

Mitul V. Patel, D.D.S.

Payment Options:

At Dr. Patel's office we are proud to be part of a team whose primary mission is to deliver the finest, most comprehensive dental care available today. We are aware that unexpected or desired health care cost can impact your budget and we want to make our services as affordable as possible. For your convenience you can choose any of the following health care options that comfortably fit within your budget and receive the highest quality dental care.

Payment Agreement (with approval, for fees over \$1000):

Total patient obligation may be divided as follows: 30% due prior to the start of your treatment plan and, for your convenience, the total remaining cost may be divided equally by scheduled visits. Please be advised that all copays and balances must be paid in full by end of treatment.

Third Party Payment Plans (for fees over \$1000):

Our practice offers payment program through Care Credit, with fast approval over the phone and/or fax, your payments can be much lower than those available through our office. These plans specialize exclusively in helping patients finance dental treatment. We will assist you in contacting them from our office. Some of the advantages of these plans are:

- No initial payment
- Low monthly payments
- No interest for payment plans up to 12 months
- Payment plans up to 60 months with low monthly payments and finance charge.

Pay as you Go:

You may choose to pay your entire obligation for each visit, at the visit. Please be aware that as your treatment progresses, the cost of treatment may have to be adjusted, depending on the circumstances. You will be informed of any such adjustments and how it will affect your payment plan.

Missed Appointments:

Please remember that appointment times are reserved solely for you. We understand that emergencies or conflicts may arise from time to time in your schedule. If you must change a scheduled appointment, please inform us as soon as possible. If we are not informed before 12 pm the working day prior to your appointment, we will regrettably charge your account a \$50 cancellation fee for each missed or cancelled appointment. A consistent pattern of failed appointments or last minute cancellations will force us to the limit the treatment times which we can provide and ultimately may result in dismissal from the practice.

T	rea	tment	Pro	gress:
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Please remember that all treatment in progress must be completed in a timely manner. An excessive length in time between fabrication and permanent cementation of dental work could result in an additional fee if lab work is required again. Please speak to Dr. Patel with any questions pertaining to this matter.

Dishonored Checks:

There will be a \$35 bank charge for any payment that is dishonored and/or return unpaid.

Thank you for trusting us with your dental care. Please let us know if you have any questions or concerns.

Signature:	Date: