



*Tye Family Dentistry*

## **Financial Policy**

### **Treatment Plans**

Before treatment we will provide you with an estimation of cost. This will include the total amount, what we estimate your insurance to cover, and what your estimated copay would be. For treatment that will be completed in the near future, we recommend sending a Pre-Authorization to your insurance company, if applicable, to get a more accurate breakdown of cost. If your insurance coverage stays the same, Pre-Authorizations are typically valid for 12 months.

### **Insurance**

We will file your dental insurance claim electronically, as a courtesy. While we would be happy to help you with your coverage, it is important that you are familiar with your plan. All policies differ in payment schedule, deductibles, annual maximums, allowable fees, etc. Please keep in mind you are responsible for your total obligation should your insurance company deny a claim, delay payment for 60 days, or if benefits are less than anticipated.

You are responsible for any insurance claims denied because of lack of eligibility or termination of coverage as well as additional fees that are not covered by the plan.

The billing department will follow up on all third-party claims that are outstanding for more than 30 days. Claims that remain open after 60 days may be converted to patient responsibility.

If you cannot provide proof of insurance, you will be expected to pay in full at the time services are rendered unless other financial arrangements are made prior to treatment.

### **Referrals**

We reserve the right to refer you to a dental specialist for treatment if it is our opinion a specialist is required. Whether or not a specialist is in a certain insurance network, or whether treatment costs will be higher, are not factors in deciding if a referral is necessary.

### **Payments and Copays**

Payment is expected before or at the time of service. For larger, more complex procedures spanning several visits or involving lab fabrication, one half is due at the beginning of the procedure and the remaining half is due before the final product is delivered. To assist you

with your payment, we accept cash, check, Care Credit, Mastercard, Visa, Discover, and American Express.

Personal checks are accepted with proper identification (Driver's license or Photo ID). A \$25.00 overdraft charge will be posted to your account for each insufficient check.

We offer a 10% discount when your portion is paid in full with cash or check on the day of treatment.

If you do not have dental insurance, you are responsible for full payment when services are rendered.

### **Responsible Party**

The parent or guardian that brings a child to their dental appointment is responsible for paying any charges and copays that accrued on that date of service, regardless of separation or divorce. We will be happy to provide a detailed receipt for you to be reimbursed by the other parent if necessary.

### **Overdue Accounts**

Statements for unpaid accounts are generated and sent monthly. You can remit payment by mail, over the phone, or on our website. [Tyefamilydentistry.com](http://Tyefamilydentistry.com)

Accounts that are not paid 30 days after the statement date, will be charged a \$5.00 late fee thereafter.

If your account has an overdue balance, we will not be able to schedule any future appointments until the account is paid in full.

If your account balance becomes 60 days past due, you will receive a text message or email as a reminder. There is a link you can follow to pay the balance online.

If your account balance becomes 90 days past due and you have not responded to any correspondence from our office, your account may be handed over to a collection agency. Once the collection process begins, all future appointments will be cancelled, and you will be dismissed from our office.

### **Workman Compensation/Auto Accident Claims**

The cost of dental treatment from the result of a work comp claim or an auto accident is still your responsibility. We send the claim to your dental insurance and you are responsible for the copay. Our billing department will send the claim and necessary information to the accident company. Once the accident company pays your claim, we will reimburse you and your dental insurance.