

John V. Shroyer, DDS, PA.
Excellence in Oral Surgery and Dental Implants

Financial Policy

Patients Without Insurance:

- Our office policy requires that payment is due in full on the date of service.

Patients With Insurance:

- On your first visit, our policy requires that payment is due in full on the date of service.
- On your second visit, you will be responsible for at least 30% co-payment at the time treatment is rendered. An additional deductible charge may also be assessed if your deductible has not been met for the year.
- You must provide the name of your insurance company, address and phone number to submit a claim form. If not provided, you will be required to pay for your visit in full and your insurance company will reimburse you.
- After 60 days, your unpaid balance becomes your responsibility and is subject to the collection process.

Patients With Dual Insurance:

- We will accept one insurance plan. You must pay the co-payment on the primary insurance. As a courtesy to you, we will file the secondary insurance claim once the primary insurance pays.

**There will be a \$35.00 charge on all returned checks.

I have read and understand the above financial policy.

Signature: _____ Date: _____