

## Financial Policy

Thank you for choosing Nash Dental Care. We realize that every person's financial situation is different. For this reason, we have worked very hard to provide a variety of payment options to help you receive the dental care you need and deserve that allows you to enjoy a healthy, beautiful smile with respect to your budget. Dental treatment is an excellent investment in an individual's medical and psychological care. In order to meet your needs, we need your assistance and your understanding of our payment policy.

**Payment for services is due at the time services are given (including insured person's portion).**

For your convenience, we accept cash, checks, Visa, Mastercard, American Express or Discover Card. We also offer no interest payment plan through Care Credit & other outside financial groups (terms apply) and pre-payment courtesies. We will be happy to help you process your insurance claim forms at no additional cost and we will accept assignment of benefits where allowed. However, we must have your completed insurance form, copy of your insurance card and a provider benefit booklet at your first visit.

**Broken Appointments:** A specific amount of time is reserved especially for you and we strongly encourage all patients to keep their appointments. If you must change your appointment, we require 48 hours notice to avoid a \$35.00/hour or 10% of treatment total (which ever is greater) cancellation fee (emergencies are an exception).

Account balances older than 60 days and returned checks will be subject to an interest charge of 1 ½% per month. There is a \$30.00 charge for returned checks.

We will gladly discuss your proposed treatment and answer any questions relating to **your insurance**. You must realize, however, that:

1. Your insurance is a contract between you, your employer and the insurance company. We are not a party to that contract.
2. Our fees are generally considered to fall within the acceptable range by most Companies, and therefore, are covered up to the maximum allowance determined by each carrier. This applies only to companies who pay a percentage (such as 50%, 80%) of "U.C.R." which means usual, customary and reasonable by most companies. (This statement does not apply to companies who reimburse based on an arbitrary "schedule" of fees, which bears no relationship to the current standard of cost of care in this area.
3. Not all services are a covered benefit in all contracts. Some insurance companies arbitrarily select certain services they will not cover. We must have a benefit booklet to help you determine your benefits.

We must emphasize that as dental care providers, our relationship is with you, not your insurance company. While the filing of insurance claims is a courtesy that we extend to our patients, all charges are your responsibility from the date services are rendered. We realize that temporary financial problems may affect timely payment of your account. If such a problem should arise, we ask you contact us immediately.

If you have any questions about the above information or any uncertainty regarding insurance coverage, PLEASE don't hesitate to ask. We are here to help you.

I understand and agree that (regardless of my insurance status), I am ultimately responsible for the balance on my account for any professional services rendered. I have read the above information and understand and agree to the content.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Parent of Guardian (if patient is a minor)**

\_\_\_\_\_  
**Date**