

George P Franco Jr DDS
377 Hwy 21 Suite 102
Madisonville, La 70447

Office Financial Policy

PAYMENTS: Payment is due at the time services are rendered. We accept cash, personal checks, money orders, Visa, Mastercard, Discover, American Express, and Care Credit. Billing for services rendered is not available. A fee of \$25 will be charged for any checks returned by your bank.

INSURANCE BENEFITS: Insurance benefits are determined by your employer, not your dentist. Insurance is not a guarantee of payment nor will it cover all your costs. Please understand that insurance is a contract between you and your insurance company and frequent denials and/or insufficient payments are more commonplace as employers reduce your benefits. We will do our best to maximize all the benefits you are entitled to, but payment for your dental care is ultimately your responsibility. All copayments are due at the time services are rendered. Any remaining balances after insurance payments are your responsibility and will be billed to your credit card on file or Care Credit. Any dental claims outstanding on your behalf not paid by your insurance company after 60 days of filing by this office are also your responsibility and will be billed to your credit card on file or Care Credit.

APPOINTMENTS: Your appointment is reserved exclusively for you. The courtesy of advance notice when you are unable to keep an appointment is appreciated and required. We reserve the right to charge for appointments cancelled or broken without 24 hour notice.

Signature: _____

Date: _____