



DENTAL CLINIC

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FINANCIAL POLICY

MEDICAID:

CHILD (under 21 yrs) Please make sure your Medicaid number is active. We will accept Medicaid as payment in full. If not active, you will be considered a SELF-PAY patient.
ADULT (over 21 yrs.) Medicaid ONLY pays for emergency tooth extractions. It does not cover cleanings, fillings, etc. You will be considered a SELF-PAY patient.

SELF-PAY:

You will be responsible for payment on or before the day that dental treatment is provided.

COMMERCIAL DENTAL INSURANCE:

Please bring your insurance card with you to all appointments. As a courtesy to our patients, we will file your insurance and also accept insurance payments. You are responsible for any co-payments and/or deductibles the day treatment is provided. Also, notify our office if you have any secondary dental insurance coverage.

If the dentist/clinic is not a contracted provider with your insurance and/or your insurance does not accept assignment of benefits, payment in full will be due on or before the day treatment is rendered. We will file your insurance for you and you will be reimbursed directly by your insurance carrier.

Insurance coverage is ESTIMATED - your actual indemnity may be less. You the patient are responsible for all amounts not covered by your insurance carrier. Year-to-date used benefits and remaining deductible amounts are not affected until the procedure is completed and therefore are not used in this determination of benefits.

SURGERY:

Your estimated co-payment and/or deductible is due on pre-admission day. This payment applies only to the dental treatment rendered. Hospital and anesthesia services are billed separately.

PAYMENT OPTIONS

1. Cash
2. Check
3. Credit Card (VISA, MASTERCARD, DISCOVER)

You are responsible for any amount not covered by your insurance.
Returned check fee: \$25.00. If not picked up, it will be turned over to the District Attorney's Office.
BALANCES OVER 90 DAYS WILL BE TURNED OVER TO COLLECTION SERVICES.

I have read, understand and agree with the above financial policy.

Signature

Date

11/6/13





NOTICE REGARDING COMMERCIAL DENTAL INSURANCE COVERAGE

It has come to our attention that many dental insurance plans are only paying for fluoride for children one time per year and sometimes not at all. In our efforts keep our patients informed and to provide quality dental treatment which we believe is necessary for overall health and well-being, we highly recommend that all children receive fluoride treatments every six months. We will continue with this philosophy and will provide this treatment for children regardless of what the insurance will or will not pay. This may incur a charge which you may be responsible for. If you would like to decline fluoride, please let us know in advance. We are unable to be entirely informed about the coverage of all dental insurance plans. We encourage all of our patients to inquire and be aware of your coverage with your dental insurance carrier.

Patient/Guardian's Signature: _____

It has come to our attention that many dental insurance plans are only paying for radiographs (dental x-rays) one time per year. The OUCP dental clinic providers will determine whether a child or adult requires repeat radiographs (x-rays) based upon caries and disease risk. We will continue with this philosophy and will provide this treatment for adults and children regardless of what the insurance will or will not pay. This may incur a charge which you may be responsible for. If you would like to discuss radiographs (x-rays), please let us know in advance. We are unable to be entirely informed about the coverage of all dental insurance plans. We encourage all of our patients to inquire and be aware of your coverage with your dental insurance carrier.

Patient/Guardian's Signature: _____

10/19/11

