



## **OFFICE POLICY**

### ***INSURANCE INFORMATION***

Many people have dental insurances that reimburse for some expenses. We participate with a number of the major PPO plans and will file dental procedure claims as a **courtesy** to our patients. We are not responsible for how your insurance handles the claims or for what benefits they pay on a claim. We can only assist you in estimating your portion of the cost of treatment. **We at no time guarantee any insurance payment. Any unpaid balance is the responsibility of the account holder.** Please remember that your insurance policy is **a contract between you, your employer and your insurance plan.** You must be familiar with your insurance plan and benefits, as we will collect from you the amount **estimated** to be not covered by your insurance. We make every effort to accurately **estimate** what portion of treatment is not covered by your plan. All **deductibles, non-covered, or partially covered** benefits are due at time of service.

### ***PAYMENT POLICY***

Every effort is being taken to keep down the cost of dental care provided to your children. Reducing billing costs will help us in our attempt to minimize necessary fee increases. For this reason, **payment is expected at the time of service, unless other arrangements have been made in advance.** For your convenience, we accept cash, check, money orders, credit/debit cards, and Care Credit.

### ***CANCELATION POLICY***

We value your time therefore office hours are by appointment only. This office is a private practice and not a dental "clinic." Appointment time is reserved for your child(ren). We prefer to schedule appointments in advance to complete as much treatment as possible. We feel this causes the least disruption to your daily schedule and, in addition, provides efficiency in completing your children's dental care. When you make an appointment, please keep in mind we require **2 business days' advance notice** for any changes, including canceling or rescheduling of your appointment. This allows the time we initially reserved for your child to be filled by another patient who may be waiting for an appointment time. We reserve time in our schedule for your child and do our best to accommodate your busy schedule and therefore ask that you give us the same consideration when needing to change or cancel an appointment. **If you cancel or reschedule an appointment without proper notice, you may be charged a fee of \$75.00.** We do, however, understand that illnesses and emergencies occur and we accommodate for those rare instances.



### ***APPOINTMENT TIME POLICY***

We invite you to stay with your child during the initial examination. During future appointments, we suggest that you allow your child to accompany the staff through the dental experience. The reason for this is we can usually establish a closer rapport with your child when parents are not present in the treatment room. Our purpose is to gain your child's confidence and overcome apprehension. However, if you choose, you are always more than welcome to accompany your child to the treatment room. **For the safety and privacy of all patients, other children who are not being treated should remain in the reception area with a supervising adult.** Our staff cannot be responsible for their care while you are away as they need to focus their attention on maintaining their duties.

We respectfully ask that any snacks be consumed prior to entering our office. We understand that due to your busy schedule, sometimes patients need to eat before or after the appointment. We have a nice wooden bench area right outside the office door to enjoy your snacks.

Thank you for your cooperation and understanding in these matters. These policies exist to maintain our service expectations and to respect all of our patients and staff time. We appreciate your help in continuing to provide you with the best possible care.

Thank you,  
Sonoma Pediatric Dentistry