

OFFICE POLICIES

We find that communicating with our patients regarding our office policies assists us in providing the best service to you. We, therefore, have taken the time to answer some of the most commonly asked questions.

As a courtesy to our patients, we will bill your insurance company for you. We must have the following information in order to do so. Name and address of insurance company. Group number. Insured's ID number or Social Security number and place of employment.

Payment for any services rendered by this office which may not be covered under the patient's insurance will be the patients responsibility and due at the time of service unless other arrangements have been made.

If you take care of your estimate in full at the time of service we will offer you a 5% courtesy savings. You may also put half down and pay off the balance the following month. We also have long term financing through CareCredit. They offer 3,6 and 12 months no interest on balances over \$300.00. You can apply with us or on line at www.carecredit.com.

If you are unable to keep an appointment you have scheduled, we would ask you to please give us 2 full business days notice to allow other patients to use the time that has been set aside for you. There will be a \$45.00 charge if an appointment is cancelled or rescheduled in less then 2 full business days and a \$75.00 charge for all missed appointments with no notice. Our business days are Monday-Thursday.

Please advise us if you have changed your address, phone number, place of employment or insurance coverage.

As a patient or legal guardian of a minor patient, I agree to pay for all services rendered in accordance with the terms and conditions set forth in this policy. In the event legal action should become necessary to enforce payment of any charges, I agree to be responsible for and pay all reasonable attorney's fees and court costs incurred.

I ACKNOWLEDGE AND HAVE READ, UNDERSTOOD, AND HAVE RECEIVED A COPY OF THIS POLICY.

Patient or Guardian _____ Date _____

