



OAK HILLS DENTISTRY

Oak Hills Dentistry
Tyler Bradstreet, DMD
14740 NW Cornell Rd Ste 120
Portland, OR 97229
(503) 690-0400 • www.oakhillsdentist.com

Financial & Broken Appointment Policy

Payment Responsibility

Payment is due in full at the time of service, including insurance deductibles, estimated out-of-pocket costs, and any laboratory fees incurred once treatment has been authorized. If you have dental insurance, we will help prepare and submit claims as a courtesy; however, insurance estimates are not guarantees of coverage, and you are financially responsible for all charges regardless of insurance payment. Non-covered services, including cosmetic or elective procedures, are the patient's responsibility. If you have secondary insurance, we will assist with claim submission, but all balances remain your responsibility.

Courtesy Adjustments & Discounts

Any courtesy adjustments, professional discounts, or special fee arrangements provided by Oak Hills Dentistry are discretionary. These adjustments are only available to patients in good standing with treatment, attendance, and financial obligations, and they may be revoked at any time at the discretion of the practice.

Deposits & Payment Arrangements

For major restorative treatments such as crowns, implants, or dentures, a deposit may be required before treatment begins. Any payment plan or special arrangement must be made prior to treatment and approved by the office manager. Laboratory fees are non-refundable once fabrication has begun, regardless of whether the treatment is completed.

Balances, Interest & Collections

Balances over 60 days from the date of service may be subject to interest at 5-10% per month or a \$5.00 rebilling fee, whichever is greater. Accounts sent to collections will be assessed an additional \$100 processing fee, and you will be responsible for reasonable attorney's fees and collection costs. Balances under \$5.00 may be written off at the discretion of the practice.

Returned Payments

Returned checks will be charged a \$30.00 fee per incident. After a returned check, all future payments must be made by cash, credit card, or certified funds.



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Broken Appointment Policy

Your appointment time is reserved exclusively for you. We require two (2) full business days' notice (not including weekends or holidays) for cancellations or reschedules. Missed or late-cancelled appointments without proper notice may be charged a fee of \$25.00 per half hour of scheduled time. Repeated broken appointments may result in higher fees, restricted scheduling, or dismissal from the practice. Documented medical emergencies will not result in a fee.

Consent & Authorization

By signing this form, you authorize Oak Hills Dentistry to release treatment information to your insurance company as needed and to receive payment directly from them. This authorization remains valid until revoked in writing. You acknowledge responsibility for all charges and agree to the terms of this financial policy.

Patient Name (Print): _____

Patient Signature (Parent/Guardian if minor): _____ Date: _____

Staff Witness (optional): _____ Date: _____