

# Dr. Jason P. White

B.Ch.D (Pret), M.Dent (MFO Surg) Dent, DipOdont (Oral Surg) Pret Pr. No.: 062 000 0344273

Thank you for choosing our services for your healthcare needs. At our practice we realize that your healthcare experience is not limited to just a visit here, but includes the billing process as well. We are committed to providing you with the best care possible and keeping you informed about the charges for services and your obligations.

### Our practice can help you with:

- Understanding your account.
- Explaining what you can expect during the billing process.
- Helping you make a plan for payment of your healthcare expenses.
- Applying for financial assistance, if needed.
- We will provide you with all the necessary documentation and motivation letters to assist you with procedure authorizations

#### Please remember!

Your medical aid cover is a contract between **you and your chosen medical scheme** and **NOT between the doctor and the medical scheme**.

The Department of Health issues the **NATIONAL HEALTH REFERENCE PRICE LIST** (**NHRPL**) which medical schemes use as a baseline for determining their benefits or options. Individual schemes may set benefits that may be higher or lower than the NHRPL or restrictions on benefits. All medical schemes have different conditions, limits and benefits levels.

We are a private practice and we are **NOT OBLIGED TO CHARGE NHRPL RATES**.

We also do not accept any responsibility for your medical scheme coverage.



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### How can your chosen medical scheme help you with payment:

- Patients are encouraged to submit cost estimates to their schemes before proceeding with treatment so that they may budget accordingly.
- It is important that you understand and consent to both the treatment plan and the estimated cost of treatment before any treatment can commence.
- It is **your right to accept or decline our recommended treatment plan**. If you reject or delay the recommended treatment, you do so at your own risk.
- You are requested to sign acceptance of our treatment plan and the cost estimate.
  If clinical conditions require any change in treatment, full details and costs will be provided before proceeding with modified treatment
- You will be asked to pay the **first consultation fee on the day of your appointment.**You will receive a statement to submit to your medical aid for reimbursement.

Please remember! The **FULL** payment of your **ENTIRE** account remains your responsibility. You will be furnished with an account for services rendered and **you** will be able to claim back from your medical scheme.

We realize that temporary financial problems may affect the payment of your account. If such problems do arise, we encourage you to contact us promptly for assistance in helping manage your account.

For your convenience we accept Cash, Credit and Debit cards (Visa Card and Master Card), Bank guaranteed cheques and Electronic Fund Transfers (EFT).