SAN FRANCISCO DENTAL OFFICE

POLICY REVIEW

BILLING:

You are fully responsible for cost incurred for all treatment provided. As a courtesy to you, your insurance will be billed for covered treatment. Payment is due in full for this treatment within sixty (60) days of the date of service, however, whether partial insurance benefits have been received.

CONFIRMATION:

All appointments must be confirmed in advance. If we are unable to reach you directly by phone, or we do not receive a return call after leaving a message for you at least 24 hours ahead of time, your appointment slot could be offered to another patient.

CANCELLATIONS:

We require that you give our office 48 hours' notice if you need to reschedule your appointment. This allows for other patients to be scheduled into that appointment. If you miss an appointment without contacting our office within the required time, this is considered a missed appointment. A fee of $150.00 will be charged to you; this fee cannot be billed to your insurance company and will be your direct responsibility.

We thank you for your patronage.

Signature **Date**