduled appointment time if you are unable to keep your appointment. Another patient who needs our care could be scheduled if we have sufficient time to notify them. We realize that unexpected things can happen, but we ask for your assistance in this regard.

Payment Policies

Payment for professional services is due at the time dental treatment is provided. Every effort will be made to provide a treatment plan which fits your timetable and budget, and gives you or your child the best possible care. **We accept cash, personal checks, Visa and Master Credit Cards (accept Credit Card only if payment is \$100 or more).**

Insurance Policies

If we have received all of your insurance information on the day of the appointment, we will be happy to file your claim for you. **You must be familiar with your insurance benefits, as we will collect from you the estimated amount insurance is not expected to pay.** By law your insurance company is required to pay each claim within 30 days of receipt. We file all insurance electronically so your insurance company will receive each claim within days of the treatment. **You are responsible for any balance on your account after 30 days, whether insurance has paid or not.** If you have not paid your balance within 60 days a finance charge of 1.5% or \$5, whichever is greater, will be added to your account each month until paid. We will be glad to send a refund to you once insurance has paid us.

PLEASE UNDERSTAND that we file dental insurance as a courtesy to our patients. We do not have a contract with your insurance company, only you do. We are not responsible for how your insurance company handles its claims or for what benefits they pay on a claim. We can only assist you in estimating your portion of the cost of treatment; we at no time guarantee what your insurance will or will not do with each claim. We also cannot be responsible for any errors in filing your insurance; once again we file claims as a courtesy to you.



Fact 1 - NO INSURANCE PAYS 100% OF ALL PROCEDURES

Dental insurance is meant to be an aid in receiving dental care. Many patients think that their insurance pays 90%-100% of all dental fees. This is not true! Most plans only pay between 50%-80% of the average total fee. Some pay more, some pay less. The percentage paid is usually determined by how much you or your employer has paid for coverage or the type of contract your employer has set up with the insurance company.

Insurance companies will not release the exact amount they will pay for a procedure until the treatment is completed and the claim is submitted. They will only state the percentage of their fee schedule that they will cover.

Fact 2 - DEDUCTIBLES & CO-PAYMENTS MUST BE CONSIDERED

When estimating dental benefits, deductibles and percentages must be considered. To illustrate, assume the fee for service is \$150.00. Assuming that the insurance company allows \$150.00 as its usual and customary (UCR) fee, we can figure out what benefits will be paid. First a deductible (paid by you), on average \$50, is subtracted, leaving \$100.00. The plan then pays 80% for this particular procedure. The insurance company will then pay 80% of \$100.00, or \$80.00. Out of a \$150.00 fee they will pay an estimated \$80.00 leaving a remaining portion of \$70.00 (to be paid by the patient). Of course, if the UCR is less than \$150.00 or your plan pays only at 50% then the insurance benefits will also be significantly less.