

Bridgeworks Family Dental
Financial Policy

Thank you for choosing Bridgeworks as your dental health care provider. We are committed to the success of your dental treatment and we want to provide you with the best service available. The following is a statement of our financial policy, which we require you to read and sign prior to any treatment. We are glad that you are here and we want to do our very best for you. We sincerely hope that your visit will be pleasant and rewarding experience. If you have any questions during your dental exam, please feel free to ask.

Private Pay Patients:

Full payment is due at the time of service. We accept cash, checks, MasterCard, Visa, and Discover, CareCredit*. (There will be a fee of \$30.00 for returned check)

Patients with Dental Insurance Plan:

Co-payment is due at the time of service. We accept most major insurance plans and will bill your insurance company. Most insurance plans require the patient to pay an annual deductible and a certain percentage of the fee (co-payment) for each procedure. Your deductible or co-payment can be paid by cash, check, credit card or CareCredit*. (There will be a fee of \$30.00 for returned check) We will be happy to discuss any financial aspects of your treatment before it is initiated. We will also contact your insurance company in advance for authorization and coverage benefits for major procedures.

Please remember you are fully responsible for all fees charged by this office regardless of your insurance coverage

***CareCredit :**

As a service to our patients, we are pleased to offer the CareCredit card, North America's leading patient payment program. CareCredit lets you begin your treatment immediately, then pay for it over time with low monthly payments that are easy to fit into your monthly budget. So, you can begin your dental care treatment today and conveniently pay with low, monthly payments. For more information, please inquire at front office or visit www.carecredit.com.

Signature: _____

Date: _____