

Monish Bhola, DDS, MSD Shilpa Kolhatkar, DDS, MDS Leyvee Cabanilla Jacobs, DDS, MSD John F.Sivertson DDS, MS

## PAYMENT POLICY, FINANCIAL ARRANGEMENTS AND DENTAL INSURANCE

We are sincerely committed to providing you with the highest standard of care possible. If you have dental insurance, we will strive to help you receive your maximum allowable benefits. In order to achieve these goals, we need your assistance and your understanding of our payment requirements.

Payment/co-payment for services is due at the time services are rendered. For your convenience we accept cash, check, MasterCard, Visa, American Express, and Discover Card.

Balances older than 60 days are subject to a \$5 monthly billing charge. Returned checks are subject to a \$35.00 banking fee. There will be a charge of \$50.00 for any appointments that are not cancelled 24 hours in advance.

There are over 900 different insurance plans in our Metropolitan area. There are deductibles, copayments, yearly maximums, and other restrictions of which you must be award. Your employer's Benefits Representative should be able to provide you with the details of your specific dental insurance coverage. You are entitled to the maximum benefits offered under your insurance contract; however, you are ultimately responsible for all expenses incurred in the office. Treatment is determined by patient need rather than by insurance parameter. All options will be discussed with you. Insurance pre-determinations will be submitted upon your request.

If you have any questions regarding our payment policy or require further clarification, please do not hesitate to ask. We are always available to address your concerns.

Patient Signature	Date
Signature of Responsible Party for Payment	Date
Witness of Signature	Date