

CAROLINA SMILES OFFICE POLICY

Thank you for choosing our practice for your dental needs. Above the hustle and bustle of every workday, with all the concerns, responsibilities and pressures, we are always aware of the single most important factor to our practice.....you, the patient, and honoring the trust and confidence that you have placed with us. We are committed to providing you with the best possible care. In order to help us attain this goal, please read and be familiar with our office guidelines.

Appointment Scheduling

We ask your cooperation in making and keeping appointments. While unexpected events are a reality in life, please plan and make a commitment when scheduling an appointment. Cancellations without 48 hour notice require time consuming adjustments to our schedule and are a hardship on office staff and other patients as well. We reserve the right to charge for missed or late-cancelled appointments. Abuse of scheduled appointments may result in discharge from the practice.

Who Is Allowed in the Treatment Rooms

We ask that, during scheduled treatment appointments with the Doctor (not cleaning appointments), only the patient comes back in the treatment room. No parents of young children, spouses, friends, etc. are allowed in the room when the Doctor is performing any treatment procedures (Extractions, Fillings, Crowns, etc.).

Financial Policy

The patient is responsible for payment, co-payment and deductibles at the time of service.

PAYMENT OPTIONS:

- 1. Cash, Check, Visa/Mastercard/American Express**
- 2. Insurance assignment of benefit.**
- 3. Monthly payments through third party lenders- ask the front desk for details /**

We do not accept Medicaid, Medicare or PPO's.

There is a \$25 service charge for returned checks.

For patients without insurance, who maintain regular cleaning appointments, a 3% discount (5% for seniors 65 or older) is given for full payment (cash or check—no credit card) on the date treatment starts.

Procedures that take multiple appointments (dentures, partials, crown and bridge) can be divided into multiple payments.

Finance Charge: A finance charge of 1.5% per month (18% per year) will be applied to unpaid balances. This does not apply when payments are divided to accommodate multiple appointments procedures.

ALL FEES ARE VALID FOR 90 DAYS FROM THE DATE ESTIMATE IS GIVEN.

Dental Insurance

As healthcare providers, our relationship is with you, not your insurance company. While filing of insurance claims is a courtesy that we extend to our patients, all charges not paid by your insurance in 60 days are your responsibility and finance charges will apply. You are responsible for all charges. It is your responsibility to know the terms of the contract with your insurance company. It is not possible for us to know the details of over 200 insurance companies that we file claims with. Not all services are a covered benefit in all insurance contracts. These non-covered services will be the responsibility of the patient. Estimates and pre-treatment estimates are "estimates" only and not a guarantee.

I HAVE READ AND UNDERSTAND THE FINANCIAL/SCHEDULING POLICY OF MICHAEL W. DAVIS, D.M.D. P.A. AND I AGREE TO THE CONDITIONS AND PROVISIONS THEREOF.

Signature of Patient, Sponsor or Legal Guardian

Date