Campus Hills Dentistry 1208 E Churchville Rd. Suite 100 Bel Air, MD 21014

Phone: (410) 836-2253 Fax: (443) 787-4106

Dear Patient:

In an effort to provide you with flexible payment arrangements, we have expanded our payment policy.

PAYMENT ARRANGEMENTS ARE REQUESTED AT THETIME OF YOUR VISIT

We now accept the following payment options:

*Cash

Thank you

- *Check
- *Credit Card (Visa, MasterCard, Discover, American Express)
- *Automatic billing to your debit/credit card (Additional paperwork required)
- *Care Credit

We pre-authorize all major procedures when possible for an exact estimate directly from the insurance. You are solely responsible for any money owed after insurance payment. Failure to pay in a timely manner (30 days following billing statement) can result in additional attorney/collection/court cost & fees added to the original balance owed. We pride ourselves in providing caring, compassionate care. If you have trouble paying any balance owed, please call the office in an attempt to come to a resolution.

mank you.		
Sign:	 	
Print:		
Date:		

Financial policy updated 05/04/17