



Dental Savings Plan Financial Policy

Our Dental Savings Plan is an alternative to traditional dental insurance- designed to save you pain, time, and money. It's a great way to get the care you need with the savings you want. The Dental Savings Plan cannot be combined with any other insurance, discount, or promotion. No refunds of premiums will be issued at any time if participants decide not to utilize the plan.

Your Dental Savings Plan includes 100% coverage on the following: Comprehensive/Periodic Exams (two per year), Bitewing X-Rays (one per year), Full Mouth Series X-Rays/Panorex (one every 3 years), Preventative or Periodontal Maintenance Cleanings (two per year), Fluoride (two per year- no age limit), and Oral Cancer Screenings (two per year). All other services offered at Bel Drive Dental are discounted 15% off up to \$500 per procedure.

Full payment must be paid at the time of service. We accept cash, personal checks, money orders, Mastercard, Visa, HSA, American Express, and Discover. If a personal check is returned for non-sufficient funds (NSF), you may be charged a collection fee. You will also be required to pay with either cash or credit card for any future visits. We do have financing options available through CareCredit (upon approval).

In the case that you have an unpaid balance, we will attempt to reach you to collect. In the event that we are unsuccessful, we may place your account with a collections agency. Upon placement, we will add a minimum fee of 24% to the total balance to cover the cost of collections fees, litigation costs, and any other additional fees that may occur.

As a result of your unpaid balance being sent to collections, your Dental Savings Plan contract will be voided. If you choose to participate in the Dental Savings Plan, again, your balance must be paid in full and no longer in collections. You will need to purchase a new Dental Savings Plan and will not have access to any benefits that were available from your previous plan.

Appointments are reserved exclusively for you. Some appointments may require a non-refundable deposit to hold your dental reservation. Your deposit will apply to your estimated patient portion, if completed as scheduled. The clinic requires a notice of at least one (1) business day if the patient is unable to keep the reserved appointment time. We will attempt to contact you prior to your appointment to confirm your reservation. If an appointment is not confirmed within one business day of the appointment, the appointment may be canceled or rescheduled. **You may be charged for missed appointments or cancellations with less than 1 business day's notice. If a patient "no-shows" or an appointment is "short-notice canceled" for three appointments, we will move you to a same-day-only scheduling list.** As a benefit to you, our valued patient, we may offer to move your appointment to an earlier time if an opening should arise.

In the case of separated or divorced parents of minors, who are responsible for a portion of the cost of a child(ren)'s treatment: The parent who brings the child to the appointment is responsible for paying the patient portion on the day of service.

☐ I have read and understand this financial and cancellation policy.

Patient

Date

Patient/Guardian Signature

Date