



GREYSTONE SMILE DESIGN

Financial Guidelines

Thank you for choosing our office for your dental needs. We realize that every person's financial situation is different. For this reason, we have worked hard to provide a variety of payment options to help you receive the dental care you need and deserve that allows you to enjoy a healthy, beautiful smile with respect to your budget. Dental treatment is an excellent investment in an individual's medical and psychological care. We are always available to answer your questions or assist you in any way we can.

To maintain the practice operations and prevent potential misunderstandings, we ask patients to accept and adhere to the following financial arrangements regarding their dental treatment.

Optional Payment Terms:

1. **Full-Payment Courtesy (non-insured):** We offer a 5% accounting courtesy for all treatment that is paid in full at the time of service on treatment exceeding \$300.
2. **Interest-Free 4-Month Payment Plan:** We allow (with a signed agreement form and established payment history with our office), a Credit Card Payment Option, which allows you to make four equal installments by credit card. One-fourth payment is due at the first appointment, and all remaining payments are billed each month to your credit card.
3. **Interest-Free 12-Month Payment Plan:** By arrangement with Care Credit, we offer our patients, upon approval, an interest-free term loan with no down payment, no annual fee, and no prepayment penalty. Please ask for an application. Minimum treatment cost of \$300.
4. **Low Fixed-Interest 2-5 Year Payment Plans:** By arrangement with Care Credit, we offer our patients, upon approval, an interest-free term loan (up to 60 months) with no down payment, no annual fee, and no prepayment penalty. Please ask for an application. Minimum treatment cost of \$1,000.
5. **Senior Citizens:** We offer a 5% courtesy to all senior citizens at the time of service.
6. **Pay As You Go:** This option allows you to pay for treatment as it is performed. It is a great way to ease into the treatment plan.

It is the policy of our office to collect payment at the time of service or *prior* to beginning treatment. We may require a deposit be paid at the time of scheduling to reserve a future appointment.

In the event there is a balance remaining after all insurance claims have been paid, you are responsible for paying the balance of your treatment within 30 days or interest fees may apply. In the event there is a credit on your account after all insurance claims have been paid, we will issue a check for that credit immediately after all claims have been paid.

Before starting any treatment with our office, we will always provide the most accurate estimate of your personal financial responsibility. Please understand that we do everything we can to ensure this estimate is as accurate as possible, but that it is based only on the information you and your insurance company have given our office.

Signature

Date