Financial Agreement

We understand how difficult paying for your dental treatment can be. In an effort to make this dental experience as comfortable as possible, we have developed this financial policy.

Please note the following policy:

- We accept payment by CASH, CHECK, VISA, MASTERCARD and DISCOVER.
- We also offer financing through CareCredit. When using CareCredit all arrangements must be made before any scheduled treatment is rendered.
- As a courtesy, we accept most insurance and will gladly process your claim(s), however any co-payment, estimated deductible and pre-treatment estimate quotes will be paid at the start of any given treatment. Please keep in mind that these are "estimates" and information is based upon available benefits at the moment your claim is submitted. Our office will submit your claim(s), but understand it is your responsibility to satisfy any account balances in full for all services rendered. Any fees pertaining to any type of sedation in our office must be paid on or before that service is rendered as most insurance plans do not cover sedation services. If at any time there is a credit on your account after a claim has been processed and paid, our office will gladly send a reimbursement via check to you.
- For **separated or divorced parents**, the parent that brings the child to the office is responsible for payment of fees for the child's care. If another agrees to, or is responsible, that person must provide a notarized document of this acknowledgement. Your understanding in the matter is greatly appreciated.

All payments are required in the above outlined Financial Agreement. If our office incurs any expense in collecting or attempting to collect money due as a result of the patient's failure to pay, all such expenses will be charged to the responsible parties account.

| if you have any questions regarding these policies, please do not nesitate to ask. | |
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| (patient/responsible party signature) | (date) |
| (witness signature) | (date) |