



Financial Disclaimer

We are pleased to offer the courtesy of submitting insurance claims on your behalf and accepting assignment of benefits to help reduce your family's out-of-pocket costs. However, please note:

- **Insurance benefits are not guaranteed.** Payment from your insurance company is an estimate and not a guarantee of coverage.
- If insurance denies a claim or coverage is terminated for any reason, you are responsible for the **full contracted treatment amount**.
- Orthodontic benefits are often paid in **installments over the course of treatment**. Any changes in your insurance status (e.g., new job, plan change, or cancellation) may result in a lower payment from your insurer.
- **Any remaining balance not paid by insurance, regardless of previous estimates, is your responsibility.** This may lead to additional out-of-pocket costs, even if the estimated co-pay was initially met.

Monthly Statements & Finance Charges

You will receive a monthly statement showing your current account balance.

- If your account remains unpaid for more than **90 days**, a **finance charge of 18% annual interest** will be applied to the outstanding balance.

Attorney Fees & Collection Costs

In the event your account is referred to an attorney or collection agency:

- You agree to pay attorney's fees equal to **33½% of the balance due**, or **\$400**, whichever is greater.
- You are also responsible for **all reasonable costs** related to legal action, including court filing fees and service of process, as determined by the court.