

# ADVANCED DENTAL CENTER FINANCIAL POLICY

Dental insurance is playing a larger and larger role in helping people obtain dental treatment. Since we feel strongly that our patients deserve the best dental care we can provide, and in an effort to maintain a high quality of care, we would like to share some facts about dental insurance with you.

We consider our relationship with you to be of primary importance and will always make our recommendations to you based on what we believe is the very best treatment for you regardless of your insurance coverage. As the patient, it is your responsibility to deal with your insurance company and your employer. We will assist in any way possible to maximize your dental insurance benefits, but to reemphasize; we have no relationship or responsibility to your insurance company.

Payment is expected at the time of service from all self-pay patients and patients with insurance. Insurance patients will be expected to pay their portion of their fees (co-payment) the day services are rendered.

**FACT #1:** Many plans tell their insured that they will be covered “up to 80%” or “up to 100%”. In spite of what you’re told, we’ve found many plans cover 40% to 50% or an average fee. Some plans pay more...some pay less. The amount your plan pays is determined by the contribution you and your employer make to your dental plan. The smaller the contribution paid into the plan for “insurance”, the less you’ll receive. It is your responsibility to advise us of your insurance coverage and restrictions.

**FACT #2:** Each plan utilized in our office has different percentages, deductibles, maximums, procedures covered, and varying fees that the plan will allow. We will do our very best to make as close a calculation as possible of what your insurance plan will cover. However, as we cannot estimate precisely, there may be variances for which the patient is individually responsible.

**FACT #3:** Many routine dental services are NOT covered by insurance carriers. We make recommendations based on your needs and not on what your insurance may or may not cover.

That said, all insurance claims that become 45 days or more outstanding will be billed directly to the patient.

Please do not hesitate to ask us any questions about our office policies. We want you to be comfortable in dealing with these matters and we urge you to consult us if you have any questions regarding our services and/or fees. We will fill out and file your insurance forms at no charge.

If you have any questions regarding your insurance, please contact your insurance carrier regarding the specifics and details of the plan they are operating on your behalf.

A 2% per month service charge will be charged to all past due accounts after 60 days.

We accept: Cash, Check, Visa, MasterCard, Care Credit, and Wells Fargo.

If you are delinquent more than (60) days, collection efforts may ensue, in the event collection efforts become necessary, you shall be responsible for all collection costs and fees, including reasonable attorney fees.

I authorize release of any information relating to any claims.

**A CHARGE WILL BE MADE FOR FAILED OR CANCELLED APPOINTMENTS WITHOUT PRIOR NOTIFICATION OF 48 HOURS.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Doctor’s Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_