



Financial Options

Thank you for choosing our office for your dental needs. We realize that every person's financial situation is different so we provide a variety of payment options to help you receive the dental care you need and deserve, allowing you to enjoy a healthy, beautiful smile with respecting your budget. Dental treatment is an excellent investment in your general health and self esteem.

Currently we accept all private insurance plans. We are contracted with Delta Dental as Premier Providers, and contracted with the American Dental Plan of Wisconsin, Ameritas, Humana and WEA. Insurance benefits you receive depend on the policy which your employer offers. Due to a Wisconsin Statute Law, discounts on patient's co-payments are not allowed. Accurate dental policies must be provided at the time of service. We will not resubmit or refund fees after services have been paid for by either patient or insurance plan due to inaccurate plan information.

Often times treatment fees may not be covered 100% and some services may be classified as elective. To maintain the practice operations and prevent potential misunderstandings, we ask patients to accept and adhere to the following financial arrangements regarding their dental treatment.

Optional Payment Terms:

1. **Full Payment Day of Service Cash Discount:** We offer a 5% accounting courtesy for all treatment paid in full, by check or cash, at the time of service. For patients 65 or older we offer 10 % for treatment paid in full, by check or cash, at time of service.
2. **Major Service - Two Payment Option:** We offer a cash or check two-payment option for treatments over \$500. We ask that you pay one-half of your treatment costs at the first appointment and the second half in the next month.
3. **Credit Card Payment Option:** We offer, with an established payment history with our office, a credit card payment option, which allows you to make three equal installments by credit card. One-third payment is due at the first appointment, one-third is due thirty days later, and the remaining one-third is due sixty days from the initial appointment. Our office personnel will charge these payments to your credit card on the due dates. We will have you sign an agreement if this option is chosen.
4. **Monthly Financing Option:** We offer a monthly financing program that allows you to pay for treatment in low monthly payments. This program is offered by Care Credit. This program can provide payment plans with no down payment, low interest rates, and no prepayment penalty. Please ask for a brochure.

Payments are expected at the time services are rendered. We accept cash, checks, debit cards, Visa, MasterCard and Discover. A \$30.00 fee will be applied for any returned checks.

****Broken appointments:** A specific amount of time is reserved especially for you and we strongly encourage all patients to keep their appointments. Broken or missed appointments affect many people. If you must change your appointment, we require at least 24 hours notice. If two (2) broken or missed appointments occur or two (2) cancellations occur without 24 hour notice, our office reserves the right to not schedule any subsequent appointments as well as charge a missed appointment fee of \$30.00.

****Late Policy:** We make every effort to be on time for all our appointments. Unfortunately, when even one patient arrives late, it can throw off the entire schedule for that session. In addition, rushing or "squeezing in" an appointment short changes the patient and contributes to decreased quality of care. In light of this, adult patients arriving more than 10 minutes and children patients arriving more than 5 minutes after their appointment time will be asked to reschedule. We apologize for any inconvenience this might cause.

Signature _____ **Date** _____