

**Our Financial Policy**

Thank you for choosing our office as your dental healthcare provider. We are committed to providing you with the highest quality dental care, so that you may fully attain optimum oral health. We realize, that patients have different needs, so we have worked hard, to provide you, with a variety of payment options, so you may receive the beautiful smile you deserve with respect to your budget.

**Insurance**

**Dr. Andrea Rice** is a preferred provider with numerous insurance carriers. For your convenience, we will be happy to prepare and submit your dental claim. Please be advised, that your dental insurance, is a contract involving you and your employer. We do our best to estimate your percent of coverage and ask for your out of pocket portion at the time of treatment.

Any remaining balance, after insurance has paid, is your responsibility. Insurance companies often will not reveal completed figures and will not pay for services that have been downgraded by your employer’s selection of coverage; for example, some carriers will only pay for silver fillings, as opposed to white fillings.

**Treatment Plan Estimate**

Based on the treatment plan attached to this form, we have **estimated** that your out of pocket portion will be: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Treatment Plan:

**Payment methods:**

Cash, money orders and checks: We offer a 5% discount for cash payments in full at the time of service.

Credit Cards (Visa and MasterCard) No discount will be offered for this type of payment.

This estimate, is subject to change, based on your insurance contract with your employer, and may not include your annual deductible.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_