

FINANCIAL POLICIES

Dr. Charles A. White

Dr. White and his staff are committed to providing you with the best possible periodontal services, both diagnostic and therapeutic. Please review our office financial policies so that you will have a clear understanding of how we expect payment for your periodontal services. If you have any questions, our office staff will be happy to assist you.

- 1. Dr. White's office is a fee for service office. Payment is expected for all services the day they are rendered unless other arrangements are made in advance. We do not offer payment plans for periodontal services.**
- 2. We ask that you pay in full for the initial periodontal examination and radiographs (x-rays) following your first visit to our office. Dr. White will provide a written treatment plan with fees for all anticipated periodontal services following your initial examination.**
- 3. If you plan to use dental insurance to help pay for your periodontal therapy, you will be required to provide our office with the necessary information to file claims.**
- 4. To reduce your out-of-pocket expenses, we will accept assignment of benefits for periodontal services. At each visit to our office, usually you will be asked to pay a portion of each fee.**
- 5. If you have dental insurance, please read the following carefully:**
 - a. Your dental insurance is a contract between you, your employer, and the dental insurance company. We are not a party to that contract and in no way do we control your dental benefits. Not all services are covered benefits in all insurance contracts. The covered benefits in your contract may or may not meet your dental needs.**
 - b. We will submit a claim to your dental insurance company once for periodontal services. If we submit a claim with incomplete information, however, we will be happy to submit a second claim. We are required to use specific dental codes for periodontal procedures. We cannot use inappropriate codes in an attempt to gain increased insurance benefits.**
 - c. If your insurance fails to pay for periodontal services within 45 calendar days or 30 workdays, it is your responsibility to pay for the services in full and to contact your insurance company to discuss your dental benefits.**
 - d. We do not file claims to secondary dental insurance. It is your responsibility to submit claims to secondary insurance after primary insurance benefits are received. Make sure you keep the EOB from your primary insurance to submit to your secondary insurance.**
 - e. Delta Dental Plan of Arkansas (DDPA). Our office is a member of DDPA.**
 - f. Blue Cross/Blue Shield of Arkansas (BC/BS). Our office is not a member of BC/BS of Arkansas. BC/BS of Arkansas refuses to send payment for services to this office. Therefore, BC/BS of Arkansas patients must pay in full for all periodontal services. We will submit your claims but BC/BS will send payment directly to you.**
- 6. We honor quoted fees for periodontal services for 6 months.**
- 7. We ask that you give us 24-48 hours notice for appointment changes or cancellations, except in the case of an emergency. Without adequate notice, you may be charged a \$35 cancellation fee.**
- 8. We accept Visa, MasterCard, Discover and personal checks. If your budget does not permit the recommended periodontal services, we offer Dental Fee Plan. Dental Fee Plan offers interest free financing.**

Dr. Charles A. White

Patient Signature _____ Date _____

Please sign and return this form the day of your initial examination.

We look forward to seeing you!