



Pine Ridge Dental, P.C.

**5140 South 56th Street
8545 Executive Woods Drive
(402) 423-1100**

Our mission at Pine Ridge Dental is to provide excellent and comfortable dental care to patients who appreciate our services. Please read our financial and billing policies below:

- We accept cash, personal checks, MasterCard, Visa, or Discover. If you are interested in applying for a 12 month interest free loan through Care Credit financing, please let us know.
- We will try to help you understand your particular insurance coverage but ultimately it is **your responsibility to know** the details of your plan benefits.
- Dental insurance is a contract between the employer and the patient. **For example Amalgam verses Composite for fillings.** The extent of coverage varies greatly between plans and sometimes even within a single plan. We will always recommend optimal treatment according to our standard of care regardless of insurance coverage. **Initial** _____
- **Any balance not covered by your dental insurance is your responsibility.** We will prepare and submit your insurance claim form at no cost as a courtesy for our patients. **The patient share will be due at time of treatment** unless prior arrangements have been made. Should our estimate of patient share be too high, a refund will be made at the time of payment from your insurance likewise, if the share estimate was low, the remainder will be due at the time of treatment. **Initial** _____
- Patients without insurance coverage will receive a 5% cash discount when fees are paid **in full the day of treatment.** Patients also have the opportunity to utilize our “On Call Club” discount for recall appointments.
- You may be charged for missed appointments or cancellations with less than 24 hours notice.
- In case of divorce, the custodial parent is responsible for all payments. Pine ridge Dental will not be involved in disagreements between the parties in a divorce situation.
- Accounts not paid in full within 60 days are considered past due and interest at 16% annually will be charged. Thorough communication should prevent past due accounts. However, we use a collection agency when necessary.
- If you have any questions about this information, please call (402) 423-1100.

“I verify the accuracy of the above financial information and I authorize the release of necessary information in order to process my dental claims.”

Patient or Guardian Signature

Date

Please Print Patients Name