

**THE SLEEP APNEA & DENTAL TREATMENT
CENTER OF SCOTTSDALE
DR. T. R. "RICK LAWSON, DDS**

FINANCIAL POLICY

The Sleep Apnea and Dental Treatment Center of Scottsdale would like to thank you for choosing our office for your Sleep Apnea and Dental treatment.

We will be happy to assist you in obtaining the maximum insurance benefits to which you are entitled: however, the agreement of your insurance company to pay for your care is a contract between your insurance carrier and you.

As a courtesy to our patients, we will happy to file your insurance claim(s). We can only provide you with an ESTIMATE of your insurance plan benefits. Guarantee of Coverage/Benefits and Payments can only be determined when the claim is processed by your insurance company. If any changes are made by your insurance company, the patient is responsible for any difference.

If your insurance company has not paid the claim in 60 days, the PATIENT is FINANCIALLY RESPONSIBLE for all services provided by The Sleep Apnea Dental Treatment Center of Scottsdale/ Thomas R. Lawson, DDS. Any outstanding balance after 60 day's, will accrue interest at the rate of 1.5% per month. In this case, the PATIENT would need to contact their insurance carrier for resolution/reimbursement.

WE ACCEPT THE FOLLOWING
FORMS OF PAYMENT



I have read and understand and agree to the financial policies as stated above.

Signature _____ Date _____.