

Our Office Financial Policy

Our “No Surprises Policy”

You will be consulted before any treatment is undertaken. The investment necessary to complete your treatment is based on an estimate derived from your examination with Dr. Ellsworth. Should additional unforeseen problems arise as treatment progresses, this estimate may have to be revised.

Patients With No Dental Insurance

Cash patients are expected to pay with cash check, or credit card the day the service is rendered unless specific arrangements are made in advance.

Patients With Dental Insurance Coverage

You may direct your insurance company to pay their share of costs directly to our office (this is called Assignment of Benefits). As a courtesy to our patients, this office accepts insurance assignments (and will give you credit for this anticipated amount). Acceptance of insurance assignment by this office does not absolve the patient of full responsibility of charges for treatment rendered.

Your insurance company will be billed for services as they are rendered. We ask that you pay your estimated portion of the charges on the day of your appointment. We do our best to estimate as closely as possible to the amount we believe the insurance company will pay. Our office can make no guarantee of what the insurance company will pay for sure. The estimate provided to a patient is to be considered a guideline until the final insurance payment is received and the patient’s account has been reconciled. If you ever have any questions regarding your insurance, please contact our Insurance Coordinator and she will be happy to assist you. We are always happy to be of assistance in helping you maximize your dental benefits.

Missed Appointments

No charge will be made for rescheduling an appointment, provided at least 48 working hours notice is given. If proper notice is NOT given there will be a \$75 charge that will be added to your bill. When scheduling an appointment for a special discounted rate or ad, if 48 hours working notice is not given the discounted rate will be forfeited.

If you have any question, please ask. We are here to help. No question is too small for you to ask us, and we encourage you to call or even come by any time you have a question.

Signature of Responsible Party _____

Date _____