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## LANGDON DENTAL OFFICE POLICY

### CANCELLATION NOTICE

We have reserved this time exclusively for you, so we ask that you make every effort to keep your scheduled appointment time.

If you cannot attend your visit, we ask that you provide 2 business days notification.

A Charge of \$50.00 may be applied to your account if sufficient notice is not provided.

### DIRECT BILLING POLICY

Our office is happy to provide the courtesy of direct billing to insurance companies when current and complete insurance information is provided.

Please be advised that insurance companies are more and more declining to release plan details to the dental office as this is a contract between you and the insurance, not the Dentist.

Please make yourself fully aware of your coverage and any changes before coming to the office.  
(Maximums, restrictions and limits for hygiene appointments).

OUR OFFICE IS NOT RESPONSIBLE FOR KEEPING TRACK OF THIS INFORMATION.

### FINANCIAL POLICY

We require a credit card on file to accept assignment.

We ask you pay your portion at the time of the appointments.

All balance on your account is the responsibility of the account holder and not the insurance company.

Please note any balances not cleared by your insurance company within 45 days will be your responsibility.