



2505 WYCLIFF AVE STE B | DALLAS TX, 75219 | (214) 780-0600

Written Financial Policy

Thank you for choosing Life Dental Center. Our primary mission is to deliver the best and most comprehensive dental care available. An important part of the mission is making the cost of optimal care as easy and manageable for our patients as possible by offering several payment options.

Payment Options:

You can choose from:

- Cash, Visa or MasterCard

We offer a 5% courtesy accounting adjustment to patients who pay for their treatment with cash prior to completion of care for treatment plans of \$1500 or more.

- Convenient Monthly Payment Options¹ from CareCredit Healthcare Credit Card
 - o Allow you to pay over time
 - o No annual fees or pre-payment penalties

Please note:

Life Dental Center requires payment at the beginning of your treatment. If you choose to discontinue care before treatment is complete, you will receive a refund less the cost of care received.

Payment responsibilities of minor patients: Adults accompanying minor patients are responsible for full payment at the time of treatment. For unaccompanied minors, charges will have to be pre-authorized to an approved credit plan, approved credit card or pre-pay by cash at the time of treatment.

For plans requiring more than 2 appointments, alternative payment arrangements may be provided. For larger, more comprehensive treatment plans of \$1500 or more, a 25% deposit is required to secure your initial treatment appointment.

For patients with dental insurance we are happy to work with your carrier to maximize your benefit and directly bill them for reimbursement for your treatment.²

Dental Insurance: If you have dental insurance, please read the following facts carefully. a) Dental insurance is a contract between you and your insurance company.

- b) As a courtesy to you, we will be glad to file your treatment with your insurance company.
- c) Please be aware that we are only capable of approximating your portion of payment, based on the estimate of benefits that we receive from your insurance company.
- d) Most insurance companies will not cover 100% of all dental expenses. It will be your responsibility to pay the deductibles, co-pay or any other balance in full at the time of service, if not paid for by your insurance company.
- e) All accounts with insurance claims filed by our office are DUE IN FULL within thirty (30) days of billing or ten (10) days after payment, whichever comes first.
- f) It will be your responsibility to resolve, benefit reductions or non/under-payment by your insurance company.

- g) Insurance companies may try to dictate the treatment by considering some services to be unreasonable or unnecessary. In any event, you as a patient will be responsible for all the charges for the services provided at our office, which may not be paid for by your Insurance Company.
- h) Our practice is committed to providing the best treatment for our patients. We charge what is usual and customary based on our services provided in our area. You are responsible for any charges, regardless of the insurance company's arbitrary determination of usual and customary, rates. Pre-certification and Pre-determination of a dental insurance benefit is primarily is the patient's responsibility.

A fee of \$25 is charged for patients who miss or cancel more than 2 times in a calendar year without 24-hour notice.

Our office is a reporting member of a national credit bureau. Payment for returned checks will only be made by either cashier's check or cash with an additional \$30 processing fee for each returned check. Should litigation ever become necessary for collecting outstanding debt, you, the patient, will agree to pay all court cost and attorney fees.

If you have any questions, please do not hesitate to ask. We are here to help you get the dentistry you want or need.

Patient, Parent or Guardian Signature

Date

Patient Name (Please Print)

¹Subject to credit approval

²However, if we do not receive payment from your insurance carrier within 30 days, you will be responsible for payment of your treatment fees and collection of your benefits directly from your insurance carrier.