

### Credit Card on File Policy

Thank you for choosing Mountain Shadows Dental for your dental needs. We are committed to providing you with exceptional care, as well as making our insurance billing processes as simple and efficient as possible.

To streamline our billing and payment system and to provide a seamless, convenient way for patients to pay their bills, Mountain Shadows Dental will require all patients to keep an active credit card on file with us, effective January 1, 2021. We will bill your insurance company first and upon their determination of benefits, we will only charge your credit card if they inform us of any patient responsibility. Circumstances, when your card would be charged, include but are not limited to missed or canceled appointments without 24-hour notice, co-payments, deductible, and coinsurance any non-covered services, and/or denial of services.

- Once your insurance has processed your claims, they will send an Explanation of Benefits (EOB) to both you and our office showing the amount of your total patient responsibility. You will typically receive the EOB before we do, so if you disagree with the patient responsibility balance owed, contact your insurance carrier immediately.
- When we receive the EOB, we notify you if you owe any remaining balance. We will charge your credit card 7 days after that notification.

If the credit card we have on file for you changes, please notify the office IMMEDIATELY by phone or email. We know credit card information changes frequently, including when a credit card expires. That is quite understandable. If we run your credit card and it is denied for any reason, we will contact you at the phone number you provided to identify a new payment method.

We will enter the new credit card number into your file, and that will become your new card on-file, subject to the same financial policy as the card you gave us in-person when you were in our office.

If there is a problem with your bill/claim and it is brought to our attention after your credit card payment processes, we will investigate it and if we owe you the money, we will refund it to the same card in a timely manner. We understand that there are legitimate reasons that you may not have a credit card. If this is the case, you are welcome to leave an HSA (Health Savings Account), or Flex Plan Card on File.

Email: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_