

**CRAIG S. KARRIKER, D.M.D., P.A.**  
**General Dentistry**

400 South Granard Street  
Gaffney, South Carolina 29341

(864) 487-0710

We would like to welcome you to our office. It is our policy to provide excellent quality care to our patients and to run our practice efficiently. We ask your cooperation by assisting us with our financial policy.

Full payment is due when services are rendered. As a courtesy to those patients with dental insurance, we will file your primary insurance only. THE AMOUNT NOT COVERED BY THE PRIMARY INSURANCE WILL BE CALCULATED AND THAT AMOUNT IS PAYABLE ON THE DAY SERVICES ARE RENDERED. Our fees are based solely on the amount of time, skill, and care required to treat your particular case and is not based on your insurance coverage. Therefore, it is not uncommon to find differences in our fees and insurance fee schedules. Please understand that your insurance is an agreement between you, your employer and your insurance carrier.

Primary insurance will be filed only once. Once insurance is filed we will allow 45 days from the date of service for insurance to respond. At that time the patient will be billed directly. Any balance that is outstanding will become the patient's responsibility.

SECONDARY INSURANCE WILL NOT BE FILED BY OUR OFFICE and is the patient's responsibility. We will give you the necessary forms to file your secondary insurance. If you would prefer to file ALL of your insurance, we will also give you the necessary forms.

Our office accepts cash, checks, Mastercard, and Visa. Any check returned to our office for insufficient funds will generate an additional fee of \$30.00

Our office kindly ask that patients PLEASE CALL AT LEAST 24 HOURS IN ADVANCE TO CANCEL OR RESCHEDULE APPOINTMENTS. This will allow us to better serve another patient in need of our services. Thank you for trusting us with your dental care.

I have read, understand, and agree to the above policies.

\_\_\_\_\_  
Patient's signature (or guardians's signature)

\_\_\_\_\_  
date