



Katy Kids Dentist

Pediatric Dentistry

KKDSP PATIENT REGISTRATION FORM

LAST NAME: _____ FIRST NAME: _____ MI: _____
 ADDRESS: _____ CITY, STATE, ZIP: _____
 PHONE: (____) _____ - _____ SECONDARY PHONE: (____) _____ - _____
 DOB: ____/____/____ EMPLOYER: _____

BILLING

PERSON RESPONSIBLE FOR BILL

RELATIONSHIP TO PATIENT: (CHECK ONE): () PARENT () GRAND PARENT

NAME: _____ DOB: ____/____/____

SOCIAL SECURITY #: _____ - _____ - _____ ADDRESS: _____

PHONE: (____) _____ - _____

LIST ANY DEPENDANTS:

NAME	DOB	RELATIONSHIP

TOTAL DUE \$ _____

METHOD OF PAYMENT (CHECK ONE): () CASH () CHECK () CREDIT CARD

PLEASE READ DISCLAIMER AND SIGN BELOW:

Using KKDSP, in our office, offers significant savings to our patients on dental services rendered, specifically but not limited to:

- The fee paid for our KKD savings plan is for standard twice year preventive care services and represents a courtesy accounting adjustment for payment, made in full, at the time of services.
- Fees for dental services/treatment are due, in full, at time of services in order to receive KKD savings; and
- Katy Kids Dentist Savings Plan fees are not transferrable.
- There are no refunds on your KKD Savings Plan Fee **ONCE** any service has been rendered.
- **Care Credit cannot be used in conjunction with KKD Savings Plan.**

Please be sure to retain a copy of your EOB and Exclusions pages for your personal records.

If I, _____ acknowledge that I am financially responsible for payment, in full, at time of services in order to take advantage of the savings being offered on my child's KKD Savings Plan. If I choose not to pay at the time of service, I understand that I shall be charged and pay the usual and customary fees for the services delivered. Furthermore, I understand the benefits, limitations, exclusions, and requirements of my KKDSP program and have been given a copy of my EOB and Exclusion pages for my personal records.

SIGNATURE: _____ DATE: _____ WITNESS: _____



Katy Kids Dentist

Pediatric Dentistry

KKDSP Explanation of Benefits

INCLUDED BENEFITS

We are proud to announce that we offer KKDSP in our dental office. KKDSP is an annual dental savings program we offer for families and individuals that allows all KKDSP patients to receive quality dental services at greatly reduced prices in our office. Unlike conventional insurance plans, with our KKD Saving Plan there are **no deductibles, no yearly maximums, and no waiting periods to begin treatment**. KKDSP benefits and savings begin immediately upon registration.

Our QDP Savings include:

- INCLUDED teeth cleanings benefits (two per year)
- INCLUDED complete annual dental exam (up to two per year)
- INCLUDED one set of decay detecting x-rays needed to complete annual exam
- INCLUDED Fluoride Treatment in conjunction with hygiene appointment (two per year)
- A 20% savings on general and major dental procedures when paid in full.

The fee paid for our KKD savings plan is for standard twice year preventive care services and represents a courtesy accounting adjustment for payment, made in full, at the time of services. An initial fee is \$349.00 for each family member. Eligible family members are dependent children under the age of 19. Fees are due and payable for treatment when services are rendered and are non-refundable when services have been provided. Savings duration is for one year from registration date. **All patient portions for services received are due at the time of services in order to receive KKD savings.** All members of a KKDSP family account will have the same anniversary date as the primary member. **If you choose to use a repayment/financial plan, your KKDSP Savings will be adjusted around the third-party fee and interest free payment options will be customized for your repayment needs.** A missed appointment fee of \$75.00 will be charged for all missed dental appointments. Please notify our office at least 24 hours in advance if you must change your reserved appointment. Fees charged are not membership fees and all fees paid are for provided services only.

Helping Keep Private Practice Private · Helping Keep Dental Costs Low

©Z:\docsonserver\SOP\QDP\qdp\QDP- patient EOB- MASTERV5 For Dr. Hollenberg (1).doc

LIMITATIONS & EXCLUSIONS



Katy Kids Dentist

Pediatric Dentistry

KKD SAVINGS PLAN LIMITATIONS & EXCLUSIONS

- The dentist will not provide any medications not regularly stocked by our office.
- Any procedure that is considered to be experimental.
- Hospitalization for any procedures.
- Services unable to be completed due to the patient's medical health, mental health, ability to cooperate or other unhealthy status.
- Conditions or services under Worker's Compensation or Employer's Liability laws.
- Any diagnosis or treatment of myofascial pain dysfunction syndrome.
- Any alterations, restorations, or treatments of the temporomandibular joint.
- Any services provided for free by a county, government, municipality, or other agency.
- Any appliances, diagnosis or treatments conducted by a referral made to another dentist or specialist outside of the providers of our office in order to complete treatments in connection with any dental procedure in this office.
- Patients cannot use their own dental insurance benefits or other dental coverage in conjunction with any part of KKDSP.
- The fee paid for our KKD SAVING PLAN program is for included services and represents a courtesy accounting adjustment for payment, made in full, at the time of services.
- The Fee for our KKDSP program is not a membership fee.
- Payment plans can be made upon request and depend on the total amount due and type of dental procedure and by approved credit. Any patient using a financial payment plan will have their KKDSP savings adjusted around the fee charged by the third party. Interest free payment options will be offered in lieu of KKDSP savings when a third-party company is requested to pay for treatment.
- All Fees are due and payable when services are rendered and are non-refundable once services have been provided.
- There are no refunds on your KKD Savings Plan Fee **ONCE** any service has been rendered.
- Any unused services within your KKDSP Dental Savings Program are nontransferable to other patients regardless of the service and do not roll over from year to year.
- Any missed appointments or cancellations not made within 24 hours of the appointment may be charged a \$75 fee.
- Family members within the same 'family' account shall have the same anniversary date regardless of agreement date.
- IV sedation fees charged by visiting Anesthesiologist.

Please be sure to retain a copy of your Explanation of Benefits and Exclusions pages for your personal records.

Helping Keep Private Practice Private · Helping Keep Dental Costs Low