



Welcome to Redstone Dental

We realize you have many choices for your dental care and do appreciate you choosing our office for your dental needs. We at Redstone Dental are committed to providing you with the highest quality dentistry in a comprehensive, compassionate and cost effective manner.

GENERAL INFORMATION

- Insurance is a benefit to help defray the cost of your treatment and is a contract between you, your employer and the insurance company. As a courtesy, we will bill your insurance for all services rendered if you provide us with the necessary information.
- Although our staff will assist you whenever possible, you are expected to know and understand the exclusions, limitations, maximums and specifics of your insurance plan.
- The treatment we recommend will always be based on your individual needs rather than your insurance coverage. We will discuss the diagnosis, total cost of treatment and any assistance you may expect from your insurance. Please understand that not all necessary services are covered by your insurance company.
- Our staff makes every effort to confirm appointments two days prior to the scheduled appointment; however, it is the patient's responsibility to keep track of his/her appointment dates and times.

INITIAL VISIT / RECALL / X-RAYS

- The initial visit will consist of a comprehensive oral evaluation and a series of x-rays.
- Recall visits (every six months) will consist of a periodic exam and any x-rays that the doctor deems necessary.
- Most insurance plans have frequency limitations and restrictions with respect to x-rays. If your insurance denies any or all of the x-rays at any visit you may be responsible for any unpaid balance.
- X-rays are necessary in the diagnosis and treatment of patients. Refusal to allow all necessary x-rays to be taken may result in the doctor refusing to diagnose or perform treatment until the needed x-rays are obtained.

PPO & PRIVATE INSURANCE

- We are contracted with many PPO insurance plans. If you are unsure if we are contracted with your plan please ask one of our front office staff.
- All co-pays quoted are estimates based on the information given to us by your insurance company. All co-pays/deductibles are due at the time services are scheduled.
- If we are unable to verify your benefits or eligibility prior to your appointment, payment is due in full at the time the services are rendered.
- Most insurance companies will tell their members what percentages they will pay for certain procedures (i.e., 80 or 100%) but fail to explain that those percentages can be based on a fee schedule or usual and customary fees and may be subject to certain limitations and/or annual maximums. We will attempt to estimate your portion as close to the actual amounts as possible, however, if we do not have a copy of your insurance plan's fee schedule our calculation can only be an estimate. Any difference in our fees and those of your insurance are your responsibility.
- By signing this form I authorize Redstone Dental to affix my name to any and all claims or documents related to any and all health benefits due to me and/or my dependents. Additionally, I authorize payments of dental benefits otherwise payable to me to be paid directly to Redstone Dental. I agree to be responsible for all charges for dental services and materials not paid by my dental benefit plan unless Redstone Dental has a contractual agreement with my plan prohibiting all or a portion of such charges.



To the extent permitted under applicable laws, I authorize the release of any information relating to any claim(s) submitted on my behalf.

NO INSURANCE

- Uninsured patients are required to pay for services in full at the time of scheduling/confirming appointments.

SAVING SMILES an In-House Discount Plan

To assist patients that do not have insurance to assist them with their dental needs, Redstone Dental offers an In-House Discount Plan called Saving Smiles. Savings Smiles is a membership based Dental Discount Plan that provides freedom and flexibility to health conscious individuals looking to maintain their oral health and minimize dental care expenses. It provides greater access to quality dental care and offers benefits found only in high priced insurance plans.

The plan includes:

- 2 Routine exams / year
- 2 Regular cleanings / year
- Unlimited x-rays
- Free Oral Cancer Screenings during routing exams
- 2 Fluoride treatments / year
- 15% off ALL general services

Ask one of our team members for more information or to help you enroll you today!

SOCIAL MEDIA CONSENT

We love to share before and after images of our cosmetic and dental procedures. We will always ask for verbal consent before taking any images during your treatment appointment. In the event you are chosen to be featured on our social media please read and acknowledge the following information by signing this form: By signing I grant permission for Redstone Dental to use their photographs on social media accounts including Facebook, Instagram, Tiktok and on the company website without acknowledgement or recognition given to the patient. By signing I also grant Redstone Dental creative permission to alter the photographs and consent to the distribution or sharing of photographs on social media accounts for the purpose of publicity and promotion of the company. In giving consent, I release Redstone Dental from liability for any personal or proprietary right that I may have in connection with the use of images on social media.

MISSED APPOINTMENTS

Because we reserve your scheduled appointment time just for you, when you need to reschedule or cancel an appointment we do require at least a 24-hour notice. We reserve the right to charge \$50.00 for any failed/rescheduled appointments without a 24-hour notice.

FINANCIAL POLICY / INFORMATION

- We accept local checks with a picture ID, Visa, Master Card, Discover, American Express and cash. Outside financing is available upon approval with no money down, low monthly payments and interest free options. Please ask one of our front office staff for additional information.
- Checks are processed electronically. In the event we are unable to process a check electronically we reserve the right to request another form of payment. If we chose to accept the check for deposit then in the event the check is returned a \$25.00 charge will be assessed.
- Regardless of insurance coverage the patient/responsible party is ultimately responsible for all services rendered. If the insurance payment has not been received within 60 days of the date of service, any balance remaining is due and payable in full.
- The patient/responsible party agrees to pay any attorney's fees, collection fees and/or court costs that may be incurred to satisfy their obligation.
- We require that all estimated out of pocket expense be paid at the time of scheduling. This policy helps us secure the necessary resources and allocate the time each patient deserves with their provider. We strive to provide accurate estimates; however, the final patient portion is determined by your insurance company. If there is an additional out of pocket expense, we require your account to be paid in full upon closure of your insurance claim.