



Financial Agreement

Welcome! We are excited and grateful you have chosen us for your dental needs. It is our goal to provide you with exceptional dental care in the most comfortable way possible. We want you to clearly understand your treatment needs as well as your financial responsibility *before* treatment begins. Earning your trust through complete transparency is our top priority.

Patients are expected to pay for our services at the time of treatment. Those with dental insurance are expected to pay the amount of their estimated co-pay and deductible at the time of treatment. We want to break down any barriers keeping our patients from receiving the dental treatment they deserve. As such, payments may be made using a variety of methods:

- Cash, check, or credit card
- Financing with CareCredit with 0% interest financing for up to 12 months.
- Our in-house membership plan for those without dental insurance.
- 5% courtesy for all services over \$500 paid in full prior to the start of treatment.

Insurance Information:

As a courtesy to you, we will gladly submit claims to your insurance provider free of charge. We will **always** help you to receive your maximum allowable benefits. In order to do this, we will need your insurance card and/or policy information on your first visit of each calendar year.

Your insurance policy is a contract between you, your employer, and your insurance carrier. We are not a party to that contract (we are not a participating provider).

You must realize that:

Dental insurance isn't really insurance (a payment to cover the cost of a loss) at all. It is actually a money benefit, typically provided by an employer, to help their employees pay for routine dental services. The employer buys a plan based on the amount of the benefit and how much the premium costs per month. Most benefit plans are only designed to cover a portion of the total cost of a person's necessary dental treatment. For example, a dentist may recommend a crown for a tooth that has extensive decay; however, the dental plan may only cover the cost of a filling. This does not mean that the patient does not need a crown, only that the benefit is limited to a filling.

****Our responsibility is to provide you with a treatment that best meets your needs -- not to try to match your care to insurance plan limitations.****

We understand insurance guidelines can be hard to understand and overwhelming at times. Our staff is trained to help you with questions you may have, so please ask us!

Your claim will be filed immediately, and benefits are expected to be paid within 30 days. If your insurance has not paid within 45 days of services rendered, you will need to make full payment to our office and be reimbursed when your insurance carrier pays. You will be responsible for any amounts your insurance carrier chooses not to pay, for whatever reason. Any amounts past due will accumulate interest at the rate of 1.5% per month.

Delta Dental Patients:

Delta Dental Reimburses Patients Directly

What does this mean for you?

- Delta Dental will not send payment for your claim to our office, therefore paying our full fee (out-of-pocket PLUS insurance portion) is required at the time of your visit.
- **You** will receive your claim check shortly after your appointment (from Delta, based on their timeline).
- When you receive your check, you can keep it and cash it yourself (provided your full balance was paid at time of service).
- If you have not received a check from your insurance company within 3 weeks of your appointment, you should call Delta to follow up on your claim.

If you have any questions, feel free to call the office at **(248) 216-1000** and ask for Kim or Eve.