

## *Mission Valley Dental Clinic – Michael Ruhkala, D.D.S.*

### **Financial Agreement and Cancellation Policy**

The goal of Mission Valley Dental is to provide excellent dental care with both a professional and personal touch. We want to make certain that our financial policies are clear and understood by you. Fees for treatment are due at the time treatment is rendered and after applicable insurance estimate.

### **Payment Options**

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#### **Plan A: Payment as Services are Rendered**

You may use cash, check, credit or debit card to make 2 payments on major services. First payment is due at the start of treatment and second payment is due when treatment is complete.

#### **Plan B: Monthly Payment Plans**

For our patients who want to make monthly payments, we offer short and long-term financing through our own credit card/debit card payment plan (up to 3 payments) and On Spot Financing, through Missoula Federal Credit Union. A member or our staff will gladly assist you with the application process.

#### **Plan C: Insurance Coverage**

We would love to help you maximize your insurance benefits, and as a *courtesy*, we are happy to bill your dental insurance for services, if you have provided us with all the necessary information to do so. Please remember that the contract for your insurance is between you, your employer, and your dental carrier, and that your *estimated portion from co-pay and deductible*, is due in full the day of treatment. Be aware that some companies pay a fixed allowance for certain procedures and others pay a percentage of the charge. Since every insurance plan is different, please be sure to **check your coverage and ask questions prior to treatment**. For your own peace of mind, we advise that you know the benefits and restrictions of your individual plan. Also note many changes have taken place in the health insurance industry in recent years. Procedures and services once covered in full could now be partially covered, covered only under certain circumstances or in some cases, not covered at all. If your insurance has not responded to the treatment charges within 30 days, you may want to call your insurance company and ask questions.

### **Parent/Child Divorce Issues and Minor Patients**

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This office is NOT a party to your divorce agreement. *The parent that brings in the child is the person responsible for payment at time of service*. If there is needed information such as receipts or other paperwork, we would be happy to provide it.

### **Missed or Cancelled Appointments**

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If you need to cancel an appointment, please let us know at least 24 hours in advance. *If you do not show to your appointment, please be advised you may be charged a \$50.00 no show fee*. Note that emergencies do happen and will be taken into consideration. **After your second missed appointment, you will be required to put a deposit down to hold your appointment time slot.**

### **Interest & Rebilling Fees**

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*We are not a billing company*. If your account is over 30 days old, we reserve the right to charge interest in the amount of 18% apr as provided by state law. There also may be a 3.00 billing fee.

**X**

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Patient/Parent or Guardian Signature

Date