

Humphries Family Dentistry

Our Financial Policy

Thank you for choosing our office as your dental healthcare provider. We are committed to providing you with the highest quality dental care so that you may fully attain optimum oral health. We realize that patients have different needs so we have worked hard to provide you with a variety of payment options so you may receive the beautiful smile you deserve with respect to your budget.

Insurance

Humphries Family Dentistry is a preferred provider with numerous insurance carriers. For your convenience we will be happy to prepare and submit your dental claim. Please be advised that your dental insurance is a contract involving you and your employer. We do our best to estimate your percent of coverage and ask for your out of pocket portion at the time of treatment.

Any remaining balance after insurance has paid is your responsibility. Insurance companies often will not reveal completed figures and will not pay for services that have been downgraded by your employer's selection of coverage; for example, some carriers will only pay for silver fillings as opposed to white fillings. In our office, we only place white fillings due to superior ease of placement, esthetics, and predictability.

Our desire is to keep your fees as low as possible. One way that we strive to minimize fees is to omit paper statements. In order to facilitate this process, we ask that you pre-authorize a credit card for any remaining balance that exists after insurance has paid. We will call to inform you of your remaining balance prior to processing your payment. Ultimately, you are the responsible party for all charges incurred in our office.

Payment Options

Please select the payment option that works best for your budget and for preauthorized payment after insurance: Mastercard, Visa, Discover, Cash, Check, Money Order, Cashiers Check, Care Credit 6 and or 12 month at 0% interest with minimum monthly payments.

CC# _____ Exp; _____

I have read and understand the above mentioned policy: _____

Signature