

## **KLEKAMP FAMILY DENTISTRY INSURANCE POLICIES**

Our primary goal is to offer state-of-the-art treatment and deliver the best and most comprehensive dental care available. To make the goal of obtaining optimal oral health as easy and manageable for our patients as possible, we are pleased to work with you in making financial arrangements, which are mutually agreeable.

In order to make the insurance process go as smoothly as possible, we require patients to provide us with accurate insurance billing information before the time of service. In addition to a copy of your dental insurance card or print out of your information, please provide the subscriber identification number, social security number, birth date, and employment information of the insured. We will file your claim as a courtesy; however we ask that your deductible and your estimated portion be paid at the time of treatment.

If you do not have proof of insurance, you will be required to pay the full cost of your care at the time of your appointment. If processing of a claim is delayed due to lack of complete information from you, or we are unable to verify benefits, the balance in full will be your responsibility regardless of your insurance coverage.

We are happy to submit fees covered by insurance directly to your provider. We are participating providers with several dental insurance plans. Please contact our office to see if we participate with your plan. In addition, we will estimate your portion of the fee which will be due at the time of service. Keep in mind, this is only an estimate, based on the information we receive from your insurance provider. Your insurance carrier may cover dental procedures based on their own fee schedule, which is not provided to our office. You will be responsible for any portion not paid by your insurance for any reason. Any and all account balances are ultimately your responsibility.

Deductibles and co-payments are typically built into most plans and payments are strictly regulated by state law. Both our office, and you the policy holder, can be prosecuted if these are not collected.

Please remember that insurance is a contract between you, or your employer and the dental insurance company. You are ultimately responsible for payment if for some reason the insurance company does not cover your treatment costs. Please understand that estimates are based upon the information your insurance company has provided us. Occasionally, your insurance company's determination is different than anticipated.

Most insurance companies will respond within two to three weeks. Please call our office if your statement does not reflect your insurance payment within that time frame. We have systems implemented to track these claims, but appreciate your awareness on what is happening with your account and insurance status. Once your insurance has responded, any remaining balance is your responsibility and prompt remittance in full is appreciated.

Please remember that insurance is considered a method of reimbursing the patient for fees paid to the dentist and is not a substitute for payment. It is your responsibility to understand your insurance benefits and to pay any deductible amount, co-insurance or any other balance not paid for by your insurance company. You will be responsible for all collection costs, attorney's fees, and court costs. Understand that your plan is a contract between you, your employer, and the insurance carrier. Our office will do all we can to facilitate claim payment, but Klekamp Family Dentistry does not have the power to make your insurance pay.

If you have questions regarding your insurance, please contact our office. Many times, a simple telephone call will clear any misunderstandings.

## HOW DENTAL INSURANCE WORKS

Understanding how dental insurance works can be difficult. Here are a few facts that may help:

- Dental insurance is a contract between you or your employer, and a dental insurance company.
- Dental insurance, generally, does not pay all costs of service.
- Dental insurance, generally, does not pay for every type of service performed.
- Any amount not covered by insurance is the patient's financial responsibility to the dental office at the time of service.
- At the time of service, the patient's portion of the payment responsibility is only an estimate. The amount of the patient's precise financial responsibility is determined by the dental insurance company after the claim has been filed. When the insurance company sends payment (or denial) to the dental office, they send an Explanation of Benefits (EOB) detailing the specific claim charges and payments. At the same time, a copy of the EOB is also sent to the patient. Our office statement is then issued to the patient. Most questions regarding your statement are best directed to your insurance company.
- Our office is happy to file the dental claim on behalf of the patient, for the insurance company's service benefit. The terms of the insurance are between you, your employer and your insurance carrier. The dental office has no control or influence regarding the coverage you receive from your insurance carrier.
- Some dental insurance plans require a waiting period, usually for Basic and/or Major dental work. It is imperative the patient be aware of any waiting periods and advise the dental office.
- There are innumerable variations in what dental insurance plans pay.
- Some dental plans require a deductible be paid before insurance coverage begins for certain types of dental work.
- Most dental plans have a limited amount per year that they will pay for dental services (Annual Plan Maximum). Once that limit has been reached, the patient is responsible for full payment of services until the plan renews.
- Dental plans, even ones with the same employer and group number, can change every year on the employer's open enrollment/anniversary date. The employer chooses various reimbursement levels and discussing your needs with your human resources department can help change your plan benefits.

Our dental office has limited resources in determining your personal, specific coverage. In order to be financially prepared for your dental visit, you need to know your dental plan. Ask your HR contact at work, look online, or call your insurance company to get the details of your policy.