

# Dr. Egg Pediatric Dentistry

## APPOINTMENT POLICY

This scheduled appointment is reserved specifically for your child and any changes to this appointment affect many patients. If a cancellation is unavoidable, please call the office at least 24 hours in advance so that we may give that time to another patient. Telephone voice-mail is available 24-hours a day.

- **Please be on time for your appointment.** Please plan to arrive 10 minutes or more before your scheduled appointment time. This will allow time for parking and to complete any additional paperwork and see your child on time. If you arrive 10-15 minutes late for your appointment, you may be asked to reschedule for the next available appointment time and/or risk cancellation of your appointment and inactivation of care.
- **We strive to see all patients on time for their scheduled appointment.** There are times when our schedule is delayed in order to accommodate an injured child or an emergency. Please accept our apology in advance should this occur during your appointment. We will do the exact same if your child is in need of emergency treatment.
- **Broken appointments affect many people.** If two (2) broken/missed appointments occur or two (2) cancellations without 24 hour notice, our office reserves the right to NOT schedule any subsequent appointments and/or charge a \$40.00 broken appointment fee. The amount of paperwork and office time to process Medicaid far exceeds that of other policies. If two(2) broken/missed appointments occur or two(2) cancellations without 24 hour notice, our office reserves the right to NOT accept your insurance anymore or schedule any subsequent appointments. If you would still like treatment with our office, all fees associated with treatment will be due the day of. No exceptions.
- **VACCINATIONS:** In order for your children to be seen in our office they must be up to date on all vaccinations, no exceptions will be made.
- **All restorative (fillings, extractions, etc.) procedures are scheduled in the morning.** Children, as well as adults, are more prepared and do better in the morning for these types of procedures.
- **A parent or legal guardian (with official documentation) must be present during all appointments.**

## FINANCIAL POLICY

- **Payment for professional services is due at the time dental treatment is provided.** Every effort will be made to provide a treatment plan which takes into account your time, finances, and gives your child the best possible care. We accept cash, personal checks, VISA, MasterCard, Discover and CareCredit. If you chose to pay for your child's appointment with cash or check, a 5% discount will be given.
- **We must emphasize that as health care providers, our relationship is with you, not your insurance company.** While we are **NOT** participating providers with **ANY** insurance company, we will be happy to file your insurance claim provided you have all of your current information at every appointment. You must be familiar with your insurance benefits, as we will collect from you the estimated amount insurance is not expected to pay. Please be aware that some services provided may not be considered "covered services" by your plan. By law your insurance company is required to pay each claim within 30 days of receipt. Your insurance company will receive each claim within days of the treatment. You are responsible for any balance on your account after 30 days, whether insurance has paid or not. If there is an outstanding balance on your account, please understand our office reserves the right to not schedule any subsequent appointments until the amount is paid in full. We will be glad to send a refund to you if your insurance overpays us.
- **Please bring your insurance card with you to every appointment and inform us if any information has changed.**
- **A charge of \$25.00 will be assessed on any returned checks.** Should your account be turned over to collections, you will be responsible for the cost of collection, attorney's fees and court costs.
- **If an appliance is necessary for your child, one-half (1/2) the cost of the appliance must be paid on the day your child's teeth impressions are taken.** This is necessary because our office must pay the lab bills when appliances are ordered, not when they are completed. The remainder of the cost of the appliance is due on the day of delivery to your child.

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_