

FINANCIAL INFORMATION AND ARRANGEMENTS

- All dental work completed will be billed to your dental insurance. All fees incurred from the surgery center (for the operating room time and the anesthesia) will be billed to your medical insurance.
- Any additional bills due for the operating room time and anesthesia will be owed to the surgery center. Unfortunately, we cannot assist you with these bills.
- For your convenience, we will submit a preauthorization for your child's dental work. Please note that this will only cover the work we treatment plan on the day of your initial appointment at our office. Any additional work will not be on the preauthorization.
- Payment for the amount indicated in the preauthorization or treatment plan is due one week before the surgery.
- Payment for any additional work completed is due within one month of the surgery.

Patients without Dental Insurance:

- I authorize Kids First Pediatric Dentistry to charge my credit card (listed below) for the amount on the treatment plan one week before my child's procedure.

Signature

- I authorize Kids First Pediatric Dentistry to charge my credit card (listed below) for the remaining balance on my account after the procedure has been completed.

Signature

Name on Card _____

Street Address _____

City, Zip Code _____

Credit Card number _____

Card type & Exp. date _____

- For your convenience, we offer 6, 12 and 48 month interest-free financing through CITI financial. Please call our office for more information about these financing plans.