

## **Brothers Dental Financial Policy**

Thank you for choosing our office for your dental needs. We realize that every person's financial situation is different. For this reason, we have worked hard to provide a variety of payment options to help you receive the dental care you need and deserve that allows you to enjoy a healthy, beautiful smile with respect to your budget. Dental treatment is an excellent investment in an individual's medical and psychological care. We are always available to answer your questions or assist you in any way we can.

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.

**Payments are expected at the time services are rendered.**

**We accept cash, checks, and all major credit cards (Visa, MC, and Discover)**

### **Optional Payment Terms:**

1. **Full Pay Cash Discount:** We offer a 10% accounting courtesy for all treatment that is paid in full (cash or check) if services are prepaid for in advance. 5% if using a credit card (**This is for those who do not have a dental insurance.**) We cannot discount on any PPO, HMO or Medicaid Insurance Plans (due to the fact these are already discounted fee plans). If you have Dental insurance your Copayment is DUE the day of treatment per your agreement with your insurance plan.
2. **Major Service - Two Payment Option:** We offer a two-payment option for Crown, Bridge, and Denture treatment. We ask that you pay one-half of your co-payment at the first appointment and the second half at the seat date appointment. NO discounts can be made for these arrangements.
3. **Credit Card Payment Option:** We allow (**with a signed agreement form and 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. Ask for a Form. (We Will Charge an extra \$30.00 for billing charges to do this option \$10 per month)
4. **Term Loan:** By arrangement with Care Credit, we offer our patients, upon approval, an interest-free term loan 6 months (up to 24 months) with no down payment, no annual fee, and no prepayment penalty. Please ask for an application. This arrangement cannot have any discounts – due to the fact the office pays the interest rate so you can benefit. There is also up to 60 months with interest rate of 14.9%. (This would be paid by you)

**IF YOU REQUIRE NITROUS THE CHARGE IS \$55.00 Minimum per hour!**

**Broken appointments:** A specific amount of time is reserved especially for you and we strongly encourage all patients to keep their appointments. If you must change your appointment, **we require at least 24 hours notice to avoid a \$50.00/per hour scheduled cancellation fee.** Fee must be paid to reserve additional appointments. If you miss more than 3x you will be dismissed from our practice.

***If any unpaid Balances are not paid after 60 days a \$10.00 per Statement charge will appear – Then after 90 days there will be a additional 15% finance charge that will accrue. If not paid within 120 days – the account may be turned over to collections. If any outstanding balances are due (no other work will be done until the pre-existing balance is paid in full for work already done.) only emergency work will be allowed. And must be paid in full before any emergency treatment can be done!***

***We do not send out any statements with a zero balance or credit balance – you will be notified by phone or mail - unless you have prepaid for tx to be done. If balance remains a credit more than 90 days you will be called and asked what you would like done with the credit.***