

OUR INSURANCE POLICY

PLEASE READ THIS VERY CAREFULLY. Most unpleasant financial surprises come from not fully understanding our policy and not understanding the nature of dental insurance.

- As a service to you, our office can submit your insurance at no charge to you.
- Your policy must give you the freedom to choose your dentist in order to receive benefits at this office. You will not receive benefits from a DMO or HMO plan for services in this office. You can receive benefits from a PPO plan; we are network providers for a few select plans. Please ask us for details.
- Typically plans pay \$1000-\$2000 per year on your behalf. Look at your insurance as a “coupon” for \$1000-\$2000 off your dentistry.
- Remember that it is YOUR insurance and all charges you incur are your responsibility regardless of your insurance coverage.
- You and your insurance company have a legal agreement and Alfred J. Tennant DDS is not involved in this agreement. Our responsibility is to you. We do what is in the best interest of your health.
- We are NOT experts on your insurance, it is ultimately YOUR responsibility to know your insurance plan benefits. It is unrealistic to expect our office to know all the details of all insurance plans. We ESTIMATE what your insurance will pay from the information you and your insurance give us.
- At the time of service, you are expected to pay the full estimated part of your bill that we think your insurance will not cover. We do not guarantee what your insurance company will pay, we estimate the amount *most* insurance companies pay.
- We will do what we feel is in the best interest of your health; not what your insurance company thinks you need, is “necessary”, or how frequently they think something should be done. Many times carriers tell patients procedures are not “necessary” or are too frequent without even seeing the patient. We will not enter into disputes with your insurance company over any claim. We will support you by providing additional documentation on your behalf if a claim is rejected.
- You are responsible for payment regardless of your insurance company’s determination of “usual and customary” fees.
- Insurance payments are normally received within 30 days. If your insurance company has not made payment within 40 days, you will be responsible for paying the full amount at that time. Our office will continue to cooperate with your insurance company and support you in getting your benefits.
- THIS DOCUMENT SUPERCEDES ANY VERBAL COMMUNICATION YOU HEAR FROM ANY OF OUR TEAM MEMBERS.

I have read, understand and agree to the above. I further understand that a finance, rebilling, collection charge or attorney fee will be added to any overdue balance.

Signature

Date