

Goldsboro Dental Arts Shaun White, DMD

Paying for Treatment

Thank you for choosing Goldsboro Dental Arts for your dental care. We are committed to the success of your treatment. Please read through our Financial Policy, which we request that you sign and return.

FULL PAYMENT IS DUE AT THE TIME OF SERVICE

- WE ACCEPT CASH, CHECKS, VISA, OR MASTERCARD
- WE ALSO OFFER FLEXIBLE FINANCING OPTIONS
- Provided through Care Credit, who offers a variety of financing options to suit your needs. Please see the front desk for details.

Insurance Coverage:

Our practice participates with the following insurance plans: Aetna, Delta Dental, Cigna PPO, Dental Benefit Provider, Humana, GEHA, Medicaid, MetLife, NC Health Choice, United Concordia, United Healthcare, and Tricare/United Concordia. If you have any questions whether or not our practice participates with your specific plan, please ask the insurance coordinator. If your plan is one with which we participate, we will bill and collect according to your plan. **ALL** deductibles, co-payments and disallowed charges will be due at the time of service. NOTE: Since many insurance types only cover basic fillings, the cost of our fillings may exceed your coverage, and if so, **you will be responsible for paying the balance.**

If we do not participate with your insurance plan, we will submit your dental claim form as a courtesy to you. Although your insurance company may pay at a higher rate, a payment of 60% is required at the time of service for all treatment other than cleaning appointments. For cleaning appointments, a payment of 30% is required. You may also inquire about our financing options available through Care Credit.

Please Note:

- Children under 18 years of age must have a parent or guardian present in the office throughout entire appointment.
- Please keep our office updated of address/phone #/insurance changes. IF WE ARE UNABLE TO REACH YOU TO CONFIRM YOUR APPOINTMENT, WE CANNOT RESERVE THAT TIME FOR YOU. IF YOU DO NOT UPDATE INSURANCE INFO, THE DENIED CLAIMS WILL BE YOUR RESPONSIBILITY. Medicaid Coverage: YOU MUST BRING YOUR INSURANCE CARD WITH YOU to each appointment and your \$3.00 co-pay if you are 21 years of age or older.

Regard Missed Appointment Policy:

When we schedule an appointment, that time is reserved for you. If you must change or cancel an appointment, please give us 24-48 hours' notice. There is a fee for both missed appointments and ones cancelled without 24-hours' notice (\$50 operative appt/\$100 for crown/bridge work). After more than 1 missed appointment we will not be able to provide you with another appointment and will ask that you find another dentist. Missed new patient appointments are also cause for dismissal. Please help us serve you better by keeping scheduled appointments.

Thank you for reading our Financial Policy. If you have any questions about it, please feel free to ask us.

Signature: _____ Date: _____