

FINANCIAL AND APPOINTMENT POLICY

Thank you for choosing Community Health Center of Central Wyoming (CHCCW) Dental Clinic as your dental care provider. We strive to offer quality and affordable dental services provided by qualified professionals. It is important that you understand your financial and appointment responsibilities, recommended treatment plan, the costs associated, and that some dental procedures may require referral to another dentist or specialist.

Treatment Plan: When you are scheduled for a Comprehensive Exam our dentist will perform an evaluation of your dental and oral health needs and develop a treatment plan that will address those needs. The dentist has authorized the dental staff to perform some services required to provide the diagnosis and treatment plan. The dental clinic requires that you see the hygienist according to your prescribed maintenance schedule in order to continue to be treated by the dentist. Repeated visits may be required for completion of this treatment plan. Your dentist will discuss the details of your treatment plan with you and give you a copy upon request.

Dental or Specialist Referral: Your treatment plan may require services that cannot be provided at the CHCCW Dental Clinic. In this case, you will be referred to another dentist or specialist for completion of your treatment plan. Payment arrangements must be made with the dentist/specialist office prior to your first visit. Sliding fees will not apply to outside providers.

Payment Expectations: The CHCCW Dental Clinic provides many options for dental patients to minimize the financial barriers to healthy and complete dental care. As a courtesy the office staff will file to all insurances, including Medicaid. However, you will be expected to pay your estimated co-insurance at the time of service. If your insurance or Medicaid does not pay for part or all of the services, you are responsible for the billed amount. We realize that temporary financial situations may affect timely payment of your account. If such problems do arise, we encourage you to contact us promptly for assistance in management of your account. If you show up without payment, your appointment will be rescheduled. True emergencies will be handled on a case-by-case basis.

Dental Insurance and Medicaid: Your insurance policy is a contract between you and your insurance company. We are not a party to that contract. You understand that all charges are ultimately your responsibility even if insurance does not pay. Please be aware that some, and perhaps all, of the services provided may not be covered services and not considered reasonable and customary under the terms of your insurance policy. If you do not have insurance, CHCCW will help find an available financial assistant program. If none is found, CHCCW offers the sliding fee discount for those who qualify, please ask the receptionist about the requirements. We do everything possible to keep our services affordable.

Emergencies: The CHCCW Dental Clinic will provide emergency dental services whenever possible. However, referral to another Dentist, Specialty, or Primary Care provider may be necessary to accommodate your emergent needs, based on the severity of the emergency. When there is not availability on our schedule, we will keep a waiting list for those emergencies that want to schedule with our clinic. Or, we will schedule your for the next available time, which could be several days.

Lab Charges: Some dental procedures require the use of an outside Lab for services such as dentures, bridges, crowns, etc. You must pay in advance for Lab services. If you are on a sliding scale, the charges for Laboratory cases are discounted differently than the normal discounted percent for your sliding scale.

Scheduling, Cancelling and No-Showing for Appointments: The CHCCW Dental Clinic will make every effort to schedule your appointments according to your recommended treatment plan. Check-in is twenty (20) minutes prior to your scheduled appointment time. An appointment must be cancelled at least two (2) hours prior to the time of the appointment or will be considered a "No Show". Patients who no-show for dental treatments will not be seen until they pay a twenty-five dollar (\$25.00) late fee, which will not be billed to insurance, payment is required before scheduling next appointment. Patients that arrive ten (10) minutes late for scheduled appointment will be asked to wait in the lobby while the receptionist checks with the provider to determine if the patient can be seen at that time.

CHCCW HIPAA / Patient's and Provider's Rights and Responsibilities. The Dental Clinic provides copies of these policies. Patient acknowledges they have read and understand these policies.

I HAVE READ the CHCCW Dental Clinic Financial and Appointment Policy and understand the services provided and my responsibilities as a dental clinic patient. I authorize the dentist and the dental staff to provide services to me.

Last Name _____ First Name _____

Signature of Patient or Guardian _____ Date _____