

HELPFUL INFORMATION REGARDING YOUR DENTAL INSURANCE.....

Q: MY DENTAL INSURANCE TAKES CARE OF THIS, DOESN'T IT?

A: Please realize professional services are rendered to a person, and not to an insurance company; thus, the insurance company is responsible to the patient and the patient is responsible to the Doctor. We are unable to render service on the assumption the charges will be paid entirely (or at all) by your insurance carrier. We will help in every way we can in filing your claim and handling inquiries from our office on your behalf. Our desire is to help you realize all you possibly can from your insurance carrier.

Q: MY INSURANCE COVERS 100% DOESN'T IT?

A: Most Dental insurances pay a percentage of the Doctor's usual and customary fees, ranging from 50-100%, after the deductible has been met. Nevertheless, we have found that there are some insurance plans that determine the amount to be paid by using a predetermined "schedule of allowances". They will then pay a percentage of the allowance and NOT the doctor's usual and customary fee. We will use our experience to estimate your portion. Please understand, that we cannot guarantee what any insurance company will pay. Any estimate that we provide is simply AN ESTIMATE. If an exact insurance estimate of coverage is needed, we are happy to submit a PRE-TREATMENT AUTHORIZATION from the insurance company on your behalf. (Note: these insurance authorizations can take up to 30 days for a reply).

Q: DO YOU FILL OUT MY INSURANCE FORMS FOR ME?

A: YES. We are happy to file a claim to your insurance company on your behalf. We require the following information in order to file the claim: Insurance company name, address and phone number, Subscriber's name, Date of Birth, specific insurance ID number or Social Security number. In addition, we need to know the Subscriber's employer and the insurance group number.

Q: WILL I EVER HAVE TO DEAL DIRECTLY WITH MY INSURANCE CARRIER?

A: Possibly, yes. Should you have any questions about the benefits they provide: these questions should be directed to your carrier personally or perhaps someone in your personnel office could be of help to you.

Q: CAN YOU BILL ME AFTER THE INSURANCE CARRIER PAYS?

A: Since insurance companies take thirty to sixty days to process their claims, a large portion of your total fee is deferred. Therefore, we will collect a minimum of 20% of the treatment fee at the time of service. Any portion remaining after the insurance pays us will be expected due in full upon receipt of a statement we will mail to you.

If needed, we offer payment assistance through a company, CARE CREDIT. It is a Dental credit card for which you must apply. Care Credit allows "six months same as cash". After that six months any balance accrues finance charges set up by the CARE CREDIT COMPANY. We are happy to provide you with the CARE CREDIT information pamphlet.

By signing below, I am indicating that I have read the above information regarding my dental insurance and understand it's contents. I am also aware that I am ultimately responsible for my account regardless of my insurance benefits, and agree to pay Dr. Malin any unpaid balance upon completion of treatment rendered.

Signature of patient/guardian

Date

