

## Written Financial Policy

Thank you for choosing Arrington Family Dentistry. 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:**

You can choose from:

- Visa, MasterCard, American Express, Discover Card, Cash or Check
- We offer 5% courtesy accounting adjustment to patients who pay for their treatment prior to their scheduled appointment.
- NO INTEREST Payment Plans from Care Credit or Smart Care (Campus Federal Credit Union)

\*Allows you to pay over time with NO INTEREST.

\*Convenient, Low monthly payment plan also available.

\*No annual fees or Pre-Payment penalties.

### **Please Note:**

#### **-Payment at time of service:**

We require full payment at the time of service.

#### **-Insurance Filing:**

For patients with dental insurance we are happy to work with your carrier to maximize your benefits. We will complete and file insurance forms for you. Please note: Insurance companies may reimburse at a lower rate than we estimate. When this occurs, there may be an "after insurance" balance in which you are responsible.

#### **-Cancellation Policy:**

A fee of \$50.00 is charged for patients who do not provide a 24 hour notice before cancellations.

If you have any questions, please do not hesitate to ask. We are here to help you get the dentistry you want or need.

Patient, Parent,Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Patient Name (Please Print) \_\_\_\_\_