



Heather T. Hudkins, DDS, PC
General Dentist

William V. Brell, Jr., DDS, MSD
Pediatric Dentist

PAYMENT POLICY

Please be aware that the parent bringing the child into the office is legally responsible for the payment of all charges. This parent will be responsible to us for fees regardless of any custody agreements or court orders. **We cannot allow this office to become involved in any custody disputes, financial or otherwise.** We operate on a fee-for-service basis and therefore payment is required at each appointment. We do accept Visa, MasterCard, Discover, cash and personal checks. If this account is turned to a collection service, you will be responsible for all collection fees, attorney fees, and court fees.

For our patients with insurance we will file your claims for you as a courtesy: however, we do expect your insurance co-pay at the time of treatment. If we do not receive payment within 45 days from the date of treatment you will be expected to pay for all dental services. All balances over 60 days are subject to a 1.5% service charge.

Any insurance policy is a contract solely between you, as a patient, and the carrier of your insurance. Please make yourself aware of the benefits of your specific policy. If you have any questions concerning fees, please do not hesitate to ask one of our staff members. We will help you in any way we can.

APPOINTMENT POLICY

In consideration of our patients that are waiting to be scheduled it has become necessary to request a \$55 deposit for operatory treatment appointments. A notice of 24 hours must be given for cancellation or rescheduling. If a pattern of broken or cancelled appointment is seen, it may be necessary to place that patient on our inactive list so that we can give our loyal patients our utmost care and attention. If the office is closed when you call please leave a message with our answering service.

Please list patient's name(s) _____

Responsible party's name (printed) _____

Responsible party's signature _____

dentistry for children

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