

DAVID P. ROBERTSON, DDS

OFFICE POLICY

DAVID P. ROBERTSON, DDS files insurance as a courtesy to our patients. You are responsible for insurance co-pays and deductibles at the time of service.

Your dental insurance is an agreement between you and your insurance company to pay a specified amount for dental care. The fees of this office are not based on the amount insurance will pay. The amount approved on a particular procedure by your insurance company may be more or less than the fees charged. Full payment for your treatment remains your exclusive financial responsibility, including charges not covered by your insurance company.

Payment is due forty-five (45) days after a claim has been submitted on your behalf. If you are unable to meet your obligation, please contact the business office.

This office cannot wait on payments pending any legal action involving the patient and third parties. (Auto accidents, workers comp., etc...)

Patients with no insurance are expected to make payment at the time of service unless other arrangements have been made with the business office.

APPOINTMENTS: We pride ourselves on seeing you as close to your appointment time as possible. This time is reserved exclusively for you. Appointments broken or cancelled without 24 hours notice are subject to a missed appointment fee.

AUTHORIZATION FOR "SIGNATURE ON FILE":

I, _____, hereby authorize the office of DAVID P. ROBERTSON, DDS to affix my name to any and all claims or documents as related to any and all health benefits due to me.

I hereby authorize payment of dental benefits otherwise payable to me, directly to the office of DAVID P. ROBERTSON, DDS.

This "Signature on File" will be valid from this date. A photocopy of this document may act as an original.

I also authorize DAVID P. ROBERTSON, DDS to release all necessary information to secure payment of benefits from my insurance carriers.

Signature of Insured

Witness

PRIVACY POLICY

I have received a copy of this office's Notice of Privacy Practices.

Signature of Insured