



Woods Lake Dental Financial Policy and Agreement

Accepted Payment Types

We accept cash, check, and most major credit cards. For your convenience, outside payment plans are also available, through Tua Pay (for accounts over \$500).

Professional Courtesy

- Uninsured patients over 65 will receive a 5% discount on all fees that are paid in full on the day of treatment or at the beginning of a treatment series.

Minors

Payment for services for the treatment of minors is the responsibility of the adult accompanying that minor. Payment can be made by the methods listed above.

Insured Patients

- It is the patient's responsibility to bring their current dental insurance information to the office at the time of appointment.
- Insurance benefits are determined by your insurance provider. Your insurance policy is a contract between you and your insurance company. Any questions regarding your benefits should be directed to your insurance carrier directly.
- Any deductible or estimated co-payment amount will be due at the time of treatment. Proof of insurance is not a guarantee of payment and not all services are covered benefits in all contracts. You will be expected to pay up front for services rendered if the office is unable to verify your insurance information before any treatment. Your insurance is only based on an estimate; it is never a guarantee of coverage. You will be responsible for anything not paid for by your insurance company.
- We submit insurance claims as a patient courtesy and will try to help all patients receive the maximum benefits their plans will allow for the treatment they need.

Late Cancellations or Missed Appointment Fees

For fees associated with late cancellations and missed appointments, please refer to the Woods Lake Dental Cancellation Policy.

Patients with outstanding bills over 90 days must be paid in full or enrolled in a payment plan before they will be seen for their next appointment.

I understand and agree that regardless of my insurance status, I am ultimately responsible for the balance on my account for any services rendered. I have read the above financial policy for Woods Lake Dental and understand my obligations.