



## Financial Agreement

**PLEASE READ CAREFULLY**

We are committed in helping all of our patients receive the needed treatment to achieve and maintain optimal dental health. We offer the following financial agreement and payment options.

**\*\*\* All estimated fees are due at the time of service\*\*\***

### **For our patients with dental insurance:**

We will gladly process your primary and secondary insurance claims **with the following understanding:**

Initial \_\_\_\_\_ \* Dental Insurance is an agreement between you and your insurance company; therefore we can only **estimate** your dental benefits. This estimate is **not a guarantee of payment** by your insurance company. You are responsible for any charges your insurance company does not pay.

Initial \_\_\_\_\_ \* Your out of pocket portion & deductibles are due at time of service

Initial \_\_\_\_\_ \* Insurance payments not paid after 60 days will become your complete responsibility. You agree to pay your full balance after 60 days from date of service

### **If we are not billing insurance:**

We offer a 5% cash courtesy discount for treatment paid in full at the time of service, or for seniors 59 and over we offer a 10% courtesy discount. For your convenience we accept cash, checks, VISA, Mastercard, American Express and Discover.

### **Financing Options:**

We also offer financing options with no interest payments up to 18 months on approved credit.

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Patient/Responsible Party

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Date