DENTISTRY ON THE BAY DR. Lori Lahti & Associates OFFICE PAYMENT POLICY

We, at Dentistry on the Bay, believe that clarity and trust are the key to a good relationship. In an effort to ensure your appointments are pleasant and predictable as possible, we have established a few policies and procedures designed with your convenience and protection in mind. Please feel free to discuss our fees and/or policies with us at any time. Our office follows the current ODA Fee Guide for general practitioners as recommended by the Ontario Dental Association. These policies are effective September 29th, 2014.

OUR FINANCIAL POLICY:

With the introduction of the Health Privacy Act and the diversity of the dental benefits packages, it is difficult to maintain accounts to have a zero balance. It has been time consuming and challenging for us to collect balances owing, after insurance payments are received. We would rather spend our time ensuring that optimal dental care is given. We would still like to be able to continue to offer our new and existing patients flexibility in paying for dental treatments with the following options:

Dentistry on the Bay offers you the flexibility of paying for dental services through a variety of methods including:

-Cash

-Debit/Interac

-Visa/Mastercard

-American Express

-Payment Plans

-Personal Cheques(accepted from patients with good financial standing with the practice after one(1) year. NSF cheque charge \$40.00)

INSURANCE/FINANCIAL

Please be aware that your insurance contract is between you and your employer. It is your responsibility to understand your benefits and dental coverage. In order to keep your insurance information up to date, you must provide the office with all patient information relating to your insurance coverage. Upon request, our Financial Treatment Co ordinator will send pre-determination estimates to your insurance company for recommended treatment. Please be aware that pre-estimates are non-binding and you are under no obligation to proceed with any such treatment. Should you require special financial arrangements, this should be discussed and arranged in writing in advance of entering into treatment needed.

Continue on reverse side ->

At Dentistry on the Bay, we offer two (2) options for payment of your dental treatment.

*Exception: Any long standing patient of record with previous established financial arrangements approved by Dr. Lahti may still continue their usual means of business with Dentistry on the Bay.

Please check ($\sqrt{}$) which service you would prefer:

OPTION 1: Fee for service ()

This option is the best option as it allows you to be in control of your insurance benefits, by paying in full at each appointment for treatment and being reimbursed directly by your insurance company. As a courtesy, we will send your claims to your insurance company electronically. This will enable you to keep personal records of all dental transactions, all insurance reimbursements, track maximum allowable benefits and you will be more aware of what your plan does not cover. You won't have to worry about having outstanding balances with us. Insurance companies usually reimburse clients within one to two business weeks, especially when your insurance allows us to send your claim electronically.

OPTION 2: *Express credit checkout* ()

Our Express credit checkout program allows our office to continue to offer you the convenience of using your insurance plan as a form of direct payment, providing your insurance allows assignment. We will require your credit card number and signature to issue a debit memo to your credit card account for any under payment once your insurance portion has been received. Often times insurance companies will give us a breakdown of what your plan covers right away at the time of billing, and if there is a residual we would ask for payment of the difference be made before departing our office. You will be notified by phone if any charge or credit is in excess of \$100.00. Any residual monies owing on your account within thirty (30) days will automatically be put through on your credit card, and a receipt for this transaction will be mailed with a paid statement. We will do our best to assist you in resolving any unpaid claims.

Note: Any previous unpaid balances over thirty (30) days from date of treatment will be charged 2% monthly. Accounts over ninety (90) days will be turned over to a third party collection agency. This action will cause an additional fee of 25% of your unpaid balance to be added to your account. We dislike doing this and will only do so if all other efforts to collect your unpaid balance have failed. We appreciate your understanding and hope this collections method will not be necessary.

I have read and understand the office policies above, and hereby agree to abide by them.

Patient/Guardian name (print)	Patient/Guardian signature	
Date	Witness signature	
OPTION 2 : Express Checkout requ	ired information:	
Card # Visa or MC (circle)	Name on card	Expiry

Financial Institute name and address