Financial Policies and Acknowledgements



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We believe that all patients deserve to know, up front, our financial policies. Below are our policies relating to your dental care.

Payments at time of service:

At the time of service, your estimated co-payment is due. For procedures with multiple appointments, at least fifty percent of your estimated portion is due at the first appointment and the balance is due by the beginning of the final appointment.

Dental Insurance:

As a courtesy we will file your insurance claim for you. We offer this service to you as a courtesy only and it is not meant to be a substitute for payment. We will attempt to collect from your insurance carrier their portion of the charges for your visit. We can not guarantee that they will pay any amount for your treatment. Each plan has different exclusions and limitations and those exclusions and limitations change over time. Our office recommends dental treatment based on medical necessity and not on whether your insurance company will cover a procedure. It is your responsibility to know your dental coverage. It is your responsibility to pay any amount not covered by your insurance company regardless of the reason. We will instruct your insurance carrier to send all payments directly to our office for reimbursement.

Pre-Determination of Insurance Benefits:

We will file, upon your request, a request for pre-determination of dental benefits from your insurance carrier. A pre-determination is a process whereby your insurance company tells you in advance of treatment what procedures may be covered and the amount of benefits your plan may pay towards those procedures and the amount you may be required to pay. A pre-determination of benefits reduces, but does not eliminate the risk of error in estimating your co-payment. A pre-determination is not a guarantee of coverage. A pre-determination sets forth your expected benefits based on the information provided to the carrier at the time of processing. If your plan changes, additional claims are received after the pre-determination is processed or your oral condition changes then the pre-determination is not valid and may need to be resubmitted. Depending on your insurance carrier, a pre-determination may take up to three weeks to process.

Third-Party Financing:

dental 133 offers financing options through various third-party lenders. Arrangements for these options must be made in advance of your appointment.

(Initial) Interest Charges:	
Patient balances sixty (60) days and older will be assessed an intere	st charge of 1.5% per month, or 18% per annum with a minimum
charge of \$5.00 per billing period.	
(Initial) Collection Charge and Returned	Checks:
Any account sent to an outside collection agency will be assessed a	a \$50 collection fee. Any check returned for any reason by your
bank will be assessed a \$35 fee.	

_____(Initial) Missed/Cancelled Appointment Charge:

Any appointment that is missed or not cancelled within 2 business days (Our business days are Monday through Thursday) of the appointment will be subject to a charge of \$75.00 for first occurrence. Future missed or cancelled appointments may require a deposit prior to rescheduling in addition to the missed/late cancel fee. No further appointments will be made until the fee is paid. Cancellations must be made during business hours. Messages left after 5pm will be considered to have been made on the next business day.

I have read, understood and agreed to all of the above Financial Policies of dental I 33 and Lori J. Engelmann, DDS, LLC. I understand that treatment cannot begin until this form is signed and agreed to.

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	Date	
Signature of Patient/Parent if Under 18/Guardian		
Printed Name	-	