

## PATIENT FINANCIAL POLICY

Our doctor(s) and staff are proud to be a team whose primary mission is to deliver the finest and most comprehensive periodontal services available today. We are concerned about your dental care and want to ensure you that it is performed in the most responsible manner. In order to assist you with the investment in your dental health, we have outlined our payment policy.

A finance charge of 1.5% per month will be applied on any outstanding balance after 30 days. There is a \$30.00 charge on all returned checks.

### First Visits (Exams or Emergencies)

It is our policy that payment is due in full at the time of service. Your first visit fee varies based on the nature of your visit and the diagnostics needed for an accurate diagnosis. For your convenience we accept cash, checks, money orders, and credit card payment (MasterCard, VISA, Discover and American Express). If you have dental insurance, as a courtesy, we will file your insurance claim for you.

### Usual and Customary Rates

Our practice is committed to providing the best treatment for our patients and we charge what is usual and customary for our area. You are responsible for payment regardless of any insurance company's arbitrary determination of usual and customary rates.

### Missed Appointments

Appointments are valuable blocks of time. When an appointment is broken or cancelled on short notice (less than 24-hours) it prevents us from helping someone else. Wasted appointment time also results in higher health care fees. In order to control dental costs for our patients, we must charge a non-refundable \$50.00 cancellation fee for all appointments that are cancelled with less than a 24-hour notification. As a courtesy to our patients, whenever possible, we will call two days in advance to remind you of your appointment. Please help us control costs as well as serve you better by keeping scheduled appointments.

For patients who require initial periodontal therapy (scaling and root planing), periodontal surgery and implant therapy:

- Pay at the time of service if no dental insurance is provided.
- We will file your insurance for you, collect the copay portion, based on the estimate we received from the insurance company, and collect the difference from you at the time of service.
- We will be happy to file a pre-treatment estimate for you prior to treatment, but keep in mind that this may take several weeks and may increase the risk of your infection/disease to worsen. Keep in mind that most insurance companies DO NOT require a pre-treatment estimate to pay for treatment.
- Outside financing is possible through CareCredit, Lending Club, and Progressive. Sign up for CareCredit online or in our office.

For your convenience, payments may be made with cash, personal check, VISA, MasterCard, Discover or American Express. If you have any problems or questions, please call our staff at (919) 510-8888. They are well informed and up-to-date on insurance policies. Ask to speak to Laurie if you have any questions or concerns regarding your initial visit.

If you have dental insurance, please bring your insurance card with you to your first appointment.

**Please note:** Patients under 18 must be accompanied by a parent or guardian at the consultation appointment.

Please notify our office if you have a medical condition or concern prior to your first exam (e.g. artificial heart valves or joint replacement requiring pre-medication, uncontrolled diabetes, or hypertension). If you have been fearful in the past of dental exams, please inform the receptionist so that we can make sure you have an extraordinarily pleasant visit with us.

We will complete an in-depth medical and dental health history and a thorough examination to measure for jaw/dental bone loss, loose teeth, bite, oral cancer screening, TMJ (temporomandibular joint), and other signs of periodontal disease.

I have read the North Carolina Periodontics Patient Financial Policy and I understand and agree to it.

Signature of Patient or responsible party \_\_\_\_\_ Date \_\_\_\_\_