



We are committed to providing only the best dental care possible. To give you the best experience possible, we have found that when everyone is clear on payment for treatment, the confusion and misunderstanding is kept to a minimum. Our main concern is that you receive the proper and optimal treatment necessary to restore and maintain your dental health.

\*\*\*We ask that you realize that we do NOT work for an insurance company; rather we work 100% for our patients. We feel that insurance can be a great benefit for many patients and want you to know we will do everything in our power to ensure you get every benefit allotted in your insurance contract. However, the treatment we recommend and the fees we charge **will always be based on your individual needs, not your insurance coverage.**

**POLICY (Please initial each number):**

1. \_\_\_\_\_ Patients are expected to pay for services at the time they are rendered.
  - Our patients who have the benefit of **in-network** dental insurance are expected to pay the amount of their **estimated** co-insurance at the time of service.
  - Our patients who have **out-of-network** insurance benefits are expected to pay the total amount on the day they receive treatment. Integrated Dental of Florida will file the dental insurance claim on your behalf and request that the dental benefits be sent directly to you, the patient. The reason for this policy is many dental insurances will not send payment to an out of network provider.
  - Payments may be made using cash, check, Visa, MasterCard, Visa, American Express and/or Discover. A returned check is subject to a \$50 returned check fee.
  - As a courtesy to our patients, we offer flexible payment options that can be discussed prior to treatment with our financial team. Options include Care Credit and Prima Health payment plans.
2. \_\_\_\_\_ **Deposits** will be collected upon booking any restorative and/or hygiene appointment that is lengthy in time and/or services. This ensures that our schedule is utilized in its most effective and efficient way for every patient. The deposit amount will be 25% of the estimated patient portion.
3. \_\_\_\_\_ If for any reason patients need to cancel or reschedule their appointment, Integrated Dental must be aware of this within 48 business hours of the scheduled appointment time. If 48 business hours notice is not given, a \$50 per hour fee will be given or the patient forfeits the paid deposit. This also ensures that the schedule is utilized wisely and effectively for every patient.
4. \_\_\_\_\_ For any unpaid balances, you will receive 3 monthly statements. If Integrated Dental needs to send out a second statement with no contact from you, a \$25 statement fee will be assessed. After 3 statements have gone unpaid, your account will be turned over to collections and you will be responsible for any legal, collection fees and court costs.

**Things to remember as a patient with dental insurance:**

1. Dental insurance is a benefit to help cover the **basic** costs of dental treatment; most plans do not cover a patient's true needs.
2. We offer complimentary benefit checks for patients that we complete at your initial appointment. Based on the information your dental insurance company gives us, our finance team can provide you with an **estimate** of your out-of-pocket cost. This estimate is never a final payment as your insurance dictates what your final payment is once services are billed.

By signing below, you are indicating that you fully understand and accept Integrated Dental's financial policy. For the mutual convenience of you and Integrated Dental, it is understood that this executed copy of the Financial Policy also shall cover your dependent children who are also patients.

---

Signature

---

Date