## River City Dental Care, Inc. Bradford Stiles, D.D.S.

1950 Lower Muscatine Road lowa City, IA 52240 (319) 337-6226

www.rivercitydentalcare.com

## Office Payment Policies

- As a service to our patients we do bill most insurance companies. Regardless of insurance coverage, accounts are due and payable as work progresses.
- Some service and charges may not be reimbursed by dental insurance. It is the patient's
  responsibility to determine the extent of coverage the dental insurance plan will cover for any
  treatment performed.
- The patient is responsible to pay in full at each appointment or pay their co-payment if an insurance company is billed. The patient will pay at least 50% of the charged treatment until the established co-pay amount is determined through the dental insurance carrier.
- Accounts over 60 days past due are subject to a finance charge of 1.5% per month. This is an annual rate of 18%.
- If a balance due remains on the patient's account for 90 days, the account will be turned over to a collection agency on the 91<sup>st</sup> day.
- In situations where a child's parents are separated or divorced, the parent who initially brings the child in will be the person billed and the person responsible for payment on the account. We will not bill a second person (split billing) for services that have been provided.
- For our patients convenience we accept cash, check, Visa, Master Card, Discover, American Express, Citi Health Card, and Care Credit.

## Office Cancellation Policies

• If a patient is unable to keep an appointment, we request a 48-hour notice in order to make that time available to our other patients. Cancellations without adequate notification can result in a miss appointment fee or loss of a patient's privilege to be seen at our office.

I have read the policies listed an accept respons	ibility for the above-mentioned terms.	
Individuals or Parents Signature	Date	
Address/Phone number		