

Athens Oconee Dentistry at the Exchange

2470 Daniells Bridge Road, Athens, GA 30606 (706)549-2440

Written Financial Policy

Thank you for choosing Athens Oconee Dentistry at the Exchange. Our primary mission is to deliver the best and most comprehensive dental care available. An important part of the mission is making the cost of optimal care as easy and manageable for our patients as possible by offering several payment options.

Payment Options:

Cash, Check, Visa, MasterCard, American Express or Discover Card.

We offer a 5% bookkeeping courtesy to patients who pay for their treatment with cash or check prior to their first appointment (for treatment plans of \$1000 or more).

CareCredit Medical/Dental Card (up to twelve months, no interest). Treatment must be \$1000 or more.

Insurance

Dental insurance is intended to cover some, but not all of the cost of your dental care. Most plans include coinsurance provisions, a deductible, and certain other expenses which must be paid by the patient at the time of services. Reimbursement amounts are not, and never have been, a guideline for quality care.

We can file most insurance claims as a courtesy to our patients. Please bring your insurance plan information with you during each visit. We will work with you to ensure that you receive the maximum benefits to which you are entitled. If you have insurance, you will be expected to make an estimated payment for that portion not covered by your insurance plan. You will be responsible for any fees insurance does not cover after 60 days from the date of treatment.

Broken Appointment Charge

Patients who do not give a 48 hour notice of cancellation for more than two appointments within the last 90 days will be asked to make a \$30 deposit before the office will schedule another appointment or give a credit card guarantee. The deposit will apply toward the fee for

the services rendered, however it is non-refundable. The appointment will not be made until the \$30 is received.

Returned Checks

There is a \$30 returned check fee.

Rebilling Fee

In an effort to contain the rising cost of health care, our practice will be charging a rebilling fee on all balances over 60 days. The fee will be 1 ½ % per month or 18% per annum. Payment is expected at the time of treatment.

If you have any questions about your insurance plan or payment options, please do not hesitate to ask. We are here to help you get the dentistry you want and need.

Patient, Parent or Guardian Signature Date

Patient Name (Please Print)