

Policy for the Office of Dr. David Leonoff

Thank you for choosing us for optimal oral health care. We have found that our patients appreciate knowing exactly what to expect from us both from a philosophy aspect and a financial aspect. Therefore, we prefer to inform our patients of our policies before we begin any treatment.

Payment for services are due when those services are rendered unless other PRIOR arrangements have been made.

Insurance co-payments are due at the time services are rendered unless PRIOR arrangements have been made.

Statements sent for unpaid balances are subject to a \$5 fee per statement.

If an account goes to a collection agency for lack of payment, there is a 30% charge applied to the unpaid balance. This fee is to cover the expense of the collection agency's fees.

Treatment Fee Estimates:

Dental treatment fees given are based on the treatment anticipated at the initial comprehensive examination. Some teeth may have hidden decay or fractures, affected nerves or other unanticipated conditions requiring more extensive dental treatment. In situations where additional charges are involved, we will explain the reason for additional treatment needed and any additional fees.

Broken and Missed Appointments:

Please remember that your appointments are reserved specifically for you. We are committed to seeing you on-time and request that you arrive on-time for your visits as well. ***We request that at least 48 hour notice be given if an appointment needs to be rescheduled.*** Missed appointments (no shows) and short notice cancellations (less than 48 hours) are subject to a charge commensurate with the time reserved for treatment (\$50.00 per half hour).

PLEASE FEEL FREE TO CONTACT US IF YOU HAVE ANY QUESTIONS OR CONCERNS REGARDING DENTAL TREATMENT OR FINANCIAL ARRANGEMENTS.

I understand and agree to the following Financial Policies as listed above:

Signature of patient/responsible party

Date