

GRAND BLANC • CLARKSTON

**PERIODONTAL
SPECIALISTS**

World-class care and caring

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1. Full payment is due at the time of service, unless specific payment arrangements are made in advance.
2. We accept cash, check, Visa, Mastercard, or Discover or either of the available Dental Charge Accounts we offer for your convenience.
3. Payment arrangements must be made in advance.
4. If you want your treatment to be predetermined, please let us know. A predetermination from your insurance company may take 4 to 6 weeks and is not a guarantee of payment.
5. We request a minimum of 48 hours notice for appointment cancellations or changes. If you do not come to a confirmed appointment, we reserve the right to charge you \$100 per hour for the time lost.
6. We will be happy to bill your insurance for you. However, your dental insurance is a contract between your employer and your dental benefit company. We are not responsible for knowing your coverage limitations or yearly benefits. **It is your responsibility to keep track of your benefits used in other dental offices.**
7. We do not base your treatment needs on your insurance benefits or limitations. **If your insurance does not pay what we have anticipated or estimated, any difference is your responsibility and will be billed to you.**

I agree to accept financial responsibility for my treatment. In addition, I authorize my dental and/or medical insurance benefits to be paid to Periodontal Specialists. I also authorize Periodontal Specialists to release dental record copies and confidential medical and dental histories pertaining to my treatment when necessary to insurance companies and/or other health care providers.

Signature _____ Date _____