



Comprehensive Family Care

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Financial Policy

1. Payment in full is due when services are rendered with a 5% discount (to the nearest dollar).
2. For insurance patients, the estimated copay and deductible for treatment rendered must be paid in full on the day of service. Please understand that you are ultimately responsible for all fees generated by your treatment.
3. We gladly accept Visa, MasterCard, American Express, check, cash, and Care Credit for payment of the amount due.
4. Any account outstanding 30 days past the date of service will receive a 1.5% monthly finance charge.
5. Any account with an outstanding balance past 60 days will be considered delinquent and reported to a collections agency. A \$100 service charge PLUS all legal costs and expenses incurred will be the patient's responsibility as permitted by law.
6. Any returned check will result in a \$20 service charge.
7. Two business days are required for rescheduling appointments. A \$50 to \$100 fee, depending on the amount of time that was reserved for you, will be applied to your account for rescheduling, cancelling, or failing to show up for your appointment without 2 business days notice. The doctors at 5th Avenue Dental reserve your appointment time exclusively for you. Please be considerate.

The Financial Policy continues on the back of this page.

By signing below, I certify that I have read, understand and agree to all terms and conditions of this financial policy, and I consent to pay for all services that are received.

(Patient's Signature)

(Date)

(Witness' Signature)

(Date)

For Patients with Insurance: It's important to remember that your insurance coverage is a contract between your employer and your insurance company. Benefits and coverage vary significantly from plan to plan depending upon what your employer has agreed to with the insurer. Please keep in mind that insurance is not designed to provide 100% benefit, but rather is meant to **assist** in the cost of dental care. To avoid surprises on your bill, it is important to understand what your insurance will cover, and what you will need to cover in some other way. Dental benefits should not be confused with the dental services you need, which are determined by you and the doctors of 5th Avenue Dental.

As a courtesy to our patients, we are happy to submit your claims for services. In order for us to do this, you must provide us with accurate and up-to-date insurance information. We will verify your coverage and plan before your appointment. With this, we will make every effort to be as accurate as possible when estimating your co-payment and deductible, which is due at the time of service; however, your insurance may not cover as much as we estimate. Any amount not paid by insurance is your responsibility.

We will wait 45 days for insurance claims to be paid. After 45 days if payment has not been made, you will be asked to pay the balance and seek reimbursement from your insurance company.

Credit History: You give us permission to check your credit and employment history and to answer questions about your credit experience with us. We have the option to report your account status to any credit reporting agency such as a credit bureau.

Waiver of confidentiality: You understand if this account is submitted to an attorney or collection agency, or if we have to litigate in court, or if your past due status is reported to a credit reporting agency, the fact that you received treatment at our office may become a matter of public record.

Charges to Account: We shall have the right to cancel your privilege to make charges against your account at any time. Future visits would then need to be paid in full at the time of service.

Insurance Release: You authorize 5th Avenue Dental, LLC to release any necessary information requested by your insurance carrier and authorize payment directly to 5th Avenue Dental, LLC for any benefits available under your insurance plan.