



Financial Policy

Thank you for choosing our office as your dental health provider. We are committed to providing you with the highest quality dental care so that you may full attain optimum oral health. Please understand that payment of your bill is considered part of your treatment.

Payment is due at the time service is provided. Our office accepts cash, personal checks, MasterCard, Visa, Discover and CareCredit. Additional financing is available upon request and approval.

Please note: Returned checks will be subject to additional fee.

Do you have insurance?

- As a courtesy to you, we will help you process all your insurance claims. Please understand that we will provide an insurance estimate to you. However, it is not a guarantee that your dental insurance will pay exactly as estimated. Your insurance company and your plan benefits determine the amount paid. We do our absolute best to make sure your estimate is as accurate as possible.
- All charges you incur are your responsibility regardless of your insurance coverage. We must emphasize that as your dental care provider with your best interests in mind, our relationship is with you, not your insurance company. Your insurance policy is a contract between you, your employer and your insurance company. Our office is not a party to that contract.
- 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 payments regardless of any insurance company's arbitrary determination of usual and customary rates.
- We ask that you sign this form and/or any other documents that may be required by your insurance company. This form instructs your insurance company to make payment directly to Davis Family Dentistry, LLC.
- We ask that you pay the deductible and copayment, which is the estimated amount not covered by your insurance company.
- Insurance payments are typically received within 30-60 days from the time of filing. You may be asked to contact your insurance company after 60 days to. Make sure payment is expected. If payment is not received or your claim denied, you will be responsible for paying the full amount at that time.
- We will cooperate fully with regulations and requests of your insurance company that may assist you. Davis Family Dentistry, LLC will not enter a dispute with your insurance company over any claim.

We thank you for the opportunity to serve your dental health care needs and welcome any questions you may have concerning your care or our financial policy.

I have read, understand and agree to the above terms and conditions. I authorize my insurance company to pay my dental benefits directly to my dental office.

Signature of Patient, Parent or Guardian

Date