

# Pediatric Dentistry of Round Rock Financial Policy

## Dr. Kelsey Bookmyer

We are delighted to have your child as a patient. We look forward to keeping your child in tip top dental health and watching them grow over the years. Our office policies and financial agreement is listed below. If you have any questions we would be happy to answer them.

### Missed Appointments/Late Cancellations

It is very important that we receive 24 hour notice in the event that you need to cancel an appointment. We reserve time especially for your child, and have prepared in advance for your dental appointment. If you cancel with less than 24 our notice, you will be charged a **\$25.00 fee**.

### Insurance

As a courtesy to you, we will be happy to file your **primary** dental insurance. We are not a preferred provider and we are considered “out of network” for all insurance companies. “Out of Network” means that your insurance company will pay the usual and customary fee for dental services in this area. **All deductibles and co-insurance amounts are due and payable at the time of service.** In the state of Texas, insurance companies have 30 days to process a claim. If your insurance carrier has not responded in that time, we will contact you to keep you updated on your claim’s status and may ask you to call your insurance company.

### Office Policy and Payment Responsibility

Our office makes every effort to verify your benefits before treatment. We can only estimate what your insurance will cover and any financial limitations they may place on our services. We will strive to estimate your insurance’s benefits and limitations; however, you may receive a statement or reimbursement after your claim has been processed. Regardless of who provides the dental insurance for the child, the parent/guardian **who signs the treatment consent** is responsible for payment. Our office is not responsible for collecting payment from divorced or separated parents.

### Treatment Deposit

If your child’s treatment includes sedation, a deposit of \$310.00 is required to schedule the appointment. The deposit is non-refundable if the appointment is cancelled without giving 24 hour notice. Larger treatment cases also may require a deposit. The deposit money will be applied to your overall treatment cost.

### Methods of Payment

We realize that patients have financial needs and we will do our best to find a solution that will work best for you. If financing is needed, we offer that through an outside company (Care Credit) and will be happy to explain the terms. Please ask our front desk personnel for more information. Our office accepts Visa, MasterCard, Discover, cash and personal checks with proper identification. Returned checks may be recovered electronically along with a state allowed recovery fee. Patients with outstanding balances of 30 days or more overdue must make arrangements for payment prior to scheduling future appointments.

### Financial Responsibility

- \*I authorize my insurance benefits to be paid directly to Bookmyer & Bookmyer, P.A. (Dr. Kelsey Bookmyer)
- \*I authorize the release of any personal or medical information necessary to process the claim.
- \*I accept full financial responsibility for the treatment of my child/children.
- \*I understand that I will be responsible for all collection costs if I default on this agreement.
- \*I understand that cancelling an appointment without giving 24 hour notice, I will be charged a \$25.00 fee.
- \*I have read and understand the above statements.

Parent or Responsible Party’s Signature \_\_\_\_\_ Date \_\_\_\_\_