

TRANSACTION AND PREDETERMINATION INFORMATION

7\SH RI 7UDQVDFWLRQ 0DUN DOO \$\$\$OLFDEOH %R\HV
 6WDWHPHQW RI \$FWXD 654UTYLFVW IRU 3UHGHWHUPLQDWLRQ 3
 (36'7 7LWOH ;;;
 3UH WUHDWPHQW
 (VWLDPDW 1XPEHU

SUBSCRIBER INFORMATION

3ROLF\KROGHU 6XEVFULEHU 1DPH /DVW)LUVW 0LGGOH

'DWH RI %LUWK	00''&&<< <input type="checkbox"/> 0 <input type="checkbox"/>	*HQGHU	3ROLF\KROGHU 6XEVFULEHU , ' 661 RU ,'
3ODQ RU *URXS 1XPEHU	(PSOR\HU 1DPH		

PATIENT INFORMATION

5HODWLRQV KLS WR 3ROLF\KROGHU 6XEVFULEHU LQ \$ERYH
 6HOI 6SRXV 'HSHQG\W &KLOG 2WKHU
 3DWLHQW 1DPH /DVW)LUVW 0LGGOH ,QLWLD 6XII\

0RQWKV RI 5HODWLRQV RI 3URVWKHVLV" 'DWH RI 3U
 7UHDWPHQW
 5HPDLQLQJ 1R <HV &RPSOHWH
 \$GGUHV &LW\ 6WDWH =,3 &RGH

'DWH RI %LUWK	00''&&<< <input type="checkbox"/> 0 <input type="checkbox"/>	*HQGHU	3DWLHQW , ' \$FFRXQW \$VVLJQHGE\ 'HQWLW
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AUTHORIZATION - RELEASE OF INFORMATION

KDYH EHHQ LQIRUPHG RI WKH WUHDWPHQW SODQ DQG DVVRFLDWLRQ WKH WUHDWPHQW SODQ DQG DVVRFLDWLRQ WKH WUHDWPHQW SODQ DQG DVVRFLDWLRQ
 FKDUJHV IRU GHQWDO VHU\LFH IDGHQF\ DVVRFLDWLRQ WKH WUHDWPHQW SODQ DQG DVVRFLDWLRQ WKH WUHDWPHQW SODQ DQG DVVRFLDWLRQ
 WKH WUHDWLRQ GHQWLWV RU GHQWDO SUDFWLFH KDV D FRQWUDFWXDO DJUHHPHQW ZLWK P\ SODQ SURKLELWLRQ DOO RU D SRUW
 VXFK FKDUJHV 7R R'DE'VIE'AWUHQWVRLWVXHGZHHODZG GERDORVXUH RI
 LQIRUPDWLRQ WR FDUU\ RXW SD\PHQW DFWLYLWLHV LQ FRQQHFWLRQ

6XEVFULEHU VLJQDWXUH 'DWH
 TREATING DENTIST AND TREATMENT LOCATION INFORMATION
 , KHUHE\ FHUWLI\ WKDW WKH SURFHGXUH DV LQGLFDWHG E\ GDW
 'DWH YLVLVW RU KDYH EHHQ FRPSOHWH

BILLING DENTIST OR DENTAL ENTITY

'HQWLWVW RU (QWLW\ 1DPH \$GGUHV &LW\ 6WDWH =,3 &RGH
 6LJQHGE 7UHDWLRQ 'HQWLWVW 'DWH
 7UHDWPHQW /RFDWLRQ \$GGUHV &LW\ 6WDWH =,3 &

13,	661 RU 7,1	13,	3URYLGHU 6SHFLDOW\ &RGH
/LFHQVH 1XPEHU	\$GGLWLRQDO 3URYLGHU ,'	/LFHQVH 1XPEHU	
3KRQH 1XPEHU		3KRQH 1XPEHU	

