



### *Financial Information*

- 1. We can be GOOD, we can be FAST or we can be CHEAP - but unfortunately, not all at the same time. Our fees for professional dental services are a reflection of the time, staff, materials, equipment, and current expertise involved in providing you with the very best quality and most personalized dental care possible. We strive to make good dental health affordable for all of our clientele while maintaining a practice that will be here to serve you and our community for many years.*
- 2. All major treatment and treatment involving outside laboratory expenses will require a down payment of 1/2 of the total balance before treatment begins, with the total balance paid before any crown or denture is completed.*
- 3. In the case of minor children, the parent or legal guardian authorizing treatment for the child is financially responsible to this office, regardless of any separation, divorce or court agreements. We are not a party to these agreements.*
- 4. Returned checks will be assessed a \$35.00 charge to cover bank fees incurred as a result.*
- 5. We understand that unexpected circumstances can sometimes delay financial obligations. Please contact our office manager immediately to make satisfactory payment arrangements. When communication and good faith exists, we can work it out.*
- 6. If you have dental insurance, we will help you to determine the benefit that you have available and how it applies to your dental treatment. However, your dental insurance policy is a contract negotiated between you, your employer and your insurance company only. We are not a party to that contract.*
- 7. Not all dental insurance plans are created equally. Dental benefit plans vary widely between different insurance companies. Additionally, an insurance company may offer multiple dental benefit plans. And lastly, employees at the same company may receive different levels of benefits based on their job position or years of employment. All recommended dental services may not be covered by the plan chosen by you and/or your employer. Please be aware of your plans specific benefits and limitations, and how they may apply to your recommended dental treatment plan.*
- 8. Payment for all services rendered is the financial responsibility of the patient regardless of any insurance involved. If you chose for us to submit your claim on your behalf, a credit card must be left on file. It will be kept confidential! Please remember that your dental benefits contract is between you, your employer, and your insurance carrier. Upon receiving payment from insurance carrier, our office will charge your credit card any remaining balance from the claim*

