

SEMANS FAMILY DENTISTRY

Thomas D. & JoAnn H. Semans D.D.S.

2660 W. Market St. #200, | Akron OH, 44333

Phone: 330-867-4461 Fax: 330-867-4628

www.semansfamilydentistry.com

Email: drsemans@neo.rr.com

Financial Policy

Payment Options:

- Cash, Check, Visa, Mastercard or Discover Card. Payment is required at time of treatment.
- A 5% courtesy adjustment is given to patients with cases of \$3,000 or more who pay for their treatment with cash or check at the initial appointment.
- Convenient Monthly Payment Plans¹ from CareCredit
 - o Allows you to make interest free payments over a 6 or 12 month period
 - o No annual fees or pre-payment penalties

Please note:

Payment is required at the time of completion of all treatment, except for larger cases, in which payment arrangements must be made prior to the procedure.

For patients with dental insurance we are happy to work with your carrier to maximize your benefit and directly bill your insurance for reimbursement for your treatment.² Please note that although we accept all dental insurance plans, we are an out-of-network provider for all insurance companies. The balance of all treatment that your insurance carrier does not cover above our fees is your responsibility and must be paid at the time of treatment.

We do not accept Medicare, Medicaid, or any insurance plan that requires patients to go to an in-network provider.

A \$35.00 fee will be assessed for all returned checks.

If you have any questions, please call our office at 330-867-4461.

Patient, Parent or Guardian Signature

Date

Patient Name (Please Print)

¹Subject to credit approval

²However, if we do not receive payment from your insurance carrier within 30 days, you will be responsible for payment of your treatment fees and collection of your benefits directly from your insurance carrier.