

SOUTHERN ROOTS

• PERIODONTICS & IMPLANT DENTISTRY •



Financial Responsibility

Patient Name _____

Southern Roots Periodontics is committed to helping our patients maximize their benefits. As you may be aware, medical and dental insurance are becoming increasingly complex. We are always available to answer your questions; however, your insurance policy is a contract between you and your insurance company.

As a medical provider, we are not party to that agreement. The patient portion (co-payment) of your bill must be paid at the time of service. We ask our patients to provide us with complete dental insurance information. As a service to our patients we will bill insurance companies for services and allow 45 days to render payment in full. After 60 days, you are responsible for the entire balance which is due in full upon request.

Insurance policies vary considerably; therefore we estimate your coverage in good faith but cannot guarantee coverage or payment amounts by your insurance company. Southern Roots Periodontics can only provide estimates and not exact amounts.

It is your responsibility to call your insurance company to check on coverage prior to the appointment, as well as getting an explanation of benefits (EOB) or claims status/payments after the appointment.

I understand that I am responsible for payment for whatever my insurance does not cover or pay in full.

Signature

Date