



Understanding your Dental Insurance Benefits

Employers offer dental benefits to help employees pay for a **portion** of the total investment of their dental care.

Dental plans are designed to share in the investment of your dental care, not completely pay for those costs.

You are responsible for any remaining balance of your treatment that your insurance does not cover.

UCR (Usual, Customary and Reasonable)

UCR amounts are the maximum amounts that will be covered by the plan for eligible services.

The dental insurance plan pays an established percentage of the dentist's fees based on the plans "customary" or "reasonable" fee limit. Although these limits are called "customary", they may or may not reflect the fees that we charge. **Exceeding the plan's customary fee does not mean you were overcharged for the procedure. There are no regulations as to how insurance companies determine reimbursement levels, resulting in wide fluctuation.**

The allowance is established under the optional service provision in the dental plan. We have **NO control** over the allowance they choose.

Insurance companies control their costs by changing codes to "down code" or pay the "least expensive alternative treatment". This is determined by how your select plan is written.

Down-coding- This is the practice of third-party payers in which the procedure code has been changed to a less complex and/or lower cost procedure than was reported except where delineated in contract agreements.

Least Expensive Alternative Treatment- The dental plan may only allow benefits for the least expensive treatment for a condition. As in the case of exclusions, patients should base treatment decisions on their dental needs, not on the dental benefit coverage.

In many instances, **the least expensive alternative is not always the best option. We will always present the best treatment option for you. We always have your best interest in mind. Insurance is a great benefit and is designed to cover basic care. However, most of our patients need more than basic care.**

We can **ESTIMATE** your total investment, but there **WILL** be an additional amount that will be billed to you after your insurance pays.

Pretreatment estimates are NOT a guarantee of payment because we cannot predict **exactly** what your insurance will contribute to your dental care.

If your dental insurance is a **Federal Plan** or **Delta Dental** your insurance payment will be sent directly to you. Because of this, we will ask that you pay in full on the date of service.

We are out of network with all insurance plans.

As a courtesy, we will submit your claim on your behalf.

Signature _____ Date _____

By signing, you state that you understand the above information and all questions have been answered.