Miller and Associates
FAMILY DENTISTRY

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Financial Policy

Part of our mission at the offices of Miller and Associates is to provide you with cost effective, state-of-the-art dental care. It is our goal to assist you in obtaining and maintaining the highest level of personal dental health available today.

We want you to have the smile you desire and deserve!

Private Insurance and Cash Pay Patients

We provide the following payment options to our patients.

1. Cash
2. Visa, MasterCard, Discover and Checks.
3. Monthly payment arrangements through a third party lender.

Dental insurance can help aid patients with the cost of healthcare, however, it was never meant to provide 100% coverage for all services that you may want or need. Most dental insurance policies *pay only a percentage* of the total cost of basic care. Your policy is a contract between you, your employer, and your insurance company. We are not notified when changes are made in your policy, coverage, or filing addresses. Therefore, we need your help in providing us with complete, current and accurate insurance information in order to make estimates about your possible benefits.

We will gladly discuss your insurance coverage with you and we will *estimate*, to the best of our ability, what benefits you might expect from the policy your employer has provided for you. ***For any treatment plan of $300.00 or more, we will submit a pretreatment estimate to your insurance company.*** **The patient's part of the fee will be due at the time of treatment unless otherwise arranged.**

Ultimately, it is the patient or the patient's legal guardian, who is responsible for paying, in-full, all fees incurred through our office, regardless of any other party/agency that might be involved in your payment arrangement. We expect patients to make payments as arranged in a timely manner.

In case of a minor child or dependant patient, the parent or guardian presenting the child to our office will be considered to be the person responsible for the account. Our office cannot enter into negotiating benefits that might be due from an absent parent or legal guardian.

Insurance Patients

We require a copy of a current insurance card and photo ID for all patients. **Please bring the current card with you to each appointment**. We will require a picture identification to verify the ownership of the insurance card. If you are designated for a co-payment, it will be due at the time of check-in for each appointment.

I have read the financial policy of Miller and Associates and I understand and accept my responsibilities as a patient in this office.

SIGNATURE _____ DATE _____