

Dr. Peter D. Balega, DDS

535 Newnan Street
Carrollton, GA 30177
(770)834-6663

FINANCIAL POLICY

- Payment is required when treatment is received
- Any payment plan must be approved in the front office prior to the start of treatment
- Insurance company payment is accepted, however;
Your percentage (copay) is due when treatment is received
Your deductible must be covered when your plan calls for it
If we do not have the information on your deductible, we will assume it is
\$50.00 and due prior to any service other than routine cleanings and
X-rays
- A 1.5% per month interest charge will be added if the balance due is not paid within
30 days
- A 5% CASH DISCOUNT is offered if the balance is paid in full at the time services are
rendered and if the total exceeds \$100
- If your insurance company does not pay for their portion of your bill within 60 days,
you are responsible for the open balance
- If you are more than 15 minutes late for an appointment, it may have to be
rescheduled
- After a second broken appointment, a \$20 fee must be paid prior to rescheduling
- For cases involving divorce, the parent that brings the child to the appointment is
responsible for payment. The office will not bill the other parent.
- There is a service charge of \$27.00 for returned checks

Please ask the front office or the doctor if you have any questions regarding this policy. We feel a clear understanding now will prevent any misunderstanding in the future. Copies of this policy are available upon request or from our website.

SIGNED: _____

DATE: _____