112 S. Main Street, Fitzgerald, GA 31750

229-423-4500

colonydentalcare@gmail.com

Financial Information

- Our patients who don't carry insurance are asked to pay for their treatment in full at the time of service.
- Our patients with insurance are asked to pay their deductible and/or patient portion at the time of service.
- Payment can be made by cash, check or credit card. We accept Visa, Mastercard, American Express, Discover and Care Credit. We also accept Apple Pay and Goggle Pay.
- As a courtesy to you, we will file your primary and secondary insurance. Please provide the appropriate insurance information/copy of your insurance cards. Our office will ESTIMATE the amount your insurance will cover and ask that you pay your patient portion at the time of service.
- Insurance claims that have not been paid within 90 days or any remaining balance after insurance pays, is due by the patient upon receipt of their statement.
- After 30 days, there will be a 1% finance charge accrued monthly on any outstanding patient balance.
- There is a $30.00 fee applied to all returned checks.
- Since your time is valuable, we work on an appointment basis only. This means that when you are given an appointment, that time is reserved exclusively for you. If an appointment must be changed, we require 24 hours' notice. There will be a $25 fee charged to your account for missed or broken appointments.
- Please feel free to notify the staff with any questions you may have.

I have read the financial policy and agree, as indicated by my signature.

Print name: _____

Signature: _____ **Date:** _____