



DENTAL DESIGN

Laren Garfield DDS | Asher Gelman DMD | Glenn Shulkin DDS

FINANCIAL POLICY

We are committed to providing you with the best possible care and are pleased to discuss our professional fees with you at anytime. Your clear understanding of our financial policy is important to our professional relationship. Please ask if you have any questions.

- All patients must complete the patient registration forms before seeing the doctor.
- Full payment is due at the time of service.
- We accept cash, personal checks, Visa, Mastercard or Discover.
- We accept no-interest financing plans through Citi-Health Card and Care Credit.

If you have dental insurance and you provide us with the necessary information to allow us to submit a claim on your behalf, then we will help you receive your maximum benefits.

Insurance is a contract between you and your insurance company. We are not a party to the contract in most cases (accept for insurance networks). When we file claims, we do it as a courtesy to our patients. We will not become involved in disputes between you and your insurance company regarding deductions, co-payments, covered charges, secondary insurance, allowable amounts, etc. other than to supply factual information as necessary. You are responsible for the timely payment of your account.

It is your responsibility for payment of all dental services for yourself or your dependents at the time of service unless financial arrangements are made prior to the treatment. Further, it is understood that a minimum of 1.5% finance charge (18% annually) will be added to any balance over 60 days past due. In the event of default you will be responsible to pay legal interest on the indebtedness, together with such collection costs and reasonable attorney fees as may be required to effect collection of this debt.

REGARDING YOUR APPOINTMENTS

A minimum charge will be made for failed or cancelled appointments without prior notification of 24 hours. Once an appointment is made, please remember this time has been reserved only for you.

Signature

Date