

Thank you for choosing us as your health care provider.

Our entire philosophy of our practice revolves around providing the best dentistry has to offer and creating optimal health for all our guests. We realize that optimal health is a choice and that choice is yours. We are committed to your treatment being successful. Please understand that payment of your services is considered a part of your treatment.

Our fees are usual and customary for our area and your **estimated** portion of the fees will be computed at the time of your appointment. We gladly accept VISA, Mastercard, Discover, American Express, checks, or cash. For low monthly payments, we also offer financing through **Lending Club** and **Care Credit**.

### Regarding Insurance

Your benefit plan is a contract between you and your insurance company. We are not a party to that contract. Please remember that no insurance company attempts to cover all dental costs. Some companies pay fixed allowances for certain procedures and others pay a percentage of the charge. This does not dictate what treatment should be done or change the recommended treatment plan of the doctor; rather it is the limitation of the insurance benefits allowed.

Our Comprehensive and Holistic approach allow us to recommend the most conservative and biological options. We will make every effort to assist you in collecting the maximum benefits on all claims; however the responsibility for payment will be yours. All co-pays and deductibles are due at the time of treatment. You are responsible for payment regardless of any insurance company's arbitrary determination of usual and customary rates. In the event that your insurance coverage changes, it is your responsibility to inform us.

A 1.8% rebilling fee will be applied to accounts over 30 days old. If an account becomes delinquent, the guarantor will be responsible for all legal fees incurred in collection of that account. There is a \$25.00 service charge for any returned checks. I have read the above statements. I fully understand and agree to these terms and conditions.

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Client Signature

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Date