

THIS IS YOUR COPY FOR YOUR RECORDS

PERIODONTAL AND IMPLANT SPECIALTIES, LTD. (OFFICE POLICY)

APPOINTMENT SCHEDULING: Most appointments are scheduled in a series. They are usually 1 to 2 weeks apart. Therefore if any appointment is cancelled or broken, the entire series may need to be rescheduled. If you need to change an appointment, we ask for you to please give us 48 hours' notice. A fee will be charge to your account for all broken appointments without notice.

EMERGENCY: If an emergency arises, please call our office immediately. We will our best to help in any way we can. If we are not in the office, our answering machine will list the phone numbers to contact the doctor.

PAYMENT PLANS/INSURANCE: We are happy to assist you in setting up a payment plan that best suits your needs. We ask that all patients sign a financial agreement before treatment begins. People that have dental insurance must realize that your employer and the type of coverage that they have decided for you determine your plan. We will submit your claims and also strongly advise a pre-determination of benefits for each patient. If you decide not to elect to wait for a pre-treatment analysis you will be asked to sign a "Waiver" agreement stating that you want to begin treatment prior to the approval of the insurance company. You must bring in all of your insurance cards and forms for your initial appointment. If the insurance company is not responding to our requests, you will be asked to call them directly. *Remember the contract is between you and the insurance carrier not our office.* We file insurance claims as a **courtesy** for our patients. You are fully responsible for all fees charged by this office regardless of your insurance company.

ALL PATIENTS: All patients will receive a monthly statement letting you know the status of your account. This will let you know if your insurance company has paid any benefits for you. If you have any questions about their payments, please call them first before contacting our office.

PAYMENT ON ACCOUNT: Your account is due paid in full within 30 days of completion of your treatment. If you need to make financial arrangements for a payment plan, please call our office.

RECORD RETENTION: While HIPAA rules require that our office retains a copy of your records for 6 years, it has been our practice to retain your records for up to 10 years from your last visit.

Please keep a copy of all correspondence sent to you by this office, so that you may have a complete record of your contact with this office.