

EASTERN SHORE DENTAL CARE FINANCIAL POLICY

Insurance related topics and financial responsibility

Your insurance plan requires that you present your current Insurance card at each and every visit. Although we will assist you, it is ultimately your responsibility to be aware of the extent of your coverage, limitations, and exclusions before the time of service.

Patients with insurance: Your co-payment is due on the day of service. We can only estimate your co-payment because insurance plans have so much variance. If your insurance company pays less than estimated, the additional co-payment is due at that time. If your insurance company has not paid for a service within 90 days, you will agree to pay the balance due in full at that time. If your insurance company pays you and not our office, you will be required to pay for our services when rendered.

Broken Appointments: A high number of broken appointments increase costs of delivering dental care for you and our other patients. With that in mind, we ask for at least 24 hours advance notice if you cannot keep your appointment. A minimum fee of \$50 will be charged for a missed appointment with less than 24 hours notice. If you arrive late to your scheduled appointment, we reserve the right to reschedule the appointment.

SEPARATED/DIVORCED PARENTS

For parents who are separated or divorced and need care for their child/children, the parent bringing the child to the office authorizes treatment, and therefore is responsible for payment on the date of service. If there is a divorce decree requiring the other parent to pay a portion or all of the treatment costs incurred, it is the authorizing parent's responsibility to collect from the other parent. Eastern Shore Dental Care will not make special provisions or act as a mediator in collection of payment. Unless Eastern Shore Dental Care has a court order(s) that states the contrary, Eastern Shore Dental Care is legally obligated to disclose medical information to both parents/legal guardians. If at any time legal matters become too intrusive for our staff, we reserve the right to dismiss the patient from the practice.

Payment Policy: Payment for treatment is made on the day the service is rendered. For extensive treatment plans, payment plans are available and must be made before treatment is started.

Grounds for Dismissal (Include but not limited to)

Non-payment of patient responsible balances in timely manner

Multiple missed appointments

Profane, abusive, or demeaning language to staff

Signature on file: I authorize Eastern Shore Dental Care to submit claim forms to my insurance carrier, and my signature below can take the place of an original signature on all submissions.

HIPPA Consent: I acknowledge receipt of this office's NOTICE OF PRIVACY PRACTICE.

Signature: _____

Print Name: _____