

Hoffman Dental Care

15340 23 Mile Rd.

Macomb, MI 48044

586-247-8730

Maccombsmiles.com

We are committed to provide only the best dental care. In order to give you the best experience possible, we have found that when everyone is clear on payment for treatment, that confusion and misunderstanding is kept to a minimum. Our main concern is that you receive the proper and optimal treatment needed to restore and maintain your dental health.

We have an amazing financial team who can assist you at any time with questions or concerns you may have about our payment policies.

FINANCIAL POLICY:

1. Patients are expected to pay for services at the time they are rendered. Our patients who have the benefit of dental insurance are expected to pay the amount of their **estimated** co-pay and deductible at the time of service. Payments may be made using cash, check, Visa, Mastercard and/or Discover. A returned check is subject to a \$40 collection fee.
2. As a courtesy to our patients, we offer flexible payment plans that are to be discussed prior to treatment with our financial team. We also offer CARE CREDIT for extended payment plan options.
3. We offer a cash discount for treatment paid in full with cash at the time of service, a senior discount to our patients over the age of 65. To see if you are eligible for these discounts, please speak with one of the Financial Coordinators for details.
4. For any unpaid balances, you will receive a monthly statement including a \$25 statement fee. After 3 statements have gone unpaid, your account could be turned over to collections. Once the account is turned over to collections, you will be responsible for any legal, collection fees and court costs.

Things to remember as a patient with insurance:

1. Our dental professionals will diagnose and recommend treatment for you based on your needs, **NOT** your insurance coverage.
2. Dental insurance is actually a benefit to **help** cover the costs of dental treatment. Most dental plans do not cover the true needs of the patient.
3. We do offer a complimentary benefits check for you. Based on the information they give us, we can provide you with an estimate of your out of pocket cost. At your request and free of charge, we can submit a Predetermination. Sometimes, this can provide a more accurate estimate. However, your insurance company has the right to deny any services at any time.

Please indicate your understanding and acceptance of these financial policies by signing below. For the mutual convenience of you and the practice, it is understood that this executed copy of the Financial Policy also shall cover your dependent children who are patients of the practice.

Patient/Guardian Signature

Date