

Restoration Dental
Financial Policy

We attempt to give you an accurate estimate of your total fees prior to starting your treatment. However, due to the nature of dental treatment, there are situations when the treatment may change. We will do our best to inform you about changes to the treatment plan as quickly and accurately as possible.

Total payment for services rendered is due at the time of treatment. In order to make payment arrangements as convenient as possible for you, while at the same time maintaining operation of our office in the highest standard of care, we do offer the following payment options:

Pre-Payment: Some patients prefer to pre-pay toward their dental treatment. We will be happy to assist you with your pre-payment up to three months prior to the treatment. When you have pre-paid for treatment your check out time is reduced and you are able to go about your day. Please insist on a receipt with every payment you make.

Cash/Money Order/Personal Checks: Cash/money order/personal check payments are always welcome. *Total payment for the service rendered is due at the time of service.* However, there will be a \$50.00 return check fee for returned checks.

Credit/Debit Cards: We accept all debit cards and most major credit cards (Mastercard, Visa, Discover, American Express).

Insurance: We will gladly accept, and as a courtesy, bill your dental insurance (if we can verify active coverage). Prior to treatment being rendered you will receive a treatment plan that will be explained to your full satisfaction. Please understand this is an estimate made to the best of our ability based on the information your insurance carrier has provided us. If you are required to pay a co-payment or deductible, it will be due at the time of service. If there is a balance left on your account after your insurance carrier pays, you will be responsible for the balance and you will receive a statement.

Payments/Special Financing: Our office also works with Care Credit to assist you with your payments. For qualified applicants, interest-free payments can be spread over a three, six, or twelve month period.

Regarding parents or guardians who are divorced, separated, or single:

The parent of guardian noted as the responsible party on the initial new patient form for the child's account is financially responsible. If the child has a secondary insurance, we will be happy to file (provided we are given all applicable information that we are able to verify). However, we are not in a position to mediate payment arrangements between parents/guardians.

***Any balance over 90 days old is considered delinquent and will be forwarded to a collection agency.

Signature

Date