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Office and Financial Policy

At Dentistry at Lake Nona, we believe that you deserve the best care. That's why we always present you with the best dental solution possible to treat your personal situation. Each year we provide outstanding dental care to hundreds of patients. Here are some important things you should know whether you have dental insurance benefits or not:

Please Initial (If not applicable due to lack of insurance, please write N/A)

____ Your dental benefits are based upon a contract made between your employer (or yourself) and an insurance company. **Dental benefit plans will never pay for completion of your dental care. It is only meant to assist you.**

____ We currently accept all private care insurance plans (plans that do NOT require you to select a dentist from a list). We are also a participating provider for Blue Cross/Blue Shield, Delta Dental, MetLife, and United Healthcare. Although we can maintain computerized histories of payment by a given company, they do change; therefore it is impossible to give you a guaranteed quote at the time of service. We **estimate** your portion based on the most up to date information we have but it is **ONLY AN ESTIMATE**. Ultimately **you** are responsible for knowing and understanding your dental benefits under your policy. If you would like to know a specific insurance benefit, we will be happy to file a "Pre-Treatment Authorization" with your insurance company prior to treatment. Keep in mind this is Not a guarantee of coverage. **Please note:** This process does delay treatment but it will give you a more accurate estimate as insurance companies give **no guarantee of payment** until a claim is received, processed and paid.

____ We will bill your insurance *as a courtesy*. If insurance does not pay within 90 days, Dentistry at Lake Nona reserves the right to request payment for services in full from you and let you collect the insurance funds that are due to you. This is rare but it is important that you recognize that the insurance you have is a legal contract between YOU and your insurance company. Our office is not, and cannot, be a part of that legal contract. **Ultimately you are responsible for all charges incurred at our office.**

____ Dentistry at Lake Nona does require payment in full for your estimated portion at the time of service. We accept MasterCard, Visa, Discover, cash and checks. If you are in need of an extended finance option, we also work with CareCredit (who offers 6 or 12 month "same as cash" terms) and Springstone Patient Financing, both with an interest bearing revolving charge designed to meet your treatment needs on approved credit.

____ A specific amount of time is reserved especially for you and we **strongly encourage** all patients to keep their appointments. If you must change your appointment, we require **at least 24-hours notice, otherwise a \$30 missed appointment fee will be charged. WE HAVE THE RIGHT TO CANCEL YOUR APPOINTMENT IF WE CANNOT REACH YOU TO CONFIRM.**

I agree with the above conditions _____ Date _____