

## FINANCIAL POLICY

The primary objective of this office is to provide you with the best quality dental care available anywhere. This service is based on a friendly, mutual but business-like understanding between doctor and patient. It is also felt that misunderstandings can be minimized if firm financial policies are agreed upon at the beginning of treatment. The following statements are made to acquaint you with our financial policy:

## **INSURANCE PATIENTS**

The estimate provided by this office is to be considered a guideline until the final insurance payment is received and the patient's account has been reconciled. Paying the estimated portion does not absolve the patient of full responsibility of charges for the treatment rendered. It is also important that the patient know their insurance coverage and within that coverage the frequencies and limitations. As a courtesy our office obtains insurance information for every patient, and bills that insurance company after any treatment.

## BROKEN APPOINTMENTS

If you are unable to make it to your scheduled appointment we ask that you notify our office at least 24 hours in advance. We do understand that family emergencies and such happen and will be forgiven. Although no shows will be responsible for a broken appointment fee of \$25.00

Patient signature:		
	(I have read and understand the policy stated above)	
Date:	· · · · · · · · · · · · · · · · · · ·	