Patient's name:



Thank you for choosing CarePoint Dental. Our primary mission is to deliver the best personalized care with patient education. An important part of the mission is making the cost of optimal care as easy and manageable for our patients as possible by offering several payment options.

## **Payment Options:**

- Cash, Visa, Mastercard, Discover, or American Express
- NO INTEREST<sup>I</sup> Payment Plans<sup>2</sup> from CareCredit
  - Allows you to pay over time with NO INTEREST! & NO annual fees or prepayment penalties
  - Convenient, low monthly payment plans<sup>2</sup> also available

Please note: All fees incurred through services rendered by CarePoint Dental, Dr. Aaron J. Osga and all employees and/or associates are due at the time services are rendered. All estimated co-payments and deductibles, as determined by our staff, will be collected prior to treatment commencing. Any portions not covered by your insurance company are the patient/guarantor's full responsibility and are due within 30 days of insurance benefit payment being received.

| Please read and initial the following statements: |
|---|
|---|

- 1) \_\_\_\_\_ I understand the above statement, and that I am responsible for all fees, including collection fees, incurred in this office.
- 2) I understand that I will receive an <u>estimated</u> treatment plan, and all co-payments and deductibles are due at time of service.
- 3) I understand that my employer, or other entity, negotiated the insurance contract, not CarePoint Dental.\*
- 4) \_\_\_\_\_ I understand that if my insurance coverage is terminated or has not been updated, I am fully responsible for all fees incurred regardless. This includes collection fees.
- 5) CarePoint Dental does have a \$50/hr fee for last-minute cancellations/reschedules. Please give us at least a 48-hour notice to avoid fee(s).
- 6) CarePoint Dental will require a 10% deposit for lengthy procedures. This deposit will be forfeited for failed appointments, or appointments cancelled without 48-hour notice.
- \* CarePoint Dental is here to serve you. Any dispute you do have with your insurance company, we will assist you with handling in any and every way we can. We do house an insurance specialist who resubmits incorrectly paid claims daily. We will attempt in every way to make sure the insurance company is giving you every benefit you deserve within contractual limits<sup>3</sup>.

"1 authorize CarePoint Dental to provide my Insurance Company with any information needed to process my, or my dependents, claims for payments."

"I authorize my insurance company to release all benefit payments for myself or dependents to CarePoint Dental. "

| Patient, Parent, or Guardian Signature | Date |
|--|------|

## HIPAA (Health Insurance Portability and Accountability Act of 1996):

This office is 100% HIPPA compliant and will always protect your personal information as if it is our own. We have included a brochure explaining your rights under the Health Insurance Portability and Accountability Act of 1996. We highly recommend you call your insurance company and ask them to use an alternate ID number, other than your social security number, on all of your insurance cards. Also, if you would like someone to have the ability to discuss your treatment or account that is not on your account, we must receive an authorization in writing from the account holder.

"I have received all compliance information from CarePoint Dental and understand CarePoint Dental will protect my information as if it is their own."

|  | 101  |
|--|------|
| Patient, Parent, or Guardian Signature | Date |

- If paid within the promotional period. Otherwise, interest assessed from purchase date. Minimum monthly payment required.
- 2 Subject to credit approval
- However, if we do not receive payment from your insurance carrier within 90 days, you will be responsible for payment of your treatment fees and collection of your benefits directly from your insurance carrier.