

Dr. Bud Hall, III DDS
8220 Goodwood Blvd. Suite 3B
Baton Rouge, LA 70806
(225) 928-9838

FINANCIAL POLICIES - EFFECTIVE MARCH 1, 2015

- **Treatment Plan Estimates-** The treatment plan estimates we provide for _____ patients is a good-faith attempt to predict the cost of your treatment based **(Initial)** on the facts known to Dr. Hall's office when the estimate is made. As treatment progresses, your dentist may determine in consultation with you that different or additional treatment is necessary and your financial responsibility may change.
- **Predetermination of Insurance Benefits-** If you have dental insurance you have _____ the option to seek a Predetermination of Benefits before you proceed with any **(Initial)** treatment. Requesting a predetermination will inform the patient what the insurance company may pay toward a particular procedure. A predetermination is not a guarantee of payment.
- **Payment Policy-** Payment IN FULL of the estimated patient portion of the fees _____ are due no later than when services are rendered. For complex treatment requiring **(Initial)** 2 or more visits, we require a minimum deposit of 50% of the total estimated patient portion of the fees at the start of the treatment. Remaining balance must be paid in full prior to delivery.
- **Treatment Cancellation and Interrupted Services Charges-** Patients requiring _____ major services (i.e. crowns, bridges, dentures, and partial dentures) may cancel **(Initial)** treatment with no charge prior to natural teeth being prepared or altered for the prosthetic. Once tooth preparation occurs, patients are liable for the estimated full cost of the services even if they choose not to complete treatment.
- **Accepted Forms of Payment-** Dr. Hall's office accepts cash, personal checks, _____ Visa, MasterCard, American Express, Discover, assigned insurance benefits, **(Initial)** and Care Credit.

I have read and agree to the Financial Policy of Dr. Hall's Office.

Signature of patient or responsible party

Date