



Your Health & Comfort is Our Happiness

OUR INSURANCE POLICY

Our client's dental and oral health, and comfort is our primary concern. If you have insurance coverage, we will be happy to help you maximize your benefits. However, it is our client's responsibility to inform us of their insurance coverage, and information pertaining to their plan.

We will gladly send estimates prior to treatment to answer any financial concerns you may have. Billing will be processed the day treatment is provided and a claim will be immediately sent to your insurance company. This will inform them of the treatment our office completed that day, to allow you financial reimbursement as quick as possible, usually within 1 week.

PATIENT AUTHORIZATION

The executive Council of the Canadian Dental Association requires that we obtain patients signatures authorizing our office to submit claims electronically. Original copies of patient's authorization must be kept on file for three years.

I understand that the fees submitted electronically may not be covered, or may exceed my plan benefits. I understand that I am financially responsible to my dentist for the entire treatment.

I authorize release to my insuring company plan administrator the information contained in claims submitted electronically.

Signature of Patient or Parent/ Guardian

Date

Print Name