

**Arash Aghakhani DDS Inc. Dba Crystal Dental  
2206 S. Figueroa St  
Los Angeles, Ca 90007**

To: Denti-cal

From: Arash Aghakhani

Billing ID: 1316180276

Dear Denti-cal

This letter serves as my 30 day notice of termination of my office contract with Denti-cal. Effective October 1, 2015 I will no longer accept Denti-cal patients in my office.

The reasons for my decision are: 1) very low reimbursement rate which does not justify the cost of doing business these days. 2) Myself and my office are exhausted from resubmitting claims that should have been paid, and yet the excuses used by Denti-cal for delaying or rejecting payments are absurd.

I would appreciate a written confirmation of my contract termination with Denti-cal. Please also remove my office (Los Angeles location only) from the directory. I will soon follow up with this decision in my other locations as well.

Regards

Arash Aghakhani DDS