

## Please Read Carefully and Sign

# Our Billing Policy

- Using the latest computer technology, your dental claims are processed online. Everything is done electronically. No paper claim forms to be filled out.
- Depending on your dental insurance, most dental plan covers 80% of basic services such as examinations, xrays, cleanings, and fillings. It is your responsibility to pay us the remaining 20% or any outstanding amount not paid by your insurance.
- We accept Visa, MasterCard, American Express, Cheque or Cash
- Your insurance policy is a contract between you, your employer, and the insurance company, NOT the dental office. We are not legally allowed to request pertinent information regarding your policy without your verbal/written consent. As part of our customer service, we will do our best to help you understand your dental policy.

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## No Show or Late Cancellation Policy (**\$50.00 penalty**)

- Your appointment is reserved exclusively for you and your family. It is unfair not to show up on your appointment as it negatively affects our ability to provide efficient dental care to other patients. If you don't show up, we lose the opportunity to serve you and other patients who wanted to book that same time schedule, especially our weekend appointments (Saturday).
- We appreciate a **24 hour notice** if you are unable to keep your appointment to avoid paying a \$50 charge. Please note that this is not covered expense in any dental/medical insurance. This is your out-of-pocket expense.
- We value your time. Please respect your appointment with us as we respect yours.

### PATIENT'S ACKNOWLEDGMENT

*I have read and understand the above, and agree to assume full liability for fees not covered by my insurance plan.*

\_\_\_\_\_  
Patient's/Parent/Guardian's Signature

\_\_\_\_\_  
Date

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