

## Facts about Dental Insurance

### **Fact #1**

Your dental insurance is based on a contract between your employer and the insurance company. Should questions arise regarding your dental insurance benefits, it is best for you to contact your employer or insurance company directly.

### **Fact #2**

Dental insurance benefits differ greatly from general health insurance benefits. In 1971, dental insurance benefits were approximately \$1000 per year. Figuring a 3% rate of inflation per year you should be receiving \$3300 per year in dental benefits. Your premiums have increased, but your benefits have not. Therefore, dental insurance is NEVER a pay-all, it is only an aid.

### **Fact #3**

You may receive a notification from your insurance company, stating that dental fees are “higher than usual and customary.” An insurance company surveys a geographical area, calculates an AVERAGE fee, takes 80% of that fee and considers it customary. Included in this survey are discounted clinics and offices that take DMO plans, which brings down the average. The fee-for-service dentist in private practice will have fees that insurance companies define as higher than “usual and customary.” Our practice is a high-quality practice that offers the highest quality of care available. We are not a “cut-rate” practice, rather we offer total dental care for patients who want to keep their teeth in an optimum state for a lifetime.

### **Fact #4**

There have been tremendous advances in the last 10 years in the way dental care is performed. Insurance companies continue to promote out dated and unhealthy ways of restoring teeth while rejecting many of the newer, healthier, and long-lasting materials used in this practice.

### **Fact #5**

Many plans tell patients that they will be covered up to “80% to 100%,” but do not clearly specify the plan fee-schedule allowances, annual maximums, or limitations. It is more realistic to expect dental insurance to cover 35% to 65% of major services.