

Bunker Hill Pediatric Dentistry, PLLC

9742 Katy Freeway, Suite 500

Houston, TX 77055

713-464-KIDS (5437)

Financial Policy

We welcome you to our practice and thank you for choosing Bunker Hill Pediatric Dentistry for your child's dental needs. We strive to provide the best dental experience and oral health care for your child. It is our policy to make definite financial arrangements with you, the parent or legal guardian, before any treatment begins on your child. Our policy is outlined below. Please do not hesitate to ask any questions.

1. Payment is due in full at the time services are rendered. We accept cash, personal checks, debit cards, and most major credit cards (MasterCard, VISA, American Express, and Discover). If an extended payment plan is sought, we offer financing through the CareCredit program.
2. Payment is due in full at the time of the appointment for all new patient emergency visits.
3. All services rendered are charged directly to the parent or legal guardian of the patient, and the legal guardian is ultimately responsible for the account regardless of insurance coverage.
4. If you suspend or terminate dental care at Bunker Hill Pediatric Dentistry, PLLC, any fees for services rendered will be immediately due and payable.

Regarding dental insurance

5. You must provide us with accurate dental insurance information with the correct mailing address or a dental claim form provided by your employer.
6. As a courtesy to our patients, if we have received all your insurance information on the day of the appointment, we will gladly file the insurance claim for you.
7. You must be familiar with your insurance benefits. We are not responsible for and do not guarantee how your insurance company processes your claims or what benefits they pay per claim. You will be responsible for the deductible and the estimated portion not covered by your insurance, which is due at the time of treatment. Our estimates may be different than your insurance company's calculations; therefore, the amount due our office may be adjusted accordingly. **You are responsible for paying all charges not covered by your insurance, including all fees above your insurance company's schedule of "allowable" or usual and customary "UCR" fees.** If you have questions about "UCR" fees, please ask.
8. Your insurance benefits are assigned to you, the patient, and is a contract between you and your employer. Your coverage amount depends on the quality of the plan purchased by your employer, not the fees of the practice.
9. By law your insurance company is required to pay each claim within 30 days of receipt. We file all insurance electronically, so your insurance company will receive each claim within days of the treatment.
10. You are responsible for any balance on your account after 30 days, whether insurance has paid or not. Further insurance appeal will become your responsibility. We will gladly provide you with a claim form to assist you in following up with your insurance claim.
11. Should the fees for the professional services not be paid in accordance with the provisions herein, reasonable attorney's fees, plus applicable finance charges and disbursements, allowances and costs provided by law shall be included in the total amount due. If you have not paid your balance within 60 days, finance charges can be applied to all past due amounts at the rate of 1.5% per month (18% annual rate) until paid. If the account is in default and turned over for collection, a collection fee will be added. We will be glad to send a refund to you if your insurance pays us.
12. **There will be a \$30.00 service charge for all returned checks.**
13. We value your time and appreciate patients who honor their scheduled appointments. **There will be a \$35.00 fee charged to parents that cancel with less than 24 hours of notice.**

Authorization

I have read and accept the above Financial Policy for Bunker Hill Pediatric Dentistry. I understand it and agree to the terms set forth regarding payment.

Print Name of Responsible Party

Signature of Responsible Party

Date

Patient

Relationship to Patient

Bunker Hill Pediatric Dentistry, PLLC
Phone: 713-464-KIDS (5437)
Fax: 713-464-5438