

Brian Bird DMD & Robert Hendricks DDS
(208) 322-1263

1744 N. Mitchell
Boise, ID 83704

FINANCIAL POLICY

Patient Name: _____

Thank you for selecting Bird Family Dental as your dental care provider. The following information describes our financial policy. If you have any questions about our financial policies, please do not hesitate to ask one of our receptionists.

PAYMENT FOR SERVICES IS DUE AT THE TIME SERVICES ARE RENDERED

We accept cash, personal checks, MasterCard, Visa, & Care Credit. We will help process your insurance claims for your reimbursement as long as we have complete insurance information.

PLEASE UNDERSTAND:

- Your insurance policy is a contract between you, your employer, & the insurance company. We are NOT party to the contract. Our financial relationship is with you, not your insurance company.
- All charges are your responsibility whether your insurance company pays or not. Not all services are covered benefits in all contracts. Some insurance companies arbitrarily select certain services they will not cover.
- Fees for all services, along with unpaid deductibles & co-payments are due at the time of treatment.
- Balances older than 90 days may be subject to additional collection fees & interest charges.
- Returned checks will have an additional fee of \$25 added to the amount of the returned check.
- We understand that temporary financial problems may affect timely payment of your balance. We encourage you to communicate any such problems to us so that we can assist you in the management of your account.

MISSED APPOINTMENT POLICY: Please note that, unless you cancel your appointment at least 48 hours in advance, you may be charged a \$25 missed appointment fee. Please call us as soon as possible if you need to reschedule your appointment time. If you no show or cancel your appointment without a 24 hour notice, you may be dismissed from our practice.

I HAVE READ & UNDERSTAND THIS POLICY _____ DATE _____