



Telluride Center for Dentistry Terms of Service

1. Acceptance of Terms

By scheduling an appointment, receiving treatment, or using the services of our dental office, patients agree to the following Terms of Service. These terms are intended to ensure clear communication regarding patient care, financial responsibility, and office policies.

2. Appointments and Scheduling

We strive to provide timely and efficient care for all patients.

- Patients are asked to arrive on time for their appointments.
- If you are unable to keep an appointment, please notify our office **at least 24 hours in advance**.
- Missed appointments or late cancellations may be subject to a **missed appointment fee**.
- Repeated missed appointments may result in limitations on future scheduling.

3. Financial Responsibility

Payment is due at the time services are rendered unless other arrangements have been made in advance.

Patients are responsible for:

- All charges for services provided.
- Any portion of treatment not covered by insurance.
- Deductibles, co-payments, or estimated patient portions.

Accepted forms of payment may include:

- Cash
- Credit/Debit cards

- Checks
- Third-party financing (if offered), e.g Care Credit

Accounts not paid within the required time frame may be subject to **interest charges, late fees, or collection action.**

4. Insurance

As a courtesy, our office may submit claims to your dental insurance provider.

However:

- Insurance is a contract between the patient and the insurance company.
- Estimated insurance coverage is **not a guarantee of payment.**
- The patient is responsible for the full balance if insurance does not pay.

Out-of-network benefits may vary depending on the patient's plan.

5. Treatment Consent

Patients have the right to receive information regarding their diagnosis and treatment options. By accepting treatment, patients acknowledge:

- They have been informed of the **nature, purpose, risks, and alternatives** of treatment.
- No guarantees have been made regarding treatment outcomes.

Signed consent may be required for certain procedures.

6. Late Arrivals

Patients arriving late may need to:

- Reschedule their appointment, or
- Receive a shortened appointment with less treatment, depending on the schedule.

This policy helps prevent delays for other patients.

7. Patient Conduct

We strive to maintain a respectful and professional environment.

Our office reserves the right to refuse or discontinue treatment if a patient:

- Is abusive or threatening to staff or other patients
- Fails to follow office policies
- Repeatedly misses appointments

8. Privacy

Patient health information is protected according to applicable privacy laws, including **HIPAA**. Please review our **Notice of Privacy Practices** for details regarding how your information is used and protected.

9. Emergency Care

If you experience a dental emergency outside of office hours, please contact our office phone number for instructions or seek immediate care at an emergency facility if necessary.

10. Changes to Terms

Our office reserves the right to update these Terms of Service at any time. Updated policies will be available in the office and upon request.