



FINANCIAL POLICY

It is the goal of DreamGuard Anesthesia (DGA) to provide you with the highest quality of anesthesia care at a reasonable cost. Providing anesthesia services in the dental office setting significantly lowers the cost of treatment when compared to the cost of treatment in a hospital setting. It is important that you discuss the details of the procedure, including costs and coverage, and have all of your questions answered prior to receiving care. This document is intended to inform you of the fee structure and process for the anesthesia care provided by your Dentist Anesthesiologist. It also explains to you your financial responsibility for services rendered. Please reach out to us if you have any additional questions.

- ✓ **Anesthesia Fee** estimate is based upon the dentist's estimated operating time, which will vary with the anesthesia preparatory time and patient's individual response to the anesthetic agents used. The anesthesia fee includes pre-anesthesia evaluations, consultations with your physicians (if necessary), all drugs, supplies, anesthetic care, and recovery. The anesthesia billing period is from the time you are seated until recovery is complete. Payment for anesthesia charges will be due the day of treatment, prior to sedation, less any deposits made. If the anesthesia time exceeds the estimate, the Patient will be responsible for the additional charges. If the anesthesia time is less than the estimate, the patient will receive a pro-rated refund.
 - Your dentist has ESTIMATED your treatment time to be: _____
 - Anesthesia time (approximately treatment time plus 30minutes): _____
 - Anesthesia fees are: **\$250 for every 15 minutes**
 - **Anesthesia Fee Estimate:** \$ _____

- ✓ **Deposit:** To schedule anesthesia services for your appointment, a deposit of \$1000 is required. This deposit will be applied to your final balance the day of treatment.
- ✓ **Insurance:** Insurance companies vary in coverage, but most policies do not cover anesthesia in the dental setting. Some dental and medical insurance plans might provide reimbursement for anesthesia services rendered for dental procedures. It is your responsibility to submit for insurance reimbursement directly to your insurance company after you make full payment for services rendered. Ask your dentist for a letter of medical necessity and for your dental treatment notes to attach to your claim. DGA is not enrolled in-network with any medical or dental providers. If covered, services may be covered at an in-network rate if your dentist is an in-network provider. Please note the following billing codes when contacting your insurance:
 - CPT or procedure codes: Dental Billing Code (also Aetna or TriCare Medical): D9222, D9223.
 - All Other Medical Insurance Billing Code: 00170

- ✓ Payment can be received via cash or credit card (Visa, MasterCard, American Express and Discover cards). The patient or guardian will be responsible for the cost of any returned checks. There will be a fee assessed for all reimbursements amounting to the processing fee charged by your credit card/ care credit or a minimum of \$50.

Patient Name

Date

Patient Signature