

# Financial Options for Our Patients

We believe it is important to provide both the highest quality dental care and to make this care affordable for our patients. The options below allow payments to be convenient and flexible. We are committed to helping you receive the dental care you desire and the most pleasant experience possible.

To help keep costs down, our goal is to eliminate sending you a bill. By having patients choose one of the payment options below, we can avoid charging higher fees to cover the additional expense of processing thousands of statements each year. By eliminating the costs associated with billing, we pass the savings along to you! **Please choose one of our convenient payment options:**

- OPTION 1**     **Payment in full at the time of treatment** with cash, check, or credit card. We offer a 5% courtesy adjustment when you chose this option. We will gladly process your insurance claim for your direct reimbursement (to you). This option is not available for PPO plans that we participate in.
- OPTION 2**     **Payment of your estimated co-payment at the time of treatment** with cash, check, or credit card following insurance benefit verification. Please be aware that we cannot guarantee this estimate and that there may be a balance after insurance pays.
- OPTION 3**     **Payment of 1/2 of fee** at first visit, remaining 1/2 at final visit.
- OPTION 4**     **Care Credit** (a national medical financing program) -- **no or low interest payment plan** based on credit approval by that program. ASK for more information.

## Your Financial Responsibility

We are happy to process any insurance claim as a convenience for you. Please keep in mind that any estimate that we provide to you is only an estimate and that you are responsible for all fees not paid by insurance. Your insurance plan is based upon a contract between your employer and your insurance company. Any dollar amount a plan reimburses for dental services is determined by that agreement between the employer and the insurance company, not by Spector Family Dental.

Please be aware that some insurance companies may not allow you to assign benefits to our office – they will only send a reimbursement check to you. **IF THAT IS THE POLICY OF YOUR INSURANCE COMPANY**, we ask that you choose an alternative payment option. We will gladly process your insurance claim for your direct reimbursement.

Default payment on account balances can result in collection fees associated with using collection agencies, attorneys, legal services and court costs. These fees will be the responsibility of the delinquent account holder and added to the balance owed by the patient.

**MISSED APPOINTMENTS.** There is a \$50 charge for all broken appointments. If you do not arrive for your appointment or if you do not give the office notice at least one full business day before your appointment, you will be charged \$50. Missed appointments increase costs for this office far greater than \$50 – PLEASE keep your appointment and help us keep fees as low as possible.

**I understand my financial options and obligations as described above.**

\_\_\_\_\_  
Signature of Patient (or Responsible Party)

\_\_\_\_\_  
Date