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Family & Cosmetic Dentistry

Insurance & Billing Information

For your information this letter is to help you better understand the complexities of dental insurance; we realize how confusing it can be. To begin, we would like to highlight a misconception – Dental Insurance was not designed to pay for all dental care. Most contracts have limits and/or various degrees of co-payments, deductibles and yearly maximums.

As a <u>courtesy</u> we verify the basics of a patients plan. Your Employer dictates the benefits that are paid. Please take time to read the booklet of Benefit Information given to you, so you will be aware of your benefits, Deductibles, Co-pays, Yearly Maximums, waiting periods, and if your insurance company downgrades Composites to Amalgams, Porcelain Crowns to All Metal & Inlays/Onlays to 2 surface Resins.

Initials

All levels of payment by insurance companies, including allowed fees, usual and customary (UCR), are governed by the premiums paid. They have nothing to do with the actual charges. Our fees are based upon a combination of our costs, our time, and our constant dedication to supplying our patients with the highest quality dental care. The treatment recommended by our office is never based on what your insurance company will pay; your treatment should not be governed by your insurance contract.

It should be understood, that the dental insurance contract is between the insurance company and you the patient, it is your responsibility to know your policy (downgrades, waiting periods, missing tooth clauses etc.), you the patient bears the ultimate financial responsibility.

As a courtesy, we will directly bill your insurance company. If your insurance company has not paid us within 30 days from the time claim is sent, we will grant you another 30 days to contact your insurance company and demand payment. If no payment is received by the end of the 60-day period, you will be responsible to pay the full amount due and seek reimbursement directly from your insurance company. We do bill secondary insurance; please let us know if you have double coverage.

After Insurance pays in full, and the balance is known; a statement will be sent and payment in full will be due upon receipt.

We hope this information has been helpful. Please take the time to review your contract thoroughly so we may best serve you. As always, please feel free to ask any member of our staff for clarification on services, billing and insurance.

I have read and understand the Insurance Policies and agree to abide to the terms of this office.	
Signature	Date