

## **SAN CLEMENTE ENDODONTICS**

665 Camino de los Mares #204, San Clemente, CA 92673

### **\*OUR OFFICE POLICY REGARDING DENTAL INSURANCE\***

Your estimated co-payment is due the day treatment is initiated.

***PLEASE UNDERSTAND*** that we file dental insurance as a courtesy to our patients. We do not have a contract with your insurance company, only you do. We are not responsible for how your insurance company handles its claims or for the benefits they pay on a claim. We can only assist you in estimating your portion of the cost of treatment. We at no time guarantee what your insurance will or will not do with each claim. We also cannot be responsible for any errors in filing your insurance. This is done as a courtesy to you.

If we have received all of your insurance information on the day of the appointment, we will be happy to file your claim for you. We file insurance electronically so your insurance company will receive each claim within days of the treatment. By law, your insurance company is required to pay each claim within 30 days of receipt. *You are responsible for any balance on your account after 30 days, whether insurance has paid or not.* If you have not paid your balance within 30 days, a finance charge of 1.5% will be added to your account each month until paid. We will promptly send a refund to you if your insurance pays more than was expected.

Signed \_\_\_\_\_ Dated \_\_\_\_\_