

Carolina Dental Alliance

Important Information For Our Patients

Dental Insurance

We will gladly assist you with your dental insurance plan. To help us assist you in determining your maximum benefit, please bring your insurance explanation of benefits booklet and your insurance card to your first visit. Most plans cover only a portion of the dental fee, therefore as a courtesy to our patients we will file your primary insurance for you but we ask that you pay the non-covered balance at the time of service unless prior arrangements have been made. If your insurance company has not paid within 60 days you will be billed for the unpaid balance and payment in full will be expected at this time. We recommend you become directly involved in communication with your insurance company in order to expedite payment.

Payment Options

- We accept All major credit cards, Care Credit, money order, cash, or personal check.
- A convenient interest free payment plan through an outside financial institution.

Appointments

In order to allow the best possible care for our patients, we reserve a specific time just for you and make every effort to see you as scheduled. We appreciate your promptness and your consideration in not changing your scheduled time. However, if you need to change your appointment a 24-hour notice is expected.

Patient Agreement

- I understand that my insurance policy is an agreement between the insurance company and me, therefore I am ultimately responsible for all fees incurred for my dental treatment regardless of payment or denial of my insurance claims by my insurance company.
- I authorize insurance payment directly to Carolina Dental Alliance.
- I authorize the release of necessary information to my insurance company to determine liability for payment and to obtain reimbursement for any claims.
- If this account is assigned to an attorney or collection agency, I agree to be responsible for any attorney fees, collection fees, and court cost incurred.

Signature: _____ **Date:** _____