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A WORD REGARDING YOUR DENTAL INSURANCE

As a courtesy to you, our valued client, our office will be pleased to assist you in the filing and documentation of your claims. It is our policy to collect the estimated patient portion at your appointment and to file the claim on your behalf at that time. If we do not receive insurance reimbursement within 60 days we ask that you pay the account balance personally and seek insurance reimbursement directly.

Remember that the benefit agreement was made between your employer and the insurance company. If you are actively informed, you can be better assured that your benefit package is performing up to your expectations. We urge you to familiarize yourself with your insurance program and to be aware that your employer benefits coordinator is your claim arbitrator.

Please feel free to refer any questions you may have regarding your dental claims and our financial policy to your business office. Please sign below acknowledging that you have read and agree to our office policy regarding insurance claims.

Signature: _____

Date: _____