



Copper Canyon Family Dentistry

Dr. Seth J. Stockton, DMD and Dr. Erin E. Stockton, DMD
6208 Montgomery Blvd. NE Ste C, D
Albuquerque, NM 87109
(505) 380-9081

DENTAL INSURANCE COVERAGE

For our patients who have dental insurance, we will be happy to submit your claims for services rendered. ***Your co-payment is due at the time of service.*** As we work with hundreds of insurance companies, we cannot have full knowledge of each carrier's particular benefits, or each patient's terms of coverage. We do our best to contact your insurance company to get an estimation of your benefits, but the information we receive from insurance companies is never a guarantee on their part to pay for any services. It is merely an estimation.

Although we are contracted providers for some insurance companies, there are many with whom we are not contracted. We will still submit your insurance claims for you; however, it is your responsibility to follow up with your insurance company should any payment issues arise.

If you are covered under a group policy provided by an employer, the personnel department can provide you with a comprehensive explanation of your benefits and coverage. Almost all insurance companies have a toll free number or a web site that can be accessed for any questions regarding your coverage. Whether it is dental, medical, automobile, or life insurance, it is the policy holder's responsibility to know the limits and terms of their coverage; ***ultimately, the policyholder is responsible for all fees incurred.***

If you do not have any insurance coverage, payment in full is due at the time of service(s).

Our policy has always been to help our patients utilize their insurance coverage. Under no circumstances will Copper Canyon Family Dentistry allow insurance companies to compromise or dictate the level of quality dental care provided to our patients or the fees required to support that level of care.

We value each and every patient who comes to Copper Canyon Family Dentistry for dental care. It is important to us that you take an active role in your dental care as well as the financial responsibilities associated with that care. If you have any questions before or after seeing any of our team, please do not hesitate to speak with a member of our office staff.



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PATIENT INFORMED CONSENT

1. ***SELF-PAY PATIENTS** – Full payment is required at the time services are rendered.

CURRENT INSURANCE CARDS MUST BE PRESENTED AT THE TIME OF SERVICE
2. You, as the patient, are responsible for finding out from your insurance company whether certain procedures must be pre-authorized, or what costs are not covered by your insurance company. If these procedures require pre-authorization and they are not, *you, personal representative will be responsible for the entire payment.*
3. We release copies of patient records only if the patient, or parent/guardian of minor, or personal representative has signed a release of records form. It is also important to note that a fee will be assessed if the patient requests their records.
4. In order to provide the best possible service and availability to all of our patients, please be on time for each of your appointments. Showing up late will cause our staff to run behind for the next scheduled patient. Should you need to cancel your appointment, we require **24 HOURS ADVANCE NOTIFICATION TO AVOID A \$50.00 MISSED APPOINTMENT FEE.**
5. In rare cases when there is excessive abuse of missed appointments, we may discharge patients from our practice.

SIGNATURE (Patient or Parent/Guardian of Minor): _____ Date: _____