## Financial Options

## Dr. Bui Financial Options

Option A (Pay as you go, non insurance patients only)<br>*5\% discount applied to the estimated patient portion if paid with cash/check<br>*5\% discount applied to the estimated patient portion if paid 72 hrs before scheduled appointment<br>*We proudly accept the following forms of payment: Cash, Check, Visa, Mastercard, American Express, Discover<br>(Please note these discounts will not apply to financed payment plans)

## Option B (Assignment of insurance benefits to dentist)

## IF YOU DO NOT COMPLETELY UNDERSTAND THE FOLLOWING INFORMATION, PLEASE SPEAK TO THE OFFICE MANAGER FOR A CLEAR UNDERSTANDING

*The estimated patient portion is due at time of service. If your claim has not been paid by your insurance company 90 days after the claim filed date, the balance on the claim becomes the patient's, (responsible party) full responsibility and will be due next statement date regardless of insurance benefits. Please note any remaining patient balance, after 90 days of insurance paying on all remaining claims is subject to a $15 \%$ interest charge if not paid.
*Please understand that your insurance coverage is just that, YOUR coverage. It does not release you from any financial obligations for the services we rendered to you.
*Keep in mind insurance covers only an estimated portion of your treatment.
The range of benefits depend solely on what your employer wishes to purchase. Some plans cover as little as $30 \%$ or as much as $100 \%$ of dental services. These benefits could and do change often. You as the customer are notified of these changes, as we are not. It is the responsibility of the patient to notify our office of any changes to insurance coverage that may affect or prevent payment of benefits. Ex)-group number change, termination of insurance, benefit percentage increase or decrease.
*Insurance plans base the amount of benefits on a schedule of fees developed by insurance companies which are NOT released to our practice. We determine your estimated portion based on the information your insurance company releases to our practice which is only the percentage of coverage for each category of procedures, example; (100\%-Preventative, 80\%-Basic, 50\%-Major). For this reason, you may receive a lower percentage than the reimbursement level indicated in your dental plan.

Option C (Third party financing)
*10\% filing fee is added to all third party financed payment plans
*Payment plans up to 12 months with low monthly payments or interest free loans
*No prepayment penalty
(Please note these discounts will not apply to financed payment plans)

## Cancellation Policy

Please make note that Dr. Bui's policy for cancellations or changes in scheduled appointments is a 24 hour notice. No shows or changes to the schedule within 24 hours will result in a $\$ 50$ charge as the patient's responsibility as insurance will not cover this charge.

I have read and understand Dr. Bui's financial arrangements and/or requirements

