ALAN C. JOHNSON, D.D.S. & ASSOCIATES

We are often asked about the differences between traditional silver amalgam restorations and the newer state-of-the-art composite restoration, both in terms of treatment considerations and dental plan reimbursement. We hope to answer some of these questions in this letter.

Ideally, all dental restorations should be harmless to the pulp and soft tissue, contain no toxic substances that can reach the circulator system, be free of sensitizing agents, and have no carcinogenic potential. We recognize that both amalgam and composite restorative materials can have positive and negative attributes. As such the material selected for your restoration must be based on your individual needs, not dental plan limitations.

While silver amalgam has been in use for 150 years and has high compressive strength upon setting, it does expand over time, which can cause fractures in tooth structure if the remaining structure is thin. The newer composite resins are 30-70% acrylic or polyurethane with the remainder being filler material such as finely ground glass or minerals. They are resistant to abrasion and are less likely than amalgam to expand or contract. The size and location of the restoration, as well as the proximity to the pulp, influence which material we recommend.

Careful consideration must be given to your individual clinical needs before recommending the best material for your treatment. *In our dental practice,* ***we want our patients to be fully informed and know that Dr. Johnson & Associates only use composite material.***

Why do white/composite fillings cost more?

Composite require more care in placement due to a number of different steps involved. Also, composites are cured by a powerful light. To insure proper curing, composite must be placed incrementally, and each stage much be cured. Therefore, it often takes more time and skill to place a composite restoration.

Will my insurance cover tooth-colored fillings?

Ever patient's dental plan is different. While some plan pay for composite fillings regardless of their location in the mouth, most dental plans define which teeth are eligible for additional reimbursement. Some plans pay higher composite fees only from cuspid to cuspid. There is even a plan that will *only* pay for amalgam on front teeth!

When a dental plan pays an amalgam fee, instead of the composite fee that was billed, it is not implying that the composite restoration was not the best choice for the patient. It is only saying that the premium paid for the dental plan defines, and often limits, the amount the plan will pay for certain services. When a dental plan reduces its payment to a silver filling fee, the difference is the patient's responsibility. Our Financial coordinator can provide you with an *estimate* for the difference in cost. However, it is the patient's responsibility to know their dental benefits.

If you have additional questions regarding the appropriate material for your particular needs after reviewing the information above, please contact our office at (949) 951-1067.

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Patient Signature Date