

JEFFREY L. SCHIMP, D.D.S., P.C.

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Financial and Payment Information

We are happy that you have chosen us to be your professional dental care team. We will strive to make your experience with our office as comfortable and inviting as we can.

There are a few things we would like our patients, new and current, to know about our office and our office policies.

1. For patients without dental insurance **Payment in full is expected at the time of service.** As a courtesy to you we give a 10% discount for cash or checks and a 5% discount for credit cards at the time of service when your visit is paid in full.
2. For patients with insurance: **Co-pays and deductibles will need to be paid for at the time of service.** We will check on your benefits, submit your claims, and help expedite any questions or concerns that may arise, however knowing and understanding your plan and benefits is ultimately your responsibility.
3. **Our office does offer a financing plan.** Care Credit replaces our open-billing policy. This service offers up to 6 months interest free. An application and more information are available at the front desk if interested.
4. **Our office will not make new appointments for any patient with a past due balance.** Accounts with a balance must be paid in full before a new appointment can be scheduled.

Your signature lets us know that you have read, understood, and are willing to comply with the information stated above. Our hope is that this eliminates any confusion and helps us maintain a positive patient/office relationship as we take care of your dental needs.

NAME

DATE