



SmileStudio

Edward Harroz III DDS

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PRACTICE POLICY

Smile Studio's goal is to provide quality dental care in a timely manner. In order to do so we have had to implement a cancellation and no show policy. The policy enables us to better utilize available appointments for our patients in need of dental care.

CANCELLATION OF AN APPOINTMENT

In order to be respectful of other patients' needs, please call our office promptly if you are unable to attend an appointment. We ask that you call 36 hours in advance to reschedule/cancel. A no show/no call may result in a cancellation fee.

(initial)

FINANCIAL POLICY

Smile Studio takes pride in providing the best customer service to our patients. Our office will file your insurance for you as a courtesy. It is important to understand your insurance is a third party entity. It is your responsibility as a patient and an insured to know the coverage on your policy. Although every effort is made to ensure we provide you with the most accurate information, estimates given are never a guarantee of payment by your insurance company. THERE MAY BE AN ADDITIONAL BILL AFTER YOUR INSURANCE FINALIZES YOUR CLAIM. All co-pays and account balances are due at the time of service unless a formal payment arrangement is discussed with the front office staff PRIOR to the treatment.

(initial)

I HAVE READ AND UNDERSTAND THE PRACTICE POLICY AND MY FINANCIAL RESPONSIBILITY. I ALSO ASSIGN ALL INSURANCE BENEFITS TO DENTISTRY BY DESIGN.

Patient or Guardian First Name *

Patient or Guardian Last Name *

Patient or Guardian Signature *

Date

01/26/2023