

Patient Agreement

Welcome to Sherstoff Dental. We want to make your relationship with us both productive and enjoyable. We are happy to answer any and all of your questions regarding treatment, insurance and your payment options. In an attempt to simplify your treatment needs, we can design a plan for you, which strives to accommodate your time schedule and your financial considerations.

Because we use the very best dental materials and lab technicians, we must require payment at the time of service, unless other arrangements have been made in advance.

Patients with Insurance

If you are a member of a dental insurance plan and have chosen us as a provider of your care, it is your responsibility to:

- Provide us with accurate and current insurance information.
- Pay your deductible and your *estimated* * co-pay at the time of service.
- Pay for services that are not covered by your insurance company.

Your costs will depend on what type of dental insurance policy your employer has selected for you. We do not work for your insurance company, but we will file your claim as a courtesy for you at no charge.

*Please understand that all co-payment amounts are "estimates" until we know exactly what your insurance company actually pays.

All Patients

Kindly give 48 hours notice if you cannot keep your appointment time. This will prevent incurring a \$55 administrative charge to you which is not covered by insurance.

Account balances over 30 days will be subject to a finance charge of 1.5% per month. Balances older than 90 days are considered "delinquent" and will be sent to a collection agency. This action adversely affects personal credit ratings and results in additional fees all of which are the responsibility of the patient or the responsible party.

We accept Mastercard, Visa, Discover and personal checks (with proper identification).

We offer interest free financing and budget payment plans to all who qualify.

I have read and fully understand my responsibilities under this policy.		
Patient/Guarantor Signature	Date	7