

## OUR PAYMENT OPTIONS

Prior to seeing the doctor, a staff member will briefly review your symptoms (if any) and talk to you about Endodontics to introduce you to the kind of work you may need. The doctor will then discuss all relevant diagnostic information, make treatment recommendations and review treatment options with you.

Along with this initial discussion our staff person will estimate the likely costs involved in your treatment and review your financial options. To help keep costs down for you, our goal is to eliminate sending you a bill for any treatment received in our office. In order to prepare you for this discussion, we ask you to read and sign the following:

- **FULL PAYMENT AT TIME OF SERVICE.** If additional visits are required in your treatment plan, your options are to pay in full on today's visit or pay per visit as each stage of your treatment is completed.
- As a courtesy to you, we will file your **INSURANCE** claim following benefit verification. Please read and sign the **purple insurance** sheet.
- WE ACCEPT **CASH, CHECK, VISA, MASTERCARD, DISCOVER AND AMERICAN EXPRESS.**
- **CARE CREDIT is the only payment plan option.** ( With approval which usually only takes a few minutes ) **PLEASE ASK AT THE FRONT DESK BEFORE TREATMENT, FOR A SPECIAL FORM TO FILL OUT.**
- My Method of Payment Today Will Be: \_\_\_\_\_

\*\*If you wish to pay by check please include your license number below:

\_\_\_\_\_

Thank you for understanding and agreeing to our payment options. **Please let us know if you have any questions or concerns.**

I HAVE SELECTED AND AGREE WITH THE PAYMENT OPTIONS.

X \_\_\_\_\_  
Signature of Patient or Responsible Party

\_\_\_\_\_  
Date