



ORAL AND MAXILLOFACIAL SURGERY
16511 goldenwest st. #109 huntington beach ca 92647

Insurance

We are happy to bill any dental PPO insurance plan. We are currently in-network with the following insurance companies:

- Anthem Blue Cross
- Aetna
- Cigna
- Delta Dental Premier & PPO
- Guardian
- MetLife
- United Concordia PPO

As a courtesy to our patients, if we have received all of your insurance information on the day of the appointment our staff will attempt to contact your insurance company to obtain your deductible and the benefits you have available. Based on this information, we will estimate the amount you will owe, above what the insurance will pay. This amount will be due the day of service.

Please understand that filing your claims is a courtesy our office provides to our patients, it does not guarantee payment to us. Insurance carriers do not guarantee estimated benefits. Therefore, we never know exactly what the insurance will pay until after the dental procedure/treatment and they receive the claim. For this reason, you will receive a bill from our office for the remaining balance not covered by insurance. Likewise, if the insurance company pays more than the estimated amount, we will send you a refund check.

Treatment cost for any procedures falling under the medical insurance plans will be collected at the time of service, in full. As a courtesy to our patients, we will submit a claim to your medical insurance carrier. Any payment received as a result of claim submission will be directly reimbursed to the patient.

FACTS ABOUT INSURANCE COVERAGE:

Fact 1 - NO INSURANCE PAYS 100% OF ALL PROCEDURES

Dental insurance is meant to be an aid in receiving dental care. Many patients think that their insurance pays 90%-100% of all dental fees. This is not true! Most plans only pay between 50%-80% of the average total fee. Some pay more, some pay less. The percentage paid is usually determined by how much you or your employer has paid for coverage or the type of contract your employer has set up with the insurance company.

Fact 2 - BENEFITS ARE NOT DETERMINED BY OUR OFFICE

You may have noticed that sometimes your dental insurer reimburses you or the dentist at a lower rate than the dentist's actual fee. Frequently, insurance companies state that the reimbursement was reduced because your dentist's fee has exceeded the usual, customary, or reasonable fee ("UCR") used by the company. A statement such as this gives the impression that any fee greater than the amount paid by the insurance company is unreasonable or well above what most dentists in the area charge for a certain service. This can be very misleading and simply is not accurate.



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Insurance companies set their own schedules and each company uses a different set of fees they consider allowable. These allowable fees may vary widely because each company collects fee information from claims it processes. The insurance company then takes this data and arbitrarily chooses a level they call the “allowable” UCR Fee. Frequently this data can be three to five years old and these “allowable” fees are set by the insurance company so they can make a net 20%-30% profit.

Unfortunately, insurance companies imply that your dentist is “overcharging” rather than say that they are “underpaying” or that their benefits are low. In general, the less expensive insurance policy will use a lower usual, customary, or reasonable (UCR) figure.

Fact 3 - DEDUCTIBLES & CO-PAYMENTS MUST BE CONSIDERED

When estimating dental benefits, deductibles and percentages must be considered. To illustrate, assume the fee for service is \$150.00. Assuming that the insurance company allows \$150.00 as its usual and customary (UCR) fee, we can figure out what benefits will be paid. First a deductible (paid by you), on average \$50, is subtracted, leaving \$100.00. The plan then pays 80% for this particular procedure. The insurance company will then pay 80% of \$100.00, or \$80.00. Out of a \$150.00 fee they will pay an estimated \$80.00 leaving a remaining portion of \$70.00 (to be paid by the patient). Of course, if the UCR is less than \$150.00 or your plan pays only at 50% then the insurance benefits will also be significantly less.

MOST IMPORTANTLY, please keep us informed of any insurance changes such as policy name, insurance company address, or a change of employment.