School of Dentistry Student and Resident Clinics Financial

Effective 7/13

Policies Consent

It is important that patients understand and agree to our financial policies prior to starting treatment. We do not
offer payment plans, a "sliding fee scale", or financial assistance (the financial assistance program at the
OHSU Hospital does not apply here).

PAYMENT INFORMATION

- We accept, cash, checks and select credit cards for payment. There is a \$35 charge for checks returned for insufficient funds.
- Payment should be made in advance or at the time of service for all treatment provided. If treatment is not paid
 for by the date of service and/or is billed to the patient afterwards, payment is due within 30 days of receiving
 notification.
- Major types of treatment that require multiple appointments, such as Crowns, Bridges, Implants, Partial Dentures or Complete Dentures must be paid for in full prior to the start of the procedure.

OVERDUE ACCOUNTS AND COLLECTIONS

- Payment is due within 30 days from the billing date. Patients cannot receive treatment if their balance is more than 30 days past due.
- Accounts 60 days past due will be charged a \$25 late fee and will be notified that they are pending collections.
 Accounts 90 days past due will be charged a \$75 collection fee and turned over to a collection agency.
- Patients who are sent to collections will be discontinued from continued care. To resume treatment the patient
 must pay the balance in full and make an appointment through the Admitting Clinic. More than one instance of
 collections in the patient's record may prevent re-acceptance into our program.

INSURANCE

- It is the patient's responsibility to let us know if they have dental insurance and to notify us of any changes in
 insurance coverage. An additional insurance consent form must be signed before insurance can be billed.
- The patient is financially responsible for the entire cost of treatment, regardless of insurance coverage. It is the
 patient's responsibility to know their benefits and to communicate with their insurance company if there are
 questions or disputes.



If you have private insurance (not OHP or Medicaid), this policy applies.

School of Dentistry Student and Resident Clinics Private Insurance Policies Consent

- Insurance is billed as a courtesy to patients. It is important to us that patients understand the insurance policies
 and their financial responsibility regardless of insurance coverage.
- The patient is ultimately responsible for knowing their insurance benefits and communicating with their insurance company if there are questions or disputes. The patient is financially responsible for the entire cost of treatment, regardless of insurance coverage.
- Any information we receive about a patient's insurance coverage is just an estimate. The estimate may differ
 from actual benefits paid due to factors such as annual maximums, frequency limits, deductibles, non-covered
 services, etc. (please see insurance brochure for more information).
- If we receive an estimate of patient insurance coverage, the patient will be allowed to pay the estimated 'patient copay' and we will bill insurance for 'insurance estimate'. If insurance does not pay their estimated benefit for any reason, the patient is responsible for paying their balance in full within 30 days of notification that insurance has not paid.
- We will not submit a pre-treatment estimate (PTE) unless required by the insurance company. It is the patient's
 responsibility to find out if the insurance company requires a PTE and to make a request in writing by filling out
 a Pre-Treatment Estimate Request form at the cashier's office. If insurance does not pay the estimated
 portion shown on the pre-treatment estimate, the patient is responsible for paying the balance in full
 within 30 days of notification that insurance has not paid.
- Most insurance companies pay within 30-60 days. If insurance has not paid their estimated benefit in 90 days, the 'insurance portion' of the balance will be billed to the patient and is due within 30 days of notification.
- We will not allow the patient account balance to remain overdue while he/she is working to resolve
 insurance disputes. If a patient is billed for the estimated 'insurance portion,' payment is due within 30 days
 of notification.
- If insurance pays a benefit after a patient has paid the balance in full, we will either credit the patient 's account or work with the insurance company to pay the member directly. Once treatment is complete or the patient leaves the program, we will issue a refund for any credit on the patient 's account. Due to OHSU processes, it may take up to 4-6 weeks to receive a refund in the mail.