

#### Financial Policy

Payment for services, including deductibles and copayments, are due at the time of service unless other arrangements have been made prior to treatment. Payments may be made using cash, check, or credit cards. Any arrangements for third-party financing must be made before starting treatment.

Capital Region Complete Dental Care and Implants is not in network with any insurance company, however we are able to file the claims for many insurance companies in order for you to receive your benefits. The insurance contract is an agreement between you and the insurance company. You are ultimately responsible for all charges. We cannot guarantee that any coverage estimated by your plan will be paid once a claim is filed. **If you receive a statement from our office showing any amount due, we require that amount to be paid within 30 days from the statement date.**

In order to maximize your benefits, and because plans differ from carrier to carrier and from policy to policy, our office may advise you to contact your carrier or your employer's benefits coordinator for assistance in understanding your plan. Please note that dental insurance is intended to cover some but not all dental care costs, and not all services are covered by your plan. You are responsible for payment of all services regardless of the payable benefit.

Checks that are returned to our office from your financial institution are subject to a \$50 returned check fee. This fee covers the processing fees that are charged to our office. We would be happy to discuss our charges and how they relate to your particular situation.

**Missed Appointments:** Unless cancelled at least 48 hours in advance, our policy is to charge \$100. for a missed appointment. Please help us serve you better by keeping scheduled appointments.

Please indicate your understanding and acceptance of these financial policies by signing below.

Patient's name \_\_\_\_\_ Date \_\_\_\_\_

Patient, guardian or guarantor signature \_\_\_\_\_ Date \_\_\_\_\_