

APPOINTMENT POLICY

- The scheduled appointment is reserved specifically for your child. Any change in this appointment affects many patients. If a cancellation is unavoidable, please call the office at least **48 hours prior** so that we may give that time to another patient
- There are times when our schedule is delayed in order to accommodate an emergency. Please accept our apology in advance should this occur during your appointment. We will do the exact same if your child is in need of emergency treatment.
- If you arrive 10-15 minutes late for your appointment, you may be asked to reschedule for the next available appointment time.
- Broken or missed appointments affect many people. If two or more missed/broken appointments occur without prior notice, we reserve the right to dismiss your family from the practice and NOT reschedule any subsequent appointments.

If you have any questions, please feel free to ask our staff or call our office. We are here to help in any way we can. We appreciate you entrusting your child's dental health to us. Thank you!

FINANCIAL POLICY

- Please understand that payment of your bill is considered part of your child's treatment.
- **Be aware that the parent bringing the child to the appointment is legally responsible for payment of all charges. We cannot send statements to other parties.**
- Most insurance companies only pay a portion of the fees incurred. We require that your estimated share for each procedure be paid at the time of treatment.
- As a courtesy, we will bill your insurance carrier for you. If your insurance denies services, the balance is then due and payable by you, unless other payment arrangements are made.
- Insurance coverage is an agreement between you and the insurance carrier; therefore, the account is in your name and is your financial responsibility for any unpaid balance. We will assist you with inquiries to your carrier. However, it is our experience that insurance carriers respond best when the inquiry comes from you.
- For our patients without insurance: Payment is required at the time of service. Payment arrangements can be made on a case-by-case basis.
- **We require that all outstanding balances be paid in full within 30 days after receipt of statement.** If not paid in full, a payment arrangement must be set up, and the account will accrue an interest rate of 2.08% monthly (25% annually).
- We take all forms of payment, including cash, check, credit card, and also offer Care Credit options. We can help you with the application process and you will receive an answer immediately after applying.
- **If we do not receive payment or you have not contacted us within 90 days of your first statement, further action will be taken by our collection agency.** We utilize Power County Collections for services, and inquiries about collection balances or payments can be made to them, at (208)226-1974. Thank you for your understanding!

Signature_____

Date_____