

HealthySmiles



Healthy Smiles, Inc.

Office Policies

Thank you for choosing Healthy Smiles, Inc. as your dental care provider. We are committed to providing you with the highest quality dental care possible. The following is a statement of our office policies, which we require you to read and sign prior to any dental treatment. If you have any questions, please do not hesitate to ask us.

Dental Insurance

As a courtesy to you, we are happy to handle submission of claims to your primary insurance company and accept payment directly from them. Secondary insurance submission is the responsibility of the patient. Your patient co-pay, including any deductible, is due in full on the day services are rendered. Any amount that is left unpaid by your insurance or is not paid within 60 days by your insurance is your responsibility. You are responsible for monitoring your insurance coverage and payments. In the case of a default, you are responsible for any additional collection charges that may be applied to your account including finance charges (18%) and reasonable attorney's fees.

Usual and Customary Charges

Healthy Smiles is determined to give our patients an excellent value through the high quality of dentistry that we provide our patients. Our fees are "considered usual and customary" for our area. Any insurance company's arbitrary determination of what is "usual and customary" is not applicable unless Healthy Smiles, Inc. is a contracted provider for your plan.

Dental Treatment and Billable Charges

Any charges incurred for dental treatment are the sole responsibility of the patient and are expected to be paid at the time of service in full. If insured, the portion not expected to be reimbursed by your insurance company is due in full on the day of service. Any balance not Paid within 60 days is subject to finance charges monthly.

Treatment of Minors

Adults accompanying a minor are responsible for full payment of and work done for that minor. The adult must also be a direct relative to the minor patient in order to approve work to be undertaken. For an unaccompanied minor, non-emergency treatment will be denied unless there is prior written consent from the parent or guardian and a plan for payment has been arranged.

Photographs

I authorize photographs taken of me or my child can be used as “before and after” visual aids. (Please understand that any photographs used will be completely anonymous.)

Reservations

Each time that a reservation is made for you at our office, our talented doctors and staff have dedicated that time solely to you. If you are late, cancel less than 48 business hours or fail to show up for this reserved time, it affects MANY people, including other patients in need. **Any dental appointments cancelled or rescheduled less than 2 business days (48 business hours) are subject to a late cancellation fee of a minimum charge of \$50 for Dental Hygiene appointments, and a minimum charge of \$100 for Dentist appointments. Periodontal and endodontic appointments cancelled or rescheduled less than 3 business days (72 business hours) are subject to a minimum charge of \$200.** All periodontal and endodontic procedures require a non-refundable deposit of \$200 when scheduling to secure an appointment. This deposit will be applied to services rendered upon completion of the scheduled visit. If for any reason, the appointment is cancelled less than 72 business hours, or an appointment is missed, the \$200 will be forfeited. We urge that you help us provide all of our patients with the highest level of quality care possible by keeping your reserved appointment times.

If you are unclear about any aspect of our office’s policies, please feel free to ask for clarification.