

# DAVID S. DENNIS, D.D.S.

## Payment Policy

The following is the payment policy for dental services provided at our office.

### 1. CASH / PAY AS YOU GO

Pay the total fee for each appointment including emergency visits, either by cash, MasterCard /Visa or by a pre-approved check.

### 2. INSURANCE

If you have dental insurance we will be glad to bill the insurance for you but you will be required to pay your ESTIMATED co-payment on a “pay as you go” basis.

Please remember that the ENTIRE FEE is your responsibility. We can only ESTIMATE what an Insurance Company will cover or what amount they will reimburse. Your insurance policy is a contract between you and your Insurance Company. As a health care provider, we are not party to that agreement. Insurance policies vary by the hundreds and any service provided may be covered at various rates or may not be covered at all.

We are always available to answer any questions to the best of our ability and to help you maximize your benefits.

I understand and agree to this financial policy.

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Signature of Patient / Responsible Party

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Date