



Dr. Ryan Sigmon

Financial Policy

Welcome to Compass Dental. We are happy to have you as our patient and look forward to offering you and your family the finest dental care available. The following is a statement of our Financial Policy.

Before treatment is performed, we will discuss treatment and financial options. This will allow you to fully understand your dental treatment, what to anticipate in fees and allow you time to make the necessary financial arrangements.

Payment is due at the time services are rendered. For your convenience we accept Care Credit, cash, checks, Visa, MasterCard, Discover, and American Express, or registered checks. All payment is due at the time services are rendered. Returned checks from your financial institution are subject to a \$40 returned check fee. With self-pay, a 5% discount is available to those patients who pay in full at the time of service.

Emergency clients, new to our practice, should expect to make a payment at the time of service. Once established as an active patient, we will be happy to discuss other payment options.

Insurance benefits are not determined by your dental office, and we are not in network with any insurance company. Your insurance policy is a contract between you and your insurance company. Your insurance coverage and benefits are your responsibility. Insurance is not a guarantee of payment; it often does not cover all the costs involved in treatment. As a courtesy, we will be happy to file your claim for you if you present your dental insurance wallet card and all required employer information. You will be expected to pay for services rendered if this office is unable to verify your insurance information before treatment. Any deductible or estimated co-payment amount will be due at the time of treatment.

If payment for services already rendered has not been paid in full within 30 days, either by you or your insurance company, the remaining balance for your treatment is considered due and must be paid by you. Payment options and financial arrangements are available for some dental treatment. Please speak to us to see if this is an option, and to make arrangements prior to commencing treatment.

Appointments are reserved exclusively for you. Any appointment requiring 2 hours of time, or over a thousand dollars of treatment require a \$100 reservation fee. If an appointment is not canceled at least 24 hours in advance, or if you fail to keep your appointment, you will be charged a seventy-five-dollar \$75 fee. This fee will not be covered by your insurance company. If you are more than 15 minutes late, we will be required to reschedule & you will be charged a \$75. Repeatedly cancelled, rescheduled, failed or late arrival will result in dismissal from the practice.

Separated or divorced parents of minors, who are responsible for one half of the cost of a child's/children's dental care: The parent who brings the child in to the dental appointment is responsible for paying the co-payment or full fee. If it is necessary, we are happy to hold a credit/debit number from the non-custodial parent on file.

I have read and understand this financial policy.

Printed Name

Signature

Date

