

SLIDELL FAMILY DENTAL CARE

240 ERLANGER STREET SLIDELL, LA. 70458

Financial Arrangements

Broken Appointments Information

Truth in Lending Statement

It is the policy of this office to collect payment for services as they are rendered. Patients with insurance benefits are expected to pay their estimated portion and deductible at the time of service. A minority of insurance plans send benefits directly to the patient. In that event, the patient will pay in full and be reimbursed by their insurance carrier. **This office is a participating provider for Delta Premier, Humana, Cigna PPO (Radius Plan), Dentemax and Always Care insurance plans.** Dental insurance benefits are an agreement between you and your insurance company. As a courtesy for our patients we prepare and file insurance claims.

We accept Cash, Checks, Visa, Mastercard, Discover and American Express Credit Cards.

For payment plans options ask us about **Care Credit**.

All financial questions or special arrangements **MUST** be made at least 24 to 48 hours before your appointment.

Broken Appointment Information

The time for your dental appointment had been reserved exclusively for you. We request 24 hours notice to reschedule an appointment. If your appointment is longer than **two** hours, please allow 48 hour notice.

A minimum fee of \$50.00 per hour may be charged for missing an appointment or for changing an appointment without adequate notice.

I have read and understand all policies mentioned herein and recognize that I am ultimately responsible for all incurred fees.

Signature _____ Date _____