

**SHANE R. CLAIBORNE DDS**  
**16862 FOREST ROAD**  
**FOREST, VA 24551**  
**434-944-9763 FAX: 434-616-2277**

**Insurance Estimate Options -**

Our office files insurance as a courtesy to our patients. For routine care we estimate your down payment based on annual maximums, deductibles and basic percentages to help you calculate your portion due, but in the end the patient is responsible for any balance incurred. We can also send pre-estimate requests to your insurance in writing for more in-depth procedures.

**While we strive for accuracy, please keep in mind, these are estimates only, as insurance does NOT guarantee their verbal or online quotes.**

(There are many variations of coverage, and even employees of the same company may have different plans. Insurance carriers reserve the right for their consultants to make all final decisions on payments made.)

**If you would like your insurance filed and estimates provided for services, please sign below.**

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**Name** **Date**

Some patients prefer the option that allows them to pay in full and file the claims on their own for reimbursement. We can provide the details of your visits if you prefer this option – and please sign below.

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**Name** **Date**

**Please see page 1.**