845 S Main St Ste 130 | FOND DU LAC WI, 54935 | (920) 922-7012

## Written Financial Policy

Thank you for choosing Associated Family Dentistry. Our primary mission is to deliver the best and most comprehensive dental care available. An important part of the mission is making the cost of optimal care as easy and manageable for our patients as possible by offering several payment options.

## Payment Options:

You can choose from:

- Cash, Check, Visa or Mastercard

We offer a 5% courtesy accounting adjustment to patients who pay for their treatment with cash or check prior to completion of care.

- NO INTEREST<sup>1</sup> Payment Plans<sup>2</sup> from CareCredit
  - Allow you to pay over time with NO INTEREST<sup>1</sup>
  - o Convenient, low monthly payment plans<sup>2</sup> also available
  - No annual fees or pre-payment penalties

Please note:

Associated Family Dentistry requires payment prior to the completion of your treatment. If you choose to discontinue care before treatment is complete, you will receive a refund less the cost of care received.

We accept payment in thirds for treatments over \$500.

For patients with dental insurance we are happy to work with your carrier to maximize your benefit and directly bill them for reimbursement for your treatment.<sup>3</sup>

A fee of \$25 is charged for patients who miss or cancel more than 1 time in a calendar year without 24-hour notice.

Associated Family Dentistry charges \$25 for returned checks.

If you have any questions, please do not hesitate to ask. We are here to help you get the dentistry you want or need.

Patient, Parent or Guardian Signature

Date

## Patient Name (Please Print)

<sup>1</sup>If paid within the promotional period. Otherwise, interest assessed from purchase date. Minimum monthly payment required. <sup>2</sup>Subject to credit approval

<sup>3</sup>However, if we do not receive payment from your insurance carrier within 90 days, you will be responsible for payment of your treatment fees and collection of your benefits directly from your insurance carrier.