



## *Financial Policies*

### Insurance:

We are dedicated to providing you with the best possible dental care. To give our patients this level of customer service will require that we have some financial and insurance policies. It is important that you read carefully and understand each of the following statements.

### Charges:

We help file your insurance claims as a courtesy and a convenience to you.

Your insurance coverage is a contract between you, your employer and the insurance company.  
We are not a party to this contract.  
Our relationship is with you and not with your insurance company.  
All charges are your responsibility.

Our office will submit your dental claims to your first and if applicable your secondary insurances as a courtesy. It is your responsibility to provide us with the correct current insurance information and to understand your benefits. It is also your responsibility to monitor what has been paid out from your insurance company per benefit year, should you be close to using up your benefits. It is also your responsibility to confirm that the doctor you are seeing is on your insurance provider list and to obtain referrals if necessary.

**We require all deductibles and co-payment to be made at the time of service.** We have no control over what your insurance company will or will not choose to pay. We will estimate your dental treatment to the best of our ability. However, all charges for treatment are ultimately the patient's responsibility.

### Appointments:

**There will be a charge of \$50 per hour of appointment time if you are not able to give the office a 24-hour notice of cancellation.**

I grant permission to the staff to telephone me at **home, work or on my cell** to discuss matters related to this form. I have read, understand and agree to the policies listed above. (minors must have signature of parent or guardian before being seen)

Signature \_\_\_\_\_ Date \_\_\_\_\_