

Our Thoughts on Dental Insurance

(Insurance Info and FAQ's)

We understand our patient's desire to take advantage of benefits their employer has purchased on their behalf. Sometimes we see them disappointed when those benefits don't completely match their needs. We want to share with you what we have learned about dental insurance so you will have clear expectations from the start.

The benefits purchased for you were based on the amount your employer budgeted for buying insurance – not on your needs or those of others on the plan. No one from the insurance company checked your teeth, or your children's teeth, nor asked what level of dental health was important to you. That's okay. That's our job.

We want to assure you that in this practice we will always make recommendations based on what we believe to be the best for you; never on what your policy covers.

We will help you to see what we see, and diagnose things together. We'll help you understand the existing dental conditions in your mouth, how they occurred, and what you can do about them. We'll talk with you about options and help you understand the implications of choices you make. We want to work with you over time to help you achieve the level of health you desire for yourself and your children.

Most of our patients tell us they want dentistry that is done right the first time. They want the longest lasting, most dependable, most comfortable and most attractive treatment they can have. That's also what we see as the best, and in the long run, the most economical dentistry.

We encourage you to look at the dental insurance as an *aid* in achieving your goals. Dental insurance was never designed to pay for everything in the plan you might want; *only to defer some of the cost of some of the treatment* that its customers might choose.

We have a lot of experience with dental insurance in our practice and we are happy to share what we know with you. We'll help you figure out what your benefits provide, help you to ask the appropriate questions of your benefits advisor, and help you get the most of what you are entitled to under your plan. We hope you will see us as a resource in helping you make good decisions regarding your dental health.

Dental Insurance FAQ's

Q. What is an alternative benefit?

A. A provision in a dental plan contract that allows the third-party payer (not you or your dentist) to determine the benefit based on an alternative procedure that is generally less expensive than the one provided or proposed. Each individual contract specifies what types of procedures are considered for benefits. Even necessary procedures may be excluded from your contract.

Q. Why does my plan only pay for the least expensive treatment when my doctor recommends another? (alternative benefit)

A. To save money, many dental plans allow a benefit only for the least expensive method of treatment. For example, your dentist may recommend a crown, with your insurance only offering a benefit towards a filling. This does not mean that you have to accept the filling. The good news is that some benefit will be paid; the bad news is that more of the fee will be your responsibility. Remember that your dentist's responsibility is to prescribe what is best for you. The insurance carrier's responsibility is to control payments.

Q. What should I do if my insurance doesn't pay for treatment I think should be covered?

A. Because your insurance coverage is between you, your employer, and the insurance carrier, your dentist does not have the power to make your plan pay. If your insurance doesn't pay, you are responsible for the total cost of treatment.

Q. How does my insurance company come up with its allowed payments?

A. Many insurance companies refer to their allowed payments as UCR, which stands for usual, customary and reasonable. However, usual, customary and reasonable does not really mean exactly what it seems to mean. UCR is actually a listing of payments for all covered procedures negotiated by your employer and the insurance company. This listing is related to the cost of the premiums and where you are located in your city and state. Your employer has likely selected an allowed payment or UCR that corresponds to the premium cost they desire. UCR payments could be more accurately called negotiated payments.