

POLICY ON ACCEPTING INSURANCE ASSIGNMENT

Our office is pleased to accept your insurance assignment. We offer this service as a courtesy to our patients. However, it must be clearly emphasized that, as a dental care provider, our relationship is with you, not your insurance company. While the filing of insurance claims is a courtesy that we extend to our patients, all charges are your responsibility from the date the services are rendered. Following is a statement of our policies governing insurance claims.

- Although our office does bill the insurance company, it is necessary for the patient to have all of the insurance information forms **filled out completely**. If this is not completed, we will not be able to appropriately bill the insurance company, and the responsibility for payment then becomes that of the patient. We are sorry, but there are no exceptions to this policy.
- We **require** our patients to sign an "Authorization to Pay The Doctor" form (or any other necessary assignment documents required by your insurance company). By doing so, the insurance company will make payment directly to our office.
- It is a policy of our office to have the patient **pay co-payment** (the amount not covered by the insurance company) **at the time services are rendered**.
- Insurance payments ordinarily are received within 30 to 60 days from the time of billing. If a patient's insurance company has not made payment to our office within 90 days, we may request the patient to pay the balance due, and then seek reimbursement from the insurance company.
- Our office does NOT guarantee that the patient's insurance company will pay. Not all services are covered by your insurance. Some insurance companies arbitrarily select certain services they will not cover. We will perform our routine insurance billing procedures upon verification of coverage. However, if for some reason the patient's insurance claim is denied, the patient is then considered to be responsible for the full amount of the bill.
- Our office will not enter into a "dispute" with an insurance company over any claim, although we will work with the insurance company to sort out any confusions or questions which might arise. We cooperate fully with the regulations and requests of the insurance companies. It will be, however, the responsibility of the patient to handle with the insurance company any type of dispute over payment by the company.
- It is **Your** insurance-we do not have access to your insurance company to keep track of balances or any changes in coverage. Your insurance is a contract between **you and the insurance company**. Any questions you may have as to extent of coverage, denial of benefits, or other coverage questions must be directed to your insurance company, not our office.
- **Dual Insurance Coverage:** Our staff will file claims to both your primary and secondary insurance companies however, this **does not** guarantee 100% payment by both insurance companies. If after payment has been received by both plans and there is a remaining balance on the account, it is the responsibility of the patient to pay the remaining amount within 10 days of receiving the explanation of benefits (EOB).

If you have read and understand all of the above practice policies, please sign your name below and we will accept your insurance assignment.

Signature of Patient (Guardian)

Date