

Financial Agreement

Please read entire form carefully, then sign and date the bottom.

Payment is due at the time services are rendered

The front desk staff will estimate the amount you owe for procedures the doctor or hygienist has completed or those procedures which are in progress. Remember, this is only an estimate. The actual out-of-pocket expense may be less than or greater than the amount estimated and collected. You may be reimbursed or apply the excess to another date of service if we have collected too much.

Some insurance plans require the patient to pay only a percentage or co-payment directly to our office. Some plans require the patient to pay the entire amount due for that visit. Some plans will reimburse the covered amount only to the patient. We will work with your plan, and submit the form necessary to receive the reimbursement as a service to our patients.

The following are acceptable methods of payment: Cash, Personal Check, Care Credit Master/Visa and American Express

Insurance coverage

We accept all PPO and indemnity plans. All plans have a unique schedule of covered services depending on what plan you or your employer has purchased. There is no guarantee that services will be covered. You, or the person responsible for this account, will be responsible for payment of non-covered procedures. There may be additional charges to cover the costs of parts or lab fees, depending on the treatments provided and type of insurance coverage. If you wish we can send a pre-determination to your insurance carrier. The advantage of this is knowing approximately what your out-of-pocket expenses will be, but a disadvantage is that treatment is delayed. This in itself could complicate matters as problems worsen.

Our office will submit any claims to the patient's insurance company and apply those payments to their account. We will accept these insurance payments as payment in full, or according to insurance schedule, unless the treatment is not a covered service according to the plan. Please note that you, as the patient, are responsible to know what your insurance policy covers, this includes tracking your yearly maximum.

Major Work

Patients receiving major work (crowns, bridges, dentures) or bleaching kits must have their portions, including lab fees, completely paid off before the work can be delivered or cemented.

Returned Checks

There will be a returned check fee of \$30 for any bounced check. This fee may increase depending on the bank's charges. This fee will be added to the outstanding balance and may incur finance charges if not paid within the 30 day grace period.

Cancellation Policy

Our time is as important as yours. We attempt to schedule as efficiently as possible to reduce waiting time. We require patients to cancel appointments the day before the appointment or sooner.

I understand the financial policies of Deborah Diaz Murphy DDS and agree to them.

Signature of Responsible Party

Date