

Dianne Applegate, DDS
Financial Agreement

We are committed to providing you with the highest quality dental care and up-to-date information to better help you with your oral health. Our financial policy is intended to help you understand your options and obligations and to help us provide you with excellent customer service.

- ❖ We will do our best to provide you with an estimate of your insurance co-pay prior to your appointment. The “estimated co-pay” is due at the time of service. We will gladly help you take advantage of your insurance benefits but please remember that all charges are ultimately your responsibility regardless of insurance coverage.
- ❖ For patients without insurance we offer a 5% courtesy discount for payment in full with cash, check or card at the time of service.
- ❖ For seniors age 60 and older without insurance coverage we offer a 5% discount with cash or check only.
- ❖ Returned checks for insufficient funds or closed accounts are subject to a \$35.00 fee. If a check is returned, cash, Visa, MasterCard, or CareCredit will be the only accepted form of payment.
- ❖ We offer a credit program through a third party agency, CareCredit™. CareCredit offers flexible monthly payment at zero percent interest rates for 6, 12 or 18 months. You can get more information or apply online at www.carecredit.com or by calling our office. We will gladly help you apply and set up a payment plan when you come in for your appointment.

Payment options we accept:

- Cash/Check
- Visa/MasterCard
- American Express
- Discover Card
- CareCredit™

ASSIGNMENT OF INSURANCE BENEFITS: I hereby authorize Dianne Applegate, DDS, LLC to submit claims to my insurance carrier for all services rendered. I direct third party payers (insurance companies) to issue payment directly to Dianne Applegate, DDS.

Appointments canceled without 48 business hours notice are subject to a \$60.00 cancellation fee per hour.

I have read and understand the above financial and cancellation policy.

Signature: _____ Date: _____

Printed Name: _____