

*Alpha Dental*  
9325 Upland Lane N, Ste. 330  
Maple Grove, MN 55369  
(763) 494-4940

### ***FINANCIAL POLICY***

Thank you for choosing us as your Dental care provider. We are committed to your treatment being successful. Please understand that payment of your bill is considered part of your treatment. The following is a statement of our Financial Policy, which we require you to read and sign prior to any treatment.

- ❖ Payment and co-payments are due at the time of service. We accept cash, check, Visa, MasterCard, Discover and CareCredit
  
- ❖ For patients with dental insurance, the costs incurred during treatment are the responsibility of the patient. As a courtesy our office will submit claims to your insurance provider. However, any difference between our fees and what the insurance company pays is the ***sole responsibility of the patient***. Your insurance policy is a contract between ***you and your insurance company***, we are not a party to that contract.
  
- ❖ A cancellation fee will be applied to all appointments that are failed or canceled without a 48 hour notice.
  
- ❖ For all accounts 60 days past due, 1.5% interest will be charged monthly.
  
- ❖ Should we need to send your account to a third party for collections, you will be responsible for all fees, including but not limited to all legal fees, charged to Alpha Dental for collection on your account.

Please let us know if you have any questions or concerns.

I have read, understand and agree to this Payment Policy.

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Patient or Guardian Signature

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Date