

Smile Makers Dental Group
779 Harrisburg Pike
Columbus, Ohio 43223
614-276-6226

OFFICE AGREEMENT FOR OHIO MEDICAID, CARE SOURCE, AND MOLINA

1. In order to be seen on the day of your appointment you must present a current *Medicaid, Care Source.* or *Molina* card and picture I.D. **NO** exceptions or substitutions will be made or accepted. Medicaid patients **MUST** have their (\$3)three dollar co-pay.
2. Only **ONE** guest is allowed to accompany each patient in the waiting room due to minimal space. Also, parents of children/minors **WILL NOT BE PERMITTED TO BE IN THE TREATMENT ROOM WITH THE PATIENT.**
3. It is understood that you are scheduled during **CLINICAL** times. The wait to see the Doctor is dependent upon your time of arrival and treatment necessary. If your **WAIT** is exceedingly long, you may reschedule with the understanding that at your next appointment your wait will depend on the existing circumstances.
4. If you **MISS** more than **two** scheduled appointment times you will be **DISMISSED** from our practice and your records will be transferred to the Dentist of your choice.
5. *NO food, drink or cell phone* use is permitted in the office.
6. You ***must be present in the waiting room*** when your name is called for your appointment or we will reschedule your appointment. (i.e. Do not leave the waiting room).
7. **UNDER NO CIRCUMSTANCES: DO NOT LEAVE YOUR CHILD UNATTENDED IN THIS OFFICE FOR MORE THAN 10 MINUTES OR WE WILL BE FORCED TO CALL CHILDERNS SERVICES. THIS IS FOR THE SAFTEY OF YOUR CHILD.**
8. Should you hold *additional insurance* and not release that information to us, your claim the Medicaid/Care Source/Molina, **WILL** be **DENIED**. Upon receipt of this denial the balance of services will be **YOUR RESPONSIBILITY** as you withheld pertinent information regarding the processing of your claims.

By signing below you agree to adhere to all terms and conditions listed above. Your signature on this page is implied consent for all dental treatment.

NAME: _____ DATE: _____