

Payment Policies

We are pleased to answer any questions you may have about your bill. While dental benefits vary among the many employer benefit plans, we can often help you understand your coverage. Our payment policies are as follows:

General Policy

1. Payment is due in full on the day you receive dental services. We cannot bill for these services. We accept cash, checks, Care Credit, Visa or MasterCard.
2. If you are having crowns, veneers, onlays, mouth guards or other work that must be sent to a dental laboratory, we require 50% deposit on the day impressions are taken. (These labs require payment on the day they receive your impressions). At your final appointment to receive your crowns, onlays, etc. we will ask for final payment in full.
3. For all procedures exceeding \$1000, we require that a credit card be placed on file, even if your dental insurance is to be billed. Your card will not be billed until 30 days after your insurance company settles your claim. Within that period you are welcome to pay by check if you like.
4. Late balances are charged a service charge of 1.5% (18 APR). We do not offer payment plans or third party financing.

Dental Insurance

1. With the exception of some preventative procedures such as cleanings and x-rays, your dental insurance company will not fully cover the cost of treatment. You are responsible for the portion they do not cover, payable on the day you receive treatment. Typical reimbursements by insurance companies range from 40 to 60%.
2. Some insurance companies, including Delta Dental and Blue Cross/Blue Shield will not reimburse you for white composite filling. Instead, they reimburse you for less expensive silver/mercury fillings. If you have one of these plans, you may be responsible for up to 60% of the cost of these fillings.
3. Most dental insurance plans have a maximum yearly benefit of \$1000, while some plans may be more. We cannot submit work done in one calendar year for the next calendar year.
4. Most dental plans have a deductible that you must pay each year, typically \$50. Usually the deductible does not apply to preventative work.
5. Since we administer hundreds of employer benefit plans, we cannot know the details of every plan. It is the patient's responsibility to know the details of their coverage. To submit an insurance claim, you must present a dental benefit card with your group number on it.

I have read and agree to the payment policies of Old South Dental. If my credit card is on file, I give my permission to charge my card for balances not covered by my Dental Insurance.

Name

Date