

SOUTHERN OREGON DENTAL FINANCIAL POLICY

Method of Payment and Discounts

- We offer a 5% discount on payments made the day services are rendered. Services must be paid in full to receive this discount. We also offer a 5% senior discount with services paid in full at the time of service.
- We accept VISA, MasterCard and Discover for your convenience. No discount on credit card payments.
- **Payment in full is expected for any procedure under \$300 for initial visit.**

Care Credit

- Southern Oregon Dental also offers Care Credit. This is like a dental VISA card. New patients apply for credit and if accepted you are granted a line of credit to pay your dental bill. You are then billed by Care Credit for monthly payments.

New Patients

- For new patients without insurance coverage, we expect payment in full at the time of the first visit or establishment of a credit history with our office.
- For new patients with insurance, we require the estimated patient portions of the total charge to be paid at the time services are rendered. Once payment has been received from the insurance company, any credit balance will be refunded promptly.
- All new emergency patients must pay in full at the time of the appointment.

Billing for all Non-Insurance Accounts

- If you do not have insurance, we require a **30 percent** payment on services rendered over \$300. (Financing for Balances exceeding \$1000.00 is at the discretion of the Office Manager.) First Pacific Corporation offers a payment plan consisting of **four** monthly payments on the remaining balance. Minimum monthly payments on the remaining balance can be made to *First Pacific Corporation* before the 20th of the month.
- If you have any additional services and have a previous balance, we require a **30%** down payment to be made on new charges. Your remaining balance will then be added to your previous balance and your minimum monthly payment will increase accordingly.
- In order to devote more of our time to you, we employ *First Pacific Corporation* as our billing service. They prepare your monthly statement, receive and record your payment. Not to be confused with a collection agency, *First Pacific Corporation* is an organization of people willing to assist you with any questions you may have concerning your account with us.
- A **late charge** may be assessed if your minimum payment is not received by the due date. The amount of the late charge will be as authorized under the laws of **Oregon, 5% of the past due amount or \$5.00 whichever is greater.**
- A **finance charge** is imposed on those charges not paid in full within 60 days of the date you were first billed. The finance charge is a minimum of **\$1.00 or 1.25%** of the balance due per month under the laws of **Oregon.**

WE ARE NOT A PARTICIPATING PROVIDER FOR ANY INSURANCE CO. EXCEPT ADVANTAGE DENTAL.

Billing for Insurance Accounts

- We will estimate your insurance co-payment at the time of your appointment and require payment of that amount at the time services are rendered. However, Southern

Oregon Dental cannot be held responsible for claims denied due to unforeseen clauses, or changes made to you policy.

- We will submit your insurance claims for you; however, you will be required to make monthly payments on the remaining portion until the balance has been paid in full.
- Filing insurance claims is a courtesy that we extend to our patients. **All charges are your responsibility from the date services are rendered.** If after 60 days from filing your claim we have not received payment from your insurance carrier, we will ask you to pay the remaining balance and ask you to discuss your claim with your insurance company.

Usual and Customary Rate (UCR)

- Our practice is committed to providing the best treatment possible for our patients. We charge what is *usual and customary* for our area. You are responsible for paying the balance in full, regardless of your insurance company's determination of *usual and customary* rates. Keep in mind that the rates paid by your insurance carrier are determined by the insurance carrier and your employer and, in some situations, have no bearing on the real *usual and customary* rates charged in the local areas.

INSURANCE FOR DEPENDANTS

- We will try to verify your dependant's eligibility with your insurance co., however we cannot guarantee your dependants eligibility. It is your responsibility to ensure dependants meet age and student status requirements for coverage. Southern Oregon Dental cannot be responsible for claims denied due to age limits or student status issues.

Special Treatment Plans

- Procedures often have to be performed unexpectedly. For patients who wish to extend payments over a longer period of time than our normal payment plan, please discuss your situation with our financial coordinator.

Divorces

- Both partners are responsible for debts incurred up to the date of the divorce decree. The parent who request treatment for a child is responsible for balance of services rendered for your child.

Appointment Failures and Cancellations

- A fee may be charged for all appointment failures and appointment cancellations less than 24 hours in advance.

We appreciate you as a patient and your cooperation in complying with this policy. We will continue to offer you optimum dental services.

I have read, understand and agree to the above policy. I understand that I am fully responsible for the fees for services rendered, regardless of any insurance I may have.

Signature of Account Holder

Date