

CRESCENT DENTAL
Financial Responsibility Policy

This Notice describes your financial obligation and payment options.

Payment is due at the time services are rendered. For your convenience we accept Cash, Personal Checks, Care Credit, Visa and Master Card.

Insurance benefits are determined by your employer, not your dentist. Any deductible or estimated co-payment amount will be due at the time of treatment. Insurance is not a guarantee of payment; insurance companies typically will not pay for all your treatments. Your insurance policy is a contract between you and your insurer. Your account and payments are still your responsibility. As a courtesy we will be glad to submit your insurance claim on your behalf. You will be expected to pay for services rendered if the office is unable to verify your insurance information before treatment. If payment for services already rendered has not been paid in full within 45 days, either by you or your insurance company, the remaining balance is considered due and collectible before any further treatment is rendered.

We reserve the right to charge and collect a fee of \$100.00 for broken appointments - appointments that are cancelled or broken without 48-hours advance notice. Exceptions will be made on a case by case basis. Appointments are reserved exclusively for you. If three appointments are missed by you and/or your family member(s) that were not properly notified, you may be dismissed from our practice. Returned Check Fee of \$15.00 will be added to your account balance and is collectible. Any account balance overdue longer than 90 days is considered delinquent and may be sent to small claims court or a collections agency with proper notice given to you in advance. You are responsible for any legal or collections related fees.

Payment plans and financial arrangements can be entered into for comprehensive dental treatment, prior to commencing treatment. These arrangements include the following:

1) A 5% Discount Courtesy will be applied to the client's treatment if payment is made in full by cash, credit card or check prior to the treatment. We will fill out your dental insurance claim form for you. You mail it, and will receive payment directly from your insurance company usually in 4-6 weeks. This is our way of saying thank you for being financially responsible and reducing our load of paper work, administrative, and accounting expenses.

2) We offer extended payment options through Care Credit, which allows for up to 12 months at no interest and no finance charges. Care Credit also has payment options that allow payments up to 48 months through a low interest plan. Care Credit is offered by GE Financial and is subject to credit review by them.

As guarantor of my account, I understand that I am solely responsible for all of the fees for the dental treatment. I further agree that I have received a copy of this office financial policy and agree to its contents.

Signature: _____

Date: _____