

DR ROSS H DIXON
5627 Oberlin Drive Ste 112
San Diego Ca 92121
(858)452-4298

1. I understand regardless of my insurance coverage, I am financially responsible for all dental services received. Insurance are billed and any balance remaining is the patient's responsibility.
2. Co-payments are required on the day of your appointment
3. Pre-treatment Authorizations are estimated only-dependng on the amount used towards your maximum or if you see a specialist .
4. Dr Ross is Out of Network with all dental insurance except Delta Dental Premier, Some Cigna PPO and Aetna Extended Dental Network only. NO HMO are accepted.
5. Dual coverage info-co-payments are required at the time of service -Primary will be billed first and 2nd will be billed after primary has paid. Patient will be reimbursed after 2nd if there is credit on the acct
6. There is a 24 hour cancellation requirement. You will be charged a \$50 missed appointment for cleaning and a \$75 will be assessed for missing a scheduled procedure with Dr Ross.

Patient Signature:_____

Date:_____