



BRAD R. HOBSON, DDS, PLLC  
GENERAL DENTISTRY

## FINANCIAL AND SCHEDULING POLICIES

We are committed to providing each patient with the best possible care in a timely manner. Please review the following policies to help us better serve you.

### Regarding Non-Insured Patients

Payment is due in full at the time of service unless prior arrangements have been made.

### Regarding Insured Patients

The estimated non-insurance portion (co-pay) for treatment rendered is due at the time of service. While the filing of insurance claims is a courtesy to our patients, all charges are your responsibility from the date the services are rendered. If your insurance company has not paid on your account in 90 days, the balance will be expected in full. If your insurance company sends you direct payment for Dr. Hobson's services, you are required to pay in full on the day of service.

We will gladly discuss your proposed treatment and answer any questions relating to your insurance; however, please understand:

- Your insurance is a contract between you and/or your employer, and the insurance company. We are **not** a party to that contract.
- Not all services are a covered benefit in all contracts. Some insurance companies arbitrarily select certain services **they** do not cover.

We accept cash, check, Visa, MasterCard, American Express, and Discover cards. Information regarding extended payment plans through Care Credit is also available. Returned checks may be subject to an additional fee. After 30 days all accounts are subject to a Finance Charge of 1% monthly on the unpaid balances.

If you have any questions about any of the above information or are uncertain regarding insurance information please do not hesitate to call. We are here to help you.

### Regarding Appointment Cancellations

We do understand that illness, emergencies, flat tires, and bad weather do occur. We ask our patients to give us 24 hours' notice whenever possible, if they cannot keep an appointment. This allows us time to fill our schedule with other patients who may be waiting. We appreciate your understanding and consideration regarding our cancellation and failed appointment policy.

- Cancellation or rescheduling of an appointment with 24 hours or more notification will result in no charge.
- A failed appointment is an appointment that is cancelled/rescheduled without 24 hours' notice or an appointment where a patient does not show up.
- We do allow for one (1) broken appointment as a courtesy.
- Any additional failed appointments will be charged a fee of \$45 for a hygiene appointment and/or \$75 per hour for a doctor's appointment.
- After two (2) failed appointments, we may require a deposit of up to 100% that will be applied to your appointment, in order to reserve any further appointments.
- After three (3) failed appointments you risk being dismissed from the practice.

To cancel appointments please call or text (406) 761-1945. If you do not reach a team member you may leave a detailed message on the voice mail or with our after-hours answering service. You may also cancel your appointment using the confirmation text message that is sent to you from our patient communication system.

I have read, understand and agree (regardless of my insurance) with these financial policies.

NAME (please print) \_\_\_\_\_

SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

PARENT/GUARDIAN (if necessary) \_\_\_\_\_ Date \_\_\_\_\_