



## Patient Responsibility Policies

### APPOINTMENTS

If you would like to make an appointment, please call or email us. Emergencies are typically handled the same day, and new patients are always welcome.

### CANCELLATIONS

If you are unable to make an appointment, we ask that you kindly provide us with at least 24 hours notice. We ask for this advance notice so we can offer this appointment to another patient. A fee of **\$35.00** will be charged if you do not show up for the appointment or cancel without sufficient notice.

### FINANCIAL

We will be more than happy to submit your insurance claims on your behalf. Our office is very committed to helping you maximize your insurance benefits. **Because insurance policies vary, we can only estimate your coverage in good faith but cannot guarantee coverage due to the complexities of insurance contracts. Your estimated portion must be paid at the time of service.** If you have any questions, our staff will do everything possible to answer them for you. We will do everything we can to help you afford the treatment you need and want. For patients who require major work, a complete payment plan is designed with an appropriate payment schedule. We accept cash, check, Visa, Mastercard, American Express, Discover and Care Credit.

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Patient Name (print)

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Patient Signature

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Date