TRUMMER FAMILY DENTISTRY

(Financial Policy)

Welcome to our practice. Rest assured that our mission is to provide you with excellent care at reasonable fees. In order for our practice to consistently provide these services it is necessary for our patients to understand and honor their financial responsibilities.

Many of our patients count on dental insurance to help with the cost of their treatment. We can help by electronically submitting your claims for you; however we encourage you to become familiarized with your policy prior to presenting to our office for care, as we cannot be accountable for the caveats and nuances written into the vast number of different insurance plans. Dental insurance DOES NOT typically cover 100% of all treatment. Preventive treatment (cleanings, exams, x-rays) is typically covered at a high level (70-100%). When basic or major restorative work is begun, applicable deductibles and co-pays will need to be satisfied. To expedite your care, please bring a copy of your plan description highlighting the deductibles, coverage levels and annual maximums etc. to your first visit with us.

In the absence of such a plan description, it is the policy of this office that when basic restorative services are initiated an ESTIMATED annual deductible and 20% co-pay will be collected that day. For major services your ESTIMATED deductible and ESTIMATED 50% co-pay will be required at the time of service. These are ESTIMATES, and depending on insurance claims processing, there may be additional fees due. In the event of better than expected insurance coverage, a prompt refund will be issued. If insurance is not involved in your care, payment will be due at the time services are rendered.

The person bringing a child or minor patient to an appointment (regardless of relation) must be prepared to satisfy any applicable financial responsibilities for that child's appointment.

Past due accounts may be assessed billing and/or finance charges. Should collections or legal action be required to satisfy your financial obligation, additional fees will be assessed.

By understanding your insurance, and our financial policy, you will allow us to focus on keeping the care of you and your family at the highest level.

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Your signature below co	onfirms that you have read our policy and will abid	le by it.