

FINANCIAL POLICY

PAYMENT IS DUE AT THE TIME SERVICES ARE RENDERED. We accept cash, checks, MasterCard, Visa, and Discover. Returned checks are subject to a service charge of \$30.00 and possible loss of check writing privileges.

If there is any balance on your account after 90 days, including those that insurance has not paid, collection action will be taken. We realize that emergencies do arise and may affect timely payment of your account. If such extreme cases occur, please contact us promptly for assistance in the collection.

If it becomes necessary to collect any sum through a collection agency or attorney, then the patient agrees to pay all costs of collection, including attorney's fees, whether suit is filed or not.

CANCELED OR MISSED APPOINTMENTS:

Please be aware that we ask you to give us 24 hour notice if you need to cancel or reschedule your appointment. This policy allows us to make your appointment available for other patients waiting to be seen. If you do not show up for your appointment or cancel within the 24 hour period prior to your appointment, there will be a charge of \$65 per hour that was scheduled for you.

PATIENTS WHO SUBSCRIBE TO DENTAL INSURANCE are fully responsible for understanding the limitations of their specific plans. Please inquire as to whether your plan will allow you to see a Non-Participating dentist. Dr. Larson is a Non-Participating dentist.

We will gladly discuss your proposed treatment and do the best to answer any questions relating to your insurance. We will file your claims and any necessary information to your insurance company as a courtesy. Please be aware that you must pay your estimated portion at the time of the visit.

You **MUST** also realize that your insurance is a contract between you, your employer and the insurance company. We are not a party to that contract. Not all services are a covered benefit in all contracts. Some insurance companies arbitrarily select certain services they will not cover (e.g. more than two cleanings per year). Insurance does not always pay based on our fees. They will pay based on what their allowable fees are. You are responsible for the difference of what the insurance paid towards our fees.

If you have any questions about the above information or any uncertainty regarding insurance coverage, please do not hesitate to ask us. We are here to help you.

I have read and understand the above FINANCIAL POLICY. (Copies available upon request).

(Signature)

(Date)