



Lan D Duckett D.D.S. P.E.

Family & Cosmetic Dentistry

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Falls Church, VA 22046

703-241-5775 (o)

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FINANCIAL POLICY

Our office participates with many of the preferred provider plans. We also accept most traditional plans. The changes that are occurring in the health care industry have placed great demands on our office resource. In order to help us provide better services to you, we have established the financial policies. Please take a moment to review these policies and make us aware of any special needs or concerns you may have.

Appointments:

You scheduled appointment is reserved specifically for you. If you are unable to keep the appointment, we kindly request that you notify at least 24 hours in advance. Failure to do so will incur a change or \$50 for each broken or missed appointment. This advanced notice is required to enable us to offer time to another patient in need. Please help us avoid charging a fee by keeping your scheduled appointments.

Minors:

Must be accompanied by a parent or guardian for all appointments unless a written consent is obtained. The adult accompanying the minor is responsible for full payment.

Payments:

Full payment is due at the time service is rendered. For your convenience, payment options include: cash, check, master card, and visa.

- *A \$25 fee will be charged for all returned checks.
- *All accounts that have not paid in full within 60 days will be considered past due.
- *Past due accounts may be referred to an authorized collection agency for collection.
- *A fee of \$45 will be assessed to all accounts that are forward to such an agency.
- *Reasonable attorney fees incurred in attempts to collect on your account will also be assessed if applicable.

Patients with Dental Insurance:

We deal with many insurance plans all with different requirements. The intricacies of all the different plans and policies make it impossible for our staff to know all the specific details of every policy. While we'll make every effort to assist you in receiving the best care and the maximum benefits to which you are entitled, it is your responsibility as an insurance plan member to be aware of all the rules and requirements pertinent to your own plan. Please familiarize yourself with your own dental policy. The following policies apply to those patients with insurance:

- *If at your appointment we are unable to verify your dental insurance or cannot obtain a list of benefits, full payment is due at the time of service.

*Patients are to pay their deductible and the estimated payments at the time treatment is rendered. A refund check will be mailed to the responsible party if the insurance carrier pays more than was estimated.

*While filing insurance claims is a service we extend to our patients, we must emphasize that as dental providers, our relationship is with our patients-not the insurance companies. You are directly responsible for payment in full of any fees. If your insurance company has not paid your claim within 60 days, the account balance becomes your responsibility and is subject to a billing fee.

Customarily we do not use the amalgam (silver mercury) fillings. Please ask for the insurance estimation. Information regarding composite (tooth colored) fillings. Many insurance companies do not pay or they down code these fillings due to exclusion in the individual's policy. The responsible party is liable for all additional cost for these fillings.

On behalf of the entire staff thank you for visiting our office!

Lan D. Duckett, D.D.S., P.C.

I, _____, have read the above policies and agree to abide by them.

Signed, _____ Date _____
Patient/parent/guardian