Centreville Dental Associates, PC 6019 Centreville Crest Lane Centreville, VA 20121 703-266-2000

## **FINANCIAL POLICY**

Welcome to our office. We are glad that you have chosen us as your dental provider and we will do our best to ensure ease in completing your treatment. We invite you to discuss with us any questions regarding our services or your treatment plan. The best health services are based on a friendly, mutual understanding between provider and patient.

## Dental Insurance (PPO, HMO, or Discount Plans)

As a courtesy to you, the dental office will file claim on your behalf and await payment from your carrier. However, the deductible and co pays are payable at the time of service. While dental insurance is a benefit to you, please remember that your insurance is a contract between you and your carrier. Our office will estimate what your payment should be based on information obtained from your insurance carrier. Please keep in mind that these are "ESTIMATES" and we have no way of knowing exactly what the insurance will pay until they have indeed paid. All insurance companies has disclaimer saying that "any benefit quoted or pre authorized are not a guarantee of payment, final decision will be made when actual is received". Therefore, you may receive a statement after treatment is completed and your insurance carrier has responded to your claim. Any amount not covered by your insurance carrier is your responsibility and should be paid within 30 days. If the account is not paid within 90 days of service and no financial arrangement have been made, you will be responsible for legal fees, collection agency fees, and other expenses incurred in collection of your account balance. If any treatment requires medical billing, we will print a claim form for you, but medical billing is your responsibility. We will only submit dental claims.

CHECKS RETURNED BY YOUR BANK UNPAID WILL RESULLT IN A FEE OF \$25.00. CASH OR CREDIT CARD WILL BE ONLY FORM OF PAYMENT WE CAN ACCEPT FOR ANY FUTURE SERVICES. It is your responsibility to notify us of change in insurance policy. Our office will not be responsible for any unpaid claims due to medical billing, change in insurance or unable to provide student/add'l information request by insurance company from you. We try our best to know your insurance coverage however; it is your responsibility to know regarding your insurance coverage and limitations.

Payment options

We accept Cash, Checks, Credit cards (Visa, MasterCard, American Express, and Discover) and Care Credit

Name

Signature

Date