



Patient Responsibilities Effective December 2017

First Visit Information

As dentists, we cater to the unique needs of our patients. If your child has developmental or behavioral issues that may affect his/her ability to accept dental treatment in a clinical setting, please inform us when making appointments. If we are aware of a child's particular needs, we will make every effort to accommodate them. Please remember that our goal is to become your child's "dental home" and provide your child with comprehensive dental health care. Understanding your child's unique needs allows us to better serve them.

Regulations prevent us from prescribing medication to anyone who is not a current patient of the practice. Therefore, if your child has a medical condition and is required to take medication before undergoing any dental procedure, including prophylactic cleanings, any medication must be prescribed by your child's current physician prior to the first visit. After the initial visit, required medication can be prescribed by doctors working in Children's Dentistry.

Appointments

We attempt to schedule appointments at your convenience and when time is available. Preschool children should be seen in the morning because they tend to be more cooperative, and we can work more slowly with the child for their comfort. School children requiring extensive work should be seen in the morning for the same reason. Missing school can be kept to a minimum when regular dental care is continued.

Since appointed times are reserved exclusively for each patient, we ask that you please notify our office 48 hours in advance of your scheduled appointment time if you are unable to keep your appointment. If our office has not received a confirmation 48 hours prior to your appointment you will be removed from our schedule. Another patient who needs our care could be scheduled if we have sufficient time to notify them. We realize that emergencies occur, but we ask for your assistance in this regard. If your child misses two (2) consecutive appointments, we may request that you seek dental care at another office that can better accommodate your schedule.

Transfer of X-Rays

If for any reason you decide to leave our practice, we understand you have the right to request copies of your x-rays. We are licensed by the New Hampshire Board of Radiology to take X-rays, and are required by law to retain originals on file.

(Continued on reverse)

• Three great locations! •

GILFORD

Lakes Professional Center
369 Hounsell Avenue • Suite #1
Gilford, NH 03249
603-527-2500 • Fax 603-527-2501

PLYMOUTH

Boulder Point
94 Boulder Point • Suite #1
Plymouth, NH 03264
603-536-2500 • Fax 603-536-2506

LITTLETON

81 Bethlehem Rd. • Suite #1
Littleton, NH 03561
603-444-1500 • Fax 603-444-2506

info@childrensdentistnh.com • www.childrensdentistnh.com

Insurance Claims

We file dental insurance as a courtesy to our patients. We may not have a contract with your insurance company, only you do. Therefore, we are not responsible for how your insurance company handles its claims or for what benefits they pay on a claim. We will assist you in estimating your portion of the cost of treatment, but we cannot guarantee what your insurance will or will not do with each claim. Although we make every attempt to file claims accurately and to resolve errors if they occur, we cannot be responsible for any errors in filing your claims.

Please keep us informed of any insurance changes such as policy name, insurance company address, or a change of employment status.

Financial

Dental insurance is meant to be an aid in receiving dental care. On average, most dental insurance plans pay between 50%-80% of the average total fee. Some plans pay more, some pay less. The percentage paid may be determined by how much you or your employer has paid for coverage or the type of contract your employer has set up with the insurance company. If your insurance plan pays you the subscriber directly we do request full payment in advance.

If we have received all of your insurance information on the day of the appointment, we will be happy to file your claim for you. You should be familiar with your insurance benefits, as we will collect from you the estimated amount insurance is not expected to pay. By law your insurance company is required to pay each claim within 30 days of receipt. We file claims in a manner such that your insurance company will receive claims within days of the treatment. You are responsible for any balance on your account after 30 days, whether insurance has paid or not. If you have not paid your balance within 60 days, a finance charge may be added to your account each month until paid. The Finance Charge will be computed at the rate of 1.50% per month or an ANNUAL PERCENTAGE RATE of 18.00 %. The finance charge on your account is computed by applying the periodic rate of 1.50% to the "overdue balance" of your account. The "overdue balance" of your account is calculated by taking the balance owed sixty (60) days ago, and then subtraction any payments or credits applied to the account during that time. The minimum finance charge is \$.01. If you have not made payment arrangements with our office within 60 days of services being provided, your account may be frozen and recommended for collection. Once recommended for collection, further services will not be provided until the outstanding balance is paid. If your account is delinquent and sent for collections you will be responsible for all collection cost and attorney fees. In the event payment cannot be made in full within the above referenced time frames, please call the office to discuss alternative payment plans with our finance coordinator. We will make every attempt to accommodate your situation.

Co-Payment

You may have noticed that sometimes your dental insurer reimburses you or our office at a lower rate than the actual fee incurred. Frequently, insurance companies state that the reimbursement was reduced because the fee has exceeded the usual, customary, or reasonable fee ("UCR") used by the insurance company. The data used to establish fees may be dated and are set by the insurance company so they can make a profit, too.

Insurance companies set their own schedules, and each company uses a different set of fees. These allowable fees may vary widely because each company collects fee information from claims it processes. The insurance company then uses this data to establish their fee schedule. Depending on the type of insurance you have and the exact nature of the plan, you may be responsible for the difference in what the insurance company pays and the fee assessed for services provided.

Payment is expected at the time services are provided by the person(s) accompanying the patient unless other arrangements have been made with our office in advance. In the event reimbursement is expected from a third party, it is the responsibility of the person(s) making the appointment and bringing the patient to the office to pay for services rendered. If you unable to pay at the time of service we will contact the responsible party to collect payment over the phone before treatment is rendered. In the event that your check is returned from the bank for Insufficient funds a charge of \$25.00 will be assessed to your account. Children's Dentistry will not be responsible for seeking payment from third parties

Sincerely,

Children's Dentistry

☪ **Three great locations!** ☪

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