

NOTIFICATION OF PAYMENT POLICY

At Landerhaven Dental Associates, we understand the costs of dental care can add up quickly. We therefore offer several payment options to ease this burden in the hope that the full treatment can be accomplished to establish a stable point of dental health lasting far into the future. In the event the payment options are declined, it is the responsibility of the patient to make consistent and reasonable efforts to satisfy the balance owed. Part of this process is consistent communication to our office to notify us of any changes that may affect your ability to pay. A lingering balance can be a problem for both our office and the patient, so we therefore require an honest effort to resolve the issue.

When payments are insufficient to satisfy the balance and the patient has declined other payment options, we reserve the right to charge a fair interest rate similar to those of outside payment sources such as Care Credit or a personal credit card. Our policy is to add a 15% annual, or 1.25% monthly interest fee to the balance on the account. You are receiving this letter as a courtesy notification of this policy. Effective **June 1, 2014** we will begin institution of this policy on all accounts whose balance is outstanding more than 60 days and have no definitive payment plan arrangements.

We hope you understand the importance of making timely and appropriate payments on the account balance. This policy will only be applied to those accounts which continue to make payments, and if that effort stops we reserve the right to take action to collect the outstanding account balance. **Again, if you have made definitive payment arrangements, this policy will NOT affect that agreement.** We are aware of the unexpected nature of some financial situations and difficulties, and we feel this is a fair way to be understanding of those occurrences. If you should have any questions, please don't hesitate to contact our office.

Thank you,

William F. Lavigna, D.D.S.
Joseph R. Leon, D.M.D.

Patient signature

Date