

BASKING RIDGE PEDIATRIC DENTISTRY

FINANCIAL POLICY

Please read our financial policy below. We require that you read and sign prior to any treatment.

FEES AND PAYMENT POLICIES

In an effort to make needed services more affordable, payment for professional services is due at the time dental treatment is provided. If you have insurance, then your estimated co-payment is due as service is rendered. If an account shows an overdue balance, future treatment may be delayed until the balance is cleared.

APPOINTMENTS

We ask for your utmost courtesy regarding your scheduled appointments. Please allow **24 hours** prior to the appointment time if you must cancel or reschedule. We understand unforeseen business and personal emergencies do occur, however, repeated last minute cancellations and broken appointments will incur a charge of **\$50**. Most insurance companies will not reimburse the cost of a missed appointment.

INSURANCE

Fact 1 – No insurance pays 100% of all dental procedures

Dental insurance is only meant to be an aid in receiving dental care. Many patients think that their insurance pays 100% of all dental fees. This is not true. Most plans only pay between 50-80% of the average total fee. Your employer has determined the amount of coverage according to the contract set up with the insurance company.

Fact 2 – Benefits are not determined by our office

Insurance companies often state that the dentist's fee has exceeded the usual, customary, or reasonable fee (UCR). This statement is very misleading and inaccurate.

The insurance company gathers data and arbitrarily chooses a level they call "allowable" UCR fee. The data is usually 3 to 5 years old and the "allowable" fees are set up by the insurance company so they can make a profit. Most dentist's fees are higher than what the insurance company considers an average fee.

We participate with the following insurance companies:

Delta Dental Premier, Metlife, Cigna DMO and PPO, Ameritas, DHA/Assurant, Aetna PPO, Principal PPO, Guardian PPO, United Healthcare, United Concordia and Lincoln Financial

We will bill to all insurance providers directly as long as we have been supplied with all the necessary subscriber information. Without the necessary insurance information, we cannot submit claims to them. If we are considered an "out of network" provider with your insurance company, you will be required to pay in full at time of service. We can submit your claim to your insurance company and reimbursement will be sent directly to the subscriber. If we are considered an "in network" provider we will accept payment directly from your insurance company and you will only be responsible for your estimated co-pay at time of visit.

Please understand that we file dental insurance as a courtesy to our patients. We do not have a contract with your insurance company, only you do. We are not responsible for how your insurance company handles its claims or for what benefits they pay on a claim. We can only assist you in estimating your portion of fee of treatment. We at no time guarantee what your insurance will or will not do with each claim. We cannot be responsible for the accuracy of any insurance information. Your insurance company representative have provided this information to us. It is your responsibility to be familiar and understand your insurance policy and terms.

You are responsible for payment of any balance due not paid by your insurance company, including and unpaid deductible amounts.

THE PARENT WHO BRINGS THE PATIENT FOR TREATMENT IS RESPONSIBLE FOR ALL FEES INCURRED AT THE TIME OF SERVICES ARE RENDERED. WE CANNOT SEND STATEMENTS TO OTHERS/OTHER PARENT.

I have read the above conditions of treatment and payment and agree to their content.

Signature of Parent/Guardian

Date DD/MM/YYYY

Relationship to patient