



## FINANCIAL POLICY

Dear Patient:

In an effort to reduce costs, increase efficiency and maintain the highest level of professional care, we have established a financial policy that both patients and office personnel must adhere to.

Our Office Financial Policy is as follows:

- I. We accept payment by CASH, CHECK, VISA, MASTERCARD, DISCOVER, or CARE CREDIT.
- II. As a courtesy, we will accept most insurances and will gladly process your claim – however any treatment or charges your insurance company does not pay for will be due in full at the time of treatment. \_\_\_\_\_ **Initialed by patient.**
- III. Although our office will process your insurance claims, please understand it is your responsibility to satisfy any account balance in full for all services rendered.

If you have any questions regarding these financial policies please do not hesitate to speak to our office personnel. We are here to help you in every way.

Patient Signature \_\_\_\_\_ Date \_\_\_\_\_

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Avery Dental Group