New Era Family & Cosmetic Dentistry Kiran Arora, D.D.S., P.A.

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Patient Financial Agreement

We believe our patients deserve the best possible dental care we can provide. In an effort to maintain this high quality of care, we would like to share this information with you regarding your dental insurance.

Your dental insurance is a tremendous benefit that your employer provides for you. Many times, understanding your benefits is confusing at best! We will do our best to assist you in this manner, but please keep in mind we are a third party; we have limited access to information regarding your dental benefits. IT IS IMPOSSIBLE FOR US TO GUARANTEE ANY PAYMENT FROM YOUR INSURANCE COMPANY. Many plans have specific restrictions that you, the patient, need to be aware of and should consult your dental insurance handbook for details.

Regardless of what we calculate as your dental plan benefit in dollars, we must stress the fact that you, the patient, are responsible for the TOTAL cost of your dental treatment. We are happy to extend to you the courtesy of filing your insurance claim to your primary insurance company one time for direct reimbursement. We do not resubmit claims. Every dental claim will be submitted with the necessary x-rays and narratives.

Please keep in mind that your insurance company will never guarantee your benefits or tell us exactly what they will pay directly to us. This is why we can only ESTIMATE your portion. We ask that you pay your estimated portion and deductibles at the time of service. If your insurance company has not paid your claim in 45 days, the balance will be billed to you and we ask that you deal directly with your insurance company for re-imbursements.

I nank you for	your understanding and cooperation	l .
Patient name:		
Signature:		Date: