

# Weber Dental

Family Dental Care

Because You Deserve a Healthy Smile

## Financial Responsibility

It is important to us that the quality of our business services matches the quality of our dental care. We want the handling of your account, from the start to be perceived as an extension of the dental care we provide you and your family.

As with any partnership, both parties have a role to play. Our role is to provide you with quality service. In turn, your role is to pay for your treatment at time of services. Our team will work with you to determine financial arrangements that make sense for both of us. With an agreement made, our joint follow-through will result in a win for everyone.

**Regarding Insurance:** Weber Dental will file claims for patients with dental insurance as long as complete insurance information is given at time of service. Your insurance policy is a contract between you and your insurance company. Since we are not a party to that contract, it is your responsibility to have claims paid within 45 days. If no payment by the insurance company is made in this time frame, the balance is transferred to you and due upon billing.



CASH OR PERSONAL CHECK ACCEPTED



I understand that any unpaid balance after 60 days is charged a yearly finance charge of 18%. I further understand that this finance charge is equal to 1.5% of my outstanding balance per month. **I understand that if my account reaches collection status (90 days) and I make no effort to pay off my account, my account will be assigned to a collection attorney or agency. If Dr. Weber must take additional steps to collect my account, I will pay ALL cost of collection, including court cost and attorney's fees incurred by Weber Dental.**

I have read and understand, accept and agree to the Financial Policy of Weber Dental:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_