

# **W. Stephen Coker, DMD, PA**

## **OUR POLICY OF CARE AND PAYMENT**

### ***ENSURING THAT OUR PATIENTS RECEIVE HIGH QUALITY CARE IS THE GOAL OF OUR PRACTICE***

**Payment is due at the time of treatment.**

#### **Payment Options**

1. Cash
2. Check
3. Major Credit Cards
4. CareCredit

Applying for CareCredit only takes a few minutes and there is no fee to apply.  
CareCredit allows you to start treatment today and spread payments over time.  
[WWW.CARECREDIT.COM](http://WWW.CARECREDIT.COM)

#### **FOR OUR PATIENTS WITH DENTAL INSURANCE**

**We will collect from you at the time of your appointment all charges not expected to be paid by your insurance company.**

- As a courtesy, we will file your dental claim for you.
- We allow 45 days to receive payment from your insurance company.  
If after 45 days, no payment has been received, you will be billed.
- You are responsible for all fees regardless of what insurance does or does not pay.

***PLEASE BE AWARE THAT THE PARENT OR LEGAL GUARDIAN BRINGING A  
CHILD TO THEIR APPOINTMENT WITH US WILL BE HELD LEGALLY RESPONSIBLE FOR ALL  
CHARGES.***

**I understand I am responsible for all fees regardless of what  
insurance does or does not pay.**

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**Signature of Patient/Responsible Party**

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**Date**