

POLICY FOR ACCEPTANCE OF DENTAL PLANS

In an effort to combat the increasingly complicated and laborious process of billing dental plans, and the delay tactics employed by insurance carriers today, we have revised our policy for acceptance of benefits. For our office to accept assignment of benefits, you must read this document and accept the guidelines and policies set forth.

Your dental plan is a contract between you and your insurance carrier. We are not a party to that contract. It is the responsibility of you, the insured, to know your benefits under the guidelines of your plan. We are not responsible for any insurance companies arbitrary determination of usual and customary fees. We bill your insurance as a courtesy to you.

Our office policy for the acceptance of assignments of benefits is as follows:

1. You are responsible for payment of all charges incurred in this office. Please be aware some, if not all, of your treatment may not be covered and paid for by your dental plan. You are responsible for any finance and/or late charges incurred on the outstanding balance. Future services both dental and clerical may be refused until the balance is cleared.
2. If your dental plan has not paid your balance in full in 60 days from the date the charges were incurred, we require the balance be paid by you.
3. All estimated co-payments and deductibles are due in full at the time services are rendered unless arrangements have been made prior to the commencement of treatment.
4. In order for us to bill your dental plan, you need to provide us with accurate insurance information and an original insurance claim form, if required. Please fill out the patient portion completely before giving the form to us. The insured person, and if necessary, the patient must sign all applicable areas. Depending upon the parameters of the plan this could be once a year, or it can be for each appointment. It is the responsibility of the insured to know this information and to have their area of the form filled out correctly.
5. We will need to have a signature on file authorizing us to bill your dental plan and accept payment from your insurance. This will be done yearly unless your particular plan requires otherwise.
6. If necessary, we will bill your dental plan twice for a given charge. However, if there is no resolution, it is the responsibility of the patient to contact their dental plan to seek payment. You will be responsible to pay your balance in full as outlined in items # 1 and #2 in this document. We will then assist you in obtaining a reimbursement from your insurance.