

Financial Policy - Please Read This Carefully

Option 1. PREPAYMENT: We will allow a full 5% adjustment for **PREPAYMENTS IN FULL BY CASH, CHECK or CREDIT CARD** under the following conditions:

1. Prepayment **at time of scheduling** the appointment
2. Insurance patients can prepay your deductible and co-pay in full at the time of scheduling and receive a 5% discount on that amount

Option 2. Payment in Full by CASH or CHECK on the day of treatment

Option 3. Credit Cards: Master Card, Visa, American Express and Discover accepted. Most Flex Spending/Health Savings cards are accepted and processed as a credit card.

Option 4. Payment Plans through Care Credit:

1. Interest free for 6 months for a minimum of \$200.
2. Interest free for 12 months with 10% down using another form of payment.
3. Extended payment plans for 24, 36, 48 or 60 months with simple interest (minimum of \$1000).

***INSURANCE:** Our office understands the value of insurance benefits to our patients and will gladly work with you to help get the maximum benefit available to you. All fees of \$200 or less must be paid at the time of the appointment. We will accept assignment of benefits. This means that you must sign the portion of your insurance form that "assigns" payment to our office. **NO dental insurance plans cover 100% of the cost of your treatment.** Because of this and the extreme delay in receiving payment from the insurance company, **YOU WILL BE ASKED TO PAY YOUR DEDUCTIBLE AND YOUR PORTION OF THE CHARGES ON THE DAY THE SERVICES ARE RENDERED.** We will estimate your coverage as closely as possible, but until we receive the payment from the insurance company, it is **JUST AN ESTIMATE.**

We will assist you in dealing with your insurance company, but the ultimate responsibility lies with you. **IF FOR SOME REASON YOUR INSURANCE COMPANY HASN'T PAID AFTER 60 DAYS, THE BALANCE WILL BE DUE IN FULL FROM YOU.** Our estimates are subject to the final approval by your insurance company and could change the amount due from you to our office.

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- All quoted fees are honored for 3 months from the date first quoted.
 - We do not accept worker's comp claims, auto insurance claims or medical insurance claims.
 - There will be a \$35 fee for returned checks.
 - **Any account balances that are 90 days past due will be turned over to our collection's department. Overmeyer Family Dental is not responsible for any damage done to anyone's credit.**

My signature below acknowledges that I have read, understand and agree with the terms of the financial policies of this office. I have been given a copy for my records and for reference at a later date.

Patient's Signature (parent/guardian of minor under 18)

Date