LAKEWOOD ORAL & MAXILLO FACIAL SURGERY
4448 E. Village Road
Long Beach, CA 90808
(562) 421-9369
www.myoralfacialsurgeon.com

You have been referred to Dr. Kim for an oral surgical procedure. When you arrive at the office, you will be asked to fill out a thorough Medical History Questionnaire. Among the questions you will be asked are the exact names of the medications you have been taking (including injections from your physician's office,) how many times and for what reason you have been hospitalized, and what drugs you may be allergic to.

Patients will be examined at their initial appointment. If x-rays are necessary and you have had x-rays of the involved areas in the last year, make arrangements to have these x-rays sent to the office before your appointment or bring the x-rays with you to your appointment. If the x-rays are not with you at the time of your appointment, you may be charged a fee for a new one or we may have to reschedule your appointment to a later date.

Prior to your surgery, we will review the type of anesthetic available, as well as the way you are likely to feel during the operation and afterward.

Our Financial Policy

Thank you for choosing us as your healthcare provider. We are committed to your treatment being successful. We have avoided raising fees by reducing our bookkeeping costs and having a bank provide the needed credit to our patients. The following is a statement of our Financial Policy, which we require that you read, agree to and sign prior to any treatment.

1. All patients must complete our "Patient Information" forms before seeing the doctor.
2. Full payment or co-insurance payments are due at the time of service.
3. We accept cash, debit card, and Visa/Mastercard/Discover
4. We accept CareCredit® a medical/dental credit card. You may apply by phone (800) 365-8295 or on our website **www.myoralfacialsurgeon.com** under the Patient Center tab. The offers for deferred interest and long term, low interest payments must be credit approved through CareCredit®

Regarding Insurance

We understand the value of insurance benefits and will assist you in obtaining your maximum benefit by gladly processing your insurance claim for you. We require a minimum 20% payment at the time of treatment and may be paid by any of the options listed above. Our estimates are subject to final approval by your insurance company and could therefore change the amount due our office. Please be aware some and perhaps all of the services provided may be "non-covered" services and not considered reasonable and necessary under the Medicare Program and/or other medical insurance. Regardless of the insurance company's determination of usual and customary rates or amount of assignment you are required to pay the full amount charged. If you anticipate that your insurance may cover part of you fee, please bring a claim form with you on your first visit.

Thank you for understanding our Financial Policy. Please let us know if you have any questions or concerns.

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