

## **A WORD TO OUR PATIENTS ABOUT INSURANCE**

We consider our relationship with you to be of primary importance and will always make our recommendations based on what we believe is the very best treatment for you regardless of your insurance coverage. However, we recognize that dental insurance plays a large role in helping people obtain dental treatment and we will assist in any way possible to maximize your dental benefits. With this in mind, we would like to share some information about dental insurance.

\*Your employer has purchased a specific benefit plan from literally hundreds of combinations available. Your company decides how much it wishes to pay for benefits and tries to choose a plan that meets as many of its employees' needs as possible. Dental plans may cover as little as 30% or as much as 100%, with most falling in the 50% to 80% range. Some plans exclude certain types of services, such as sealants, implants, or occlusal splints, while other plans actually cover a full range of dental services.

\*Each insurance plan has different percentages, deductibles, maximums, procedures covered, and varying fees that the plan will allow, all of which can change without our knowledge. Due to the variances and changing benefits, we are not able to accurately predict your insurance benefits for any given procedure. If you need to know more precisely what your insurance will cover for a particular procedure, you can request a predetermination that we will be happy to file for you. Otherwise, we will do our very best to make as close a calculation as possible of what your insurance plan may cover, but there may be variances for which you will be financially responsible.

\*The dental benefits you receive are based on the contract that is between you and your employer and the insurance company. Because of this relationship, you can often be more effective at resolving issues with the insurance company than we can.

Please do not hesitate to ask us any questions regarding our office policies. We want you to be comfortable in dealing with these matters and urge you to consult us if you have any questions regarding our services and/or fees.

**I HAVE READ THIS FORM AND AGREE TO BE FINANCIALLY RESPONSIBLE FOR ALL FEES REGARDLESS OF INSURANCE COVERAGE .**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_