

OUR FINANCIAL POLICY

Patients With Dental Insurance

As a courtesy, we prepare and submit claims to your dental insurance carrier(s). We can make no guarantee of estimated coverage but do our best to see that you receive your maximum benefits. We remind you that your policy is an agreement between you and your insurance company, not between your insurance company and our office. Should your insurance benefits result in less coverage than anticipated, you will be responsible for your total obligation. If you would like to know what your expected coverage will be, we will submit a pre-treatment estimate. Your insurer will generally send a detailed response within 3-4 weeks.

Few dental plans cover all the costs of treatment. Some plans pay fixed allowances for certain procedures and others pay a percentage of the charges. It is the patient's responsibility to know their plan's coverage and limitations and pay at the time of service any deductible amount, co-payment or any other balance not paid by the insurance company. The receptionist will request this payment in full at the time of service. Should payment in full prove to be impossible, a payment plan can be arranged in advance of treatment. The estimated cost of treatment will be discussed at the time of consultation and scheduling.

Our office is a Participating Provider for Delta Dental Premier and BlueCross BlueShield DentalBlue Indemnity. If you receive a treatment that is covered under either plan, you will be billed at the insurance carrier's negotiated (reduced) rate rather than our normal rate. If you receive a treatment that is not covered under your plan, receive a treatment after you have exhausted your maximum yearly benefit or receive a treatment which causes you to exceed your maximum annual benefit, you will be billed at our normal rate rather than the plan's negotiated rate. To avoid unexpected out-of-pocket expenses, please your plan's website, consult your benefits subscriber literature or call the plan's customer service representative to assist in determining remaining benefits. We can assist in this determination, but it is the patient that is ultimately responsible for knowing his/her plan's coverage and limitations.

Patients Without Dental Insurance

Patients without dental insurance are requested to pay in full at the time of service unless other arrangements have been made in advance of treatment.

Payment Plan Arrangements

When payment can not be made in full at the time of service, a payment plan arrangement must be made with the receptionist. In order to establish a payment plan we require that one half the cost of treatment be paid at the time of service. The remaining balance will be divided into monthly installments, so as not to exceed six months. Additional procedures that occur during the plan will require that the installment amount be recalculated.

Forms of Payment

For your convenience we accept cash, personal checks, debit cards and MasterCard, Visa, AMEX and Discover. As a courtesy, Senior Citizens are offered a 10% discount when paid in full at the time of treatment providing they are without dental insurance and pay with either cash or check. Please be aware that a Health Protection and Safety fee will be entered for every patient visit.

Appointment Confirmations

As a courtesy, our office will remind you of your appointment with the hygienist by postcard three weeks before the designated date. We will confirm your appointment by telephone generally two days before your appointment with both the hygienist and the doctor. We respectfully request that you return a confirmation message that has been left. If you cannot keep an appointment, please inform us at least 24 hours in advance. An answering machine or texted response is available for your message. We reserve the right to charge your account, if we are not notified of your change in plans within 24 hours.