

# Derek Youngblood DMD. , PC

## Dharmini Pathmanathan DMD. PhD

---

### ***Office Financial policy***

We share your concerns regarding the cost of dental care. We believe that you, our patients, expect and deserve the highest quality care we can provide at a reasonable cost. While we take advantage of every possible avenue to keep costs down, we are committed to not sacrificing quality for less expensive care. With this in mind we would like to share some information with you about our financial policy. We want you to feel comfortable regarding your financial and insurance matters and thereby prevent any misunderstandings. Please call us prior to your appointment if you have any questions regarding our services and financial policies detailed herein.

Many people are under the impression that if they have insurance it is the insurance company who owes the doctor for his services. Please keep in mind the insurance contract is between the patient and the insurance company. Therefore the patient is responsible for the bill, regardless of the insurance coverage determination. As a courtesy to our patients we are happy to bill your primary insurance for you however the responsibility for the payment remains with the patient (or insured).

**Patients with Insurance:** Many insurance plans state the you will be covered up to 50%, 80%, 100%. In spite of that statement we have found in actuality that many plans may cover less than that depending on their established "usual and customary rate" and what services they actually cover. Insurance companies use the term "usual and customary" when setting fee limitations on services. While we take advantage of every possible avenue to keep cost down, we will not sacrifice your quality care. They will pay a claim percentage based on their "usual and customary rate" not our actual charges.

**Account Balances:** The balance on all accounts is due in full in 60 days after date of service regardless of insurance coverage or anticipated payment from other sources. In the event that payment of our services is not made within 60 days of receipt of services an interest charge of 1.5% per month will be added to the account (18% per annum). Patients with insurance whose claims have not paid within 45 days should contact their insurance company to determine the reason for the delay of payment. Delinquent accounts will be referred for collection at the discretion of the business manager. If it becomes necessary to effect collections of any amount owed on this or subsequent visits the undersigned agrees to pay all costs including reasonable attorney fees.

**Orthodontic Accounts:** The balance on all accounts is due in full in 60 days after date of service regardless of insurance or anticipated payment from other sources. In the event a payment arrangement is made, 20% of the estimated patient portion is due on the banding date. Monthly payments will be divided out equally over the course of estimated treatment. All unpaid balance is due in full at the time treatment is completed.

**Payment Methods:** We accept Visa, MasterCard, Discover and Care Credit. We also accept personal checks. If treatment balance is paid in full at the date of service with either check or cash a 5% discount will apply to the account. There will be a \$25 fee for all returned checks.

**Cancellation Policy:** Please give our office 48 hour notice for any change in appointment. On the second missed appointment there will be a \$50 broken appointment fee, and it will be due in 30 days.

**Assignment and Release:** For individuals with insurance, your signature below hereby authorizes your insurance benefits to be paid directly to Dr. Derek Youngblood. You are still financially responsible for any balance due. It also authorizes the doctor to release any information required for payment and processing of claims.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of patient, Parent or Guardian