

**Perry V. Silva, DDS, MD**  
880 Cass Street  
Monterey, California 93940

Patient Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Person Responsible for Charges/Fees/Payments Due (if different from patient):  
\_\_\_\_\_

**Our office is a fee-for-service practice and therefore you are responsible for your bill in full.**

Dr. Silva is not a provider for medical insurance PPOs, HMOs, DMOs, medicare or Medi-Cal-. We are providers for only a select group of dental insurances.

As a courtesy to our patients, we will contact your insurance company for a verbal pre-authorization or, if requested, send a written/electronic pre-authorization to your insurance carrier. In either case, we encourage you to contact your insurance carrier to discuss your benefits and eligibility. At the time of the procedure, you will be asked to pay an estimated partial payment, and we will bill your insurance carrier for services rendered. Any remaining balance is due from you after the insurance payment is received (please see truth in lending statement below).

Insurance coverage is a contract between you (the insured) and your insurance company. We are not a party to this contract. **If your insurance company does not pay the estimate balance due to eligibility, benefits, fee adjustments, or other reasons, you are responsible for the balance.** If there is any question concerning insurance coverage for the services performed or the amount paid by the insurance company, it is the insured's responsibility to contact the insurance company.

**I understand the above information, and I agree that I am totally responsible for payment for all services rendered to me or my child regardless of any estimate of insurance coverage given to me by this office.**

\_\_\_\_\_  
Signature of Patient/Person Financially Responsible

\_\_\_\_\_  
Date

In compliance with the Federal Truth and Lending Act, the following disclosures are made to our patients: If you pay the entire balance due within three months after treatment is completed, no finance charge will be charged. You will be charged a finance charge of 0.83% per month (an annual rate of 9.96%) on any balance that is over three months overdue.