

Written Financial Policy

Thank you for choosing Ivy Rose Family Dentistry. Our primary mission is to deliver the best and most comprehensive dental care available. An important part of the mission is making the cost of optimal care as easy and manageable for our patients as possible by offering several payment options.

Payment Options:

You can choose from:

- Cash, Visa, Mastercard, American Express or Discover Card
- Convenient Monthly Payment Plans¹ from Care Credit. Deferred interest options available.

Please note:

We will file your insurance as a courtesy to you, but we do expect your estimated payment and necessary deductible to be paid at the time of service. The estimated co-payment is merely an estimate and not a guarantee of payment by your insurance company. You must provide name, address and phone number of your insurance company in order for us to submit a claim form. If not provided, you will be required to pay for your visit in full and your insurance company will reimburse you. After 60 days any unpaid balance becomes your responsibility and is subject to collection process.

Ivy Rose Family Dentistry requires payment at the time of your treatment. If you choose to discontinue care before treatment is complete, your refund will be determined upon review of your case.

Cancellations/No Show Appointments:

Please remember to contact our office at least 24 business hours prior to your appointment time. A fee of \$50.00 will be assessed to your account for all appointments cancelled without the 24 hour notice.

Ivy Rose Family Dentistry charges \$30 for returned checks.

If you have any questions, please do not hesitate to ask. We are here to partner with you for all your dental needs.

Patient, Parent or Guardian Signature **Date**

Patient Name (Please Print)