



PATIENT FINANCIAL AGREEMENT

1. Services are due and payable at the time they are rendered unless other arrangements are made.
2. Deductibles, co-payments, and co-insurance balances are due at the time of service unless other arrangements are made.
3. Arrangements can be made to hold patients credit card information on file and charge an agreed upon monthly amount.
4. Treatment plans may require an individualized, signed patient financial agreement.
5. As a courtesy, prior authorizations and patient insurance will be billed for treatment rendered. However, the patient is responsible to verifying coverage and benefits. Prior authorizations for treatment may take a few weeks to receive from the insurance company.
6. Insurance plans typically reimburse within 30 days from the billing date. If the insurance plan has not reimbursed within 60 days, the patient may be asked to pay the balance and seek reimbursement from the insurance company.
7. In circumstances where there is a dispute with an insurance company over a claim we may choose not to enter the dispute. This will then become the responsibility and obligation of the patient.
8. Monthly statements will be mailed that reflect the account balance due.
9. A 12% annual finance charge will be assessed (with a minimum \$4 monthly fee) on accounts 30 days past due.
10. Accounts over 120 days past due may be sent to a collection agency if the patient has not responded after multiple contact attempts. Our office is willing to make specific billing arrangements with the patient in these types of circumstances.
11. Third party payment plans are available. We recommend the dental financing company, Springstone. Patients can be qualified the day of the appointment. More information is available on these plans from the front office staff.
12. Returned checks are subject to a \$25 fee.

If you understand and agree to the terms outlined above, please sign and date below.

SIGNATURE OF PATIENT: _____

DATE: _____