



Wendell Holdbrook, DMD

Fees & Policies

Insurance

Dental insurance is intended to cover some, but not all of the cost of your dental care. Most plans include coinsurance provisions, a deductible, and certain other expenses, which must be paid by the patient at the time of services. Reimbursement amounts are not, and never have been, a guideline for quality care.

We accept most insurance. As a courtesy, we can file most claims for you. Please bring your insurance card with you on your first visit. We will work to ensure that you receive the maximum benefits to which you are entitled.

Treatment Plan Estimates

Please be advised our staff provides estimates of planned services. Keep in mind that this is only an estimate based on provided benefits and is not a guarantee of payment from insurance. If insurance pays less than anticipated you will be responsible for all additional fees. Remember it is your responsibility to know your insurance benefits.

Co-Payments

For that portion of costs not covered by insurance, we offer these payment options:

Cash or personal check

Credit Card (Visa, MasterCard, Discover and American Express)

Automatic debit from your checking account

Care Credit payment plan

Dental discount

Financial Policy

If your dental insurance permits assignment of payment, we are happy to bill your Dental Insurance Provider as a courtesy to you. We will estimate your deductible and co-pay which are payable by yourself on the day services are rendered. If assignment for payment is not permitted by your dental insurance, payment for services rendered are due in full on that day; however, we will still submit a claim to your insurance. Most Dental Insurances will send you an Explanation of Benefits (EOB), explaining payments made to the dentist, or the reason for a denial of a submitted claim. It is very important that you review any communication from your insurance company, as the EOB defines actions that may need to be performed by the member prior to any claim being settled. Submitted claims that have not been processed for payment by your dental insurance 45 days from the date of rendered services will become your financial responsibility, and a statement will be mailed to you for settlement of the account. Your dental plan benefits are a contract between the member/employer and the Dental Insurance Provider, and it is your responsibility to know what your dental plan affords you. If you have any questions regarding your dental plan benefits or the EOB please contact your Dental Plan Provider.

Cancellations: Your appointment is reserved just for you. We respect your time and make every effort to stay on schedule. If you must reschedule your appointment, we request a minimum of 24 hours notice so that your reserved time may be given to another patient in need of care.

BROKEN APPOINTMENTS: We have set aside time especially for you and we would appreciate 24 hours notice if you are unable to make your scheduled appointment. These notices allow other patients, who may be waiting or have an emergency, an opportunity to use this available time. In cases of broken appointments with less than 24 hours notice an additional fee of \$50.00 may be charged for sedation and operating Room (OR) appointments with a \$25 fee for all other scheduled appointments.

NON-INSURANCE PATIENTS: We require full payment at the time services are rendered. We accept cash, checks, VISA, MasterCard, American Express, Discover Card and Care Credit.

DIVORCED/SEPARATED PARENTAL RESPONSIBILITY: If separated or divorced, the parent bringing the children to the appointment will be responsible for deductibles and co-pay on the day of services.

RETURNED CHECKS: There will be a \$40.00 handling fee for any returned checks.

TREATMENT FEES: Our charges for treatment are based on the tooth type and difficulty. The estimate, even though not an exact indication as to the dental work required or the cost of having it done, will give you a good idea as to the condition of your child's mouth and the approximate cost of having the necessary dental work completed. If additional procedures are required, the fee will be explained at time of treatment. In the final analysis, the exact cost will be based on the work that was done and the fees that are routinely charged for the various procedures completed.

BEHAVIOR MANAGEMENT: In our practice we occasionally find it necessary to invest beyond standard appointment time in the management of certain patients. This may be due to medical, emotional, or behavioral issues. We are more than willing to provide this service; however there is a charge of an additional behavior management fee of \$50 per 15 minutes. This fee is related to the cost of committing the time and staff to achieve the optimum outcome for more sensitive patients.

A FINANCE CHARGE OF 15% A.P.R MAY BE ADDED TO ALL ACCOUNTS NOT PAID IN FULL WITHIN 45 DAYS OF COMPLETION OF TREATMENT OR ACCOUNT DUE DATE. IF THE ACCOUNT BECOMES PAST DUE THE PATIENT/GUARANTOR WILL BE RESPONSIBLE FOR COLLECTION COST OR ATTORNEY FEES THAT MAY BE NECESSARY TO COLLECT THE PAST DUE ACCOUNT.

I have read and understand the above,

(Date)

(Patient, Parent or Legal Guardian Signature)