

Missih Dental Care & Periodontics

Office Financial Policy

Welcome to Missih Dental Care & Periodontics/Horizon Dental Care & Implants. We are happy to have you as our patient and look forward to offering you and your family the finest dental care available. We know that providing complete comprehensive dental services includes discussing all treatment and financial information.

Before Treatment:

Before treatment is performed, we will discuss with you, your treatment plan and your financial options. This will allow you to fully understand your proposed dental treatment and the associated cost to allow you time to make the necessary financial arrangements.

- Payment plans are available for comprehensive dental treatment. Please speak with the Office Manager to make arrangements prior to commencing treatments.

Payment:

Payment is due at the time services are rendered.

- For your convenience we accept, Cash, Personal Checks, VISA, MasterCard, Discover, American Express and Care Credit.
- There is a \$40.00 returned check fee which must be paid within 5 business days via cash, cashier's check or money order.

Insurance:

Our office is committed to helping patients maximize their benefits. Please ensure that you have provided our office with up to date insurance information.

- You will be required to pay the estimated co-pay or any deductible on all procedures on the day of treatment.

As a courtesy, we will submit your claims to your insurance company. If your claim is denied, or we do not receive the full anticipated reimbursement for the balance of your claim within 30 days, we will resubmit ONCE.

- If we have no response within two weeks, we will invoice you directly for all unpaid balances which will be due within 15 days of the statement invoice.

Minors:

Children under the age of 18 are considered minors and must be accompanied by a parent or authorized adult.

- Payment for services is due at the time of the appointment and is the responsibility of the accompanying adult.

Emergency Clients:

If you are an emergency client that is new to our practice, payment at the time of service will be required.

- Once established as an active patient, we will be happy to discuss other payment options.

Outstanding Balance:

If your account has an outstanding balance, please speak to our office about payment options including Care Credit.

- For accounts with a balance over 45 days past due, a \$10.00 service charge will be applied to the balance each month.
- If collection fees are incurred to collect payment, they will be added to the patients account.

I have read and understand this financial policy.

Signature

Printed Name

Date