

ATTENTION PATIENTS WITH INSURANCE COVERAGE:

THIS OFFICE SUBMITS INSURANCE AS A COURTESY TO OUR PATIENTS. THIS PRACTICE DOES NOT ACCEPT RESPONSIBILITY FOR BENEFITS PAID OR NOT PAID BY YOUR INSURANCE COMPANY. ANY BALANCE REMAINING AFTER INSURANCE HAS BEEN PAID IS STRICTLY THE PATIENT'S RESPONSIBILITY.

OUR STAFF ESTIMATES YOUR PORTION DUE AT THE TIME OF SERVICE. THIS IS ONLY AN ESTIMATE AND WE DO NOT ASSUME RESPONSIBILITY FOR WHAT YOUR INSURANCE DOES NOT COVER. IF YOU WISH TO KNOW YOUR EXACT COST EACH VISIT, YOU MAY PAY IN FULL AT THE TIME OF SERVICE AND WAIT FOR YOUR INSURANCE COMPANY TO REIMBURSE YOU DIRECTLY. THIS IS THE ONLY FULL PROOF WAY TO ENSURE THAT YOUR ACCOUNT BALANCE REMAINS CURRENT AND ACCURATE WITH THIS OFFICE.

SOME SERVICES MAY BE DOWNGRADED TO A LOWER RATED SERVICE THAN THE SERVICE WE PROVIDE FOR INSURANCE COVERAGE PURPOSES AND YOUR PLAN MAY REQUIRE YOU TO PAY THE DIFFERENCE. SOME EXAMPLES ARE POSTERIOR COMPOSITE RESTORATIONS AND CROWNS.

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENT:

SIGNATURE

DATE