Soft Touch Dental 4644 Lincoln Blvd #428 (310)823-2343

STATE OF RESPONSIBILITY FOR THE PRACTICE OF

AZITA RAYET, D.D.S.

PAYMENTS FOR SERVICES:

All dental fees or patient portion (if insurance is involved) are due and payable at the time services are rendered. We do accept cash, personal checks, debit and credit cards. We do not carry any in house accounts. Please ask our financial coordinator if you have any questions.

INSURANCE FILING:

We will do everything we can to help you obtain reimbursement from your insurance carrier, however, the basic responsibility is yours. As a courtesy to you, we will send claims to your insurance company. However, we cannot accept the responsibility for negotiating claims with insurance companies or other parties.

INSURANCE REDUCTION OR REJECTION

Your insurance policy is a contract between you and your insurance company. It is important that you understand its provisions. We cannot guarantee payment of your claims. Reduction or rejection of your claim by your insurance company does not relieve the financial obligation you have incurred.

RESCHEDULING APPOINTMENTS:

Please notify us within 48 hours if it is necessary for you to make a change in your scheduled appointment. This allows us time to contact other patients who are awaiting care. IF OUR OFFICE DOES NOT RECEIVE A 48 HOUR NOTICE, YOUR ACCOUNT WILL BE ASSESSED A \$75 PER HOUR FEE.

If you have any questions regarding our office policies, please feel free to ask our financial coordinator.

I have read and understand the above statements.

Patient/Parent Signature	Date	