

## PRIVACY NOTICE

Our office is committed to protecting your personal health care information in accordance with the law. Your information is important and confidential. Our ethics and policies require that your information be held in strict confidence. All staff members have been trained as required by law.

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Patient, Parent or Guardian Signature

Date

## YOUR APPOINTMENT

The appointments you schedule with our office are times which are reserved for you. We try faithfully to respect your valuable time by seating you promptly, unless we have been delayed with an emergency patient. If you are unable to keep your appointment, please let us know at least 24 hours in advance so that we may schedule another patient and reschedule your appointment. There is a charge of \$40 per hour for failed appointments or appointments that are not canceled 24 hours prior to your appointment.

We respectfully ask that you show up for your appointment on time or give our office advance notice if you are unable to keep your appointment.

## INSURANCE

As a courtesy to our patients we will gladly bill your insurance and wait for reimbursement. However the patient must pay their estimated portion at the time of service. The estimated portion is only an estimate.

It is the patient's responsibility to know what their benefits are and to provide us with the correct information. If you are unable to provide us with current insurance information you will need to pay for your visit at the time of service and have your insurance company reimburse you. If your coverage is based on a fee schedule you need to provide our office with the current fee schedule or pay for your visit at the time of service.

Many insurance companies have set fees on what they will pay for each procedure. **These fees are internal to your insurance company and they may or may not cover all charges incurred during your treatment. The fee schedules often do not reflect standard charges in our area.** What your insurance company pays depends on what type of contract your employer has with your insurance company. **If you are unhappy with what has been paid you need to speak to your HR representative regarding the type of policy your employer has chosen for you.**

## TO OUR PATIENTS WITHOUT DENTAL INSURANCE

If you do not have dental insurance, payment is due at time of service. For major dental treatment we work with Care Credit to provide low cost financing for our patients who qualify.

Initial here: \_\_\_\_\_ Date: \_\_\_\_\_