

OFFICE POLICY ON PAYMENT TO SERVICE RENDERED

This office files insurance as a **courtesy** to our patients. Additionally, we accept assignment of benefits from your insurance company so that we can receive payments directly. Ultimately, it is the patient's responsibility to deal with his/her insurance company directly should any problems arise. Also, patients are responsible to pay their estimated co-payments directly to our office at the time of treatment. A patient's co-payment is quoted according to the information we receive from the insurance company. These co-payments are an estimate, not a guarantee. Insurance companies often will change treatment codes to provide for the minimum benefit payable. We do our best to inform the patient of the estimated co-payment, taking all of the above information in to account. We can only guarantee our actual fee for any given service.

We expect and appreciate greatly either our estimated co-payment or payment in full at the time of the visit. We do not normally extend credit and do not offer in house financing, however no interest payment plans through a third party are available for qualified applicants. If, for some reason, our co-payment estimate is off, we either send a statement for the remaining amount (statements will go out once a month until the account is paid in full) or we issue a credit on the account which can be used toward future work or refund the patient directly.

Patients who keep an unpaid account balance over **three** months will be referred to an attorney. The patient will be responsible for any collection fees charged, including reasonable attorney fees (if applicable) by us or by the agency.

I have read, fully understand, and agree to the terms of service at Burns Family Dentistry

Signed _____

Date _____

Responsible Party (if patient under 18) _____