

Office Policy

We are happy to have you as our patient and look forward to offering you and your family the finest dental care available. We know that providing complete comprehensive dental services includes discussing all treatment and financial information.

Financial Arrangement

Before treatment is performed, we will discuss treatment and financial options. This will allow you to fully understand your dental treatment, what to anticipate in fees and allow you time to make necessary financial arrangements. **Payment will be due on the date services are rendered.** Payments may be made using cash, check, Visa, MasterCard, or Discover. We also offer Care Credit, which is a financing option that is available for healthcare expenses.

Please
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➤ Insured Patients

Our patients who have dental insurance are **expected to pay the amount of their estimated co-pay and deductible at the time of service.** As a courtesy to our insured patients, we will be happy to file your dental insurance claims. However, please remember that your dental insurance policy is a contract between you, your employer, and the insurance company.

- Every Insurance policy is different, we ask that you read and be aware of your insurance benefits, exclusions, waiting periods, and frequency limitations.
- Insurance claims usually take 30-60 days to receive payment.
- If your insurance company has not paid your account in full within 60 days, the balance will be automatically transferred to your account.

Dr. Knause will diagnose treatment based on your dental health not your insurance coverage.

➤ Non-Insured Patients

Our patients without dental insurance are expected to pay for services the day they are rendered. Payments can be made using Cash, Check, Visa, MasterCard, and Discover. Our office also accepts Care Credit, which is a third party financing company for healthcare expenses. With the Care Credit option, we can offer patients upon approval, an interest-free term loan (up to 12 months).

➤ Billing

- We will mail monthly statements out to all patients with an outstanding balance. If that balance has been outstanding longer than 30 days, it will subject to a 6% finance charge.
- Any balance 60 days outstanding will receive a letter of delinquency, allowing 15 days to pay the balance.

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- If the balance is not taken care of in the allotted time frame the account will be turned over to a third party collection agency.
- At this point, the patient will be responsible to pay the original balance with the added finance charges, as well as, the collection fee.

➤ **Appointments**

Our practice is dedicated to quality care and exceptional service. Our doctor and team spend extensive amounts of time preparing for your visit. Broken and missed appointments create scheduling problems for our team as well as other patients. However, we understand that unforeseen circumstances may arise, which may result in canceling or missing your appointment.

- If you find that you must change your appointment, we require a minimum of 48 hour notice so that we may make every effort to accommodate other patients.
- If proper notice is not received, you will be subject to a \$35.00 fee.

Please indicate your understanding and acceptance of these financial policies by signing below. For the mutual convenience of you and the practice, it is understood that this executed copy of the Financial Policy also shall cover your dependent children who are patients of the practice.

X

Patient Signature

Date: _____