

Office Financial and Cancellation Policy for MassHealth Patients

- ❖ What is covered by MassHealth?
 - **MassHealth – Children (Under 21)**
 - Preventative and Diagnostic
 - Basic Restorative
 - Major Restorative (not including implants)
 - Orthodontic
 - Oral Surgery
 - **MassHealth – Standard Adult (21 and over)**
 - Preventative and Diagnostic
 - Basic Restorative
 - Oral Surgery
 - Partial and Complete Dentures (Resin-based)
- Please check with the front desk for detail of the procedures covered
- ❖ For procedures that are not covered by MassHealth, you are responsible for the fee of service. The services will be charged at the office's fee schedule. We try to make your dental care as cost-efficient as possible. One measure we have taken to keep cost down is to minimize our billing and accounting; therefore, we ask for payment at the time of service. Financial arrangements must be established before our office can proceed with any recommended treatment.
- ❖ All patients who are seen in our office for a Comprehensive Exam are provided with a Treatment Plan. This is an **ESTIMATE** of the anticipated cost of your dental treatment. Your Treatment Plan will include an **estimated** MassHealth payment based on your dental coverage. **If your MassHealth payment differs from our estimate, you are responsible for the balance.**
- ❖ If after MassHealth pays, there remains a balance on your account, you will receive a *Statement for Services*. This is due and payable by the 25th of the month. We will continue to send a statement each month until the balance of your account is paid in full. Should your account become delinquent (past due), we will continue to send a statement until the balance is 90 days old. If your account remains delinquent, two consecutive letters will be sent in order to avoid the necessity of pursuing further collection actions. Should your account remain delinquent, we will forward the balance to our collection agency.
- ❖ In cases of divorce or separation, the parent bringing the child is responsible for payment.
- ❖ **Cancellation Policy:** If it becomes necessary to reschedule your appointment, we request the courtesy of 24 hours notice. If you cancel, do not show or miss your appointment without the required notice we will notify MassHealth of the broken appointment. MassHealth may revoke your coverage if excessive number of broken appointments are reported. **After 3 missed appointments without the 24 hours notices, we will forward your records to another office of your choice to continue your care.**
- ❖ If you have any questions regarding your account balance or if you are experiencing circumstances beyond your control, please contact our office. We will be happy to assist you with your questions or to set up special payment arrangements.

Our practice firmly believes that a good doctor/patient relationship is based upon a clear understanding of office policies and an open line of communication. We have instructed our staff to make every effort to clarify any misunderstandings you may have concerning your account balance or our financial policies. We hope to avoid any possible disagreements over payment for professional services.

Our patients and our relationships with our patients are very important to us. If you have any questions or need assistance, please contact us immediately.

Patient/ Patient Representative Signature: _____ Date: _____