

Policy on Dental Insurance

Thank you for choosing the office of Dr. Mel Dixon for your dental care. We accept most PPO and indemnity insurances. We will be happy to file your applicable dental insurance. We understand that dental insurance can be very confusing and will be happy to answer your questions to the best of our ability. Remember that we are here to serve you. Please help us by reading and acknowledging the following:

- Some insurance carriers limit the procedures they will cover. Please be assured that Dr. Dixon will always recommend the treatment that is appropriate for your health, regardless of what an insurance company clerk will approve.
- Our computer will estimate your deductible and the amount covered on dental procedures. Please remember that this is only an estimate based on our history with your insurance company and what little *estimates* they have provided us. If they should cover less than expected you will be responsible for the balance. Please be assured we will work with your insurance company to maximize your benefits but be aware that your health needs will take precedence. If they should cover more than expected a credit will be applied to your account.
- We ask that you pay your patient portion at the time of service and we will gladly wait for the additional funds to be paid by your insurance company up to a reasonable time period. In the event that the insurance company has not paid within a reasonable time period you will be notified.
- In order to assist you in filing your insurance, we will need a copy of your insurance card. If you do not have an insurance card we will need to obtain your social security number and date of birth to research your benefits with your insurance company. Although more and more plans are issuing ID numbers the vast majority still identify you using your social security and date of birth. In addition to this, a copy of your identification card will be obtained.
- The insurance is a contract between you, your employer, and the insurance carrier. We are not a party to that contract. We will make every effort to provide all the information to expedite the claim, but ultimately any uncovered procedure is the patient's responsibility.
- Please keep us informed if any treatment has been performed at another dental office so that we can accurately estimate your remaining benefits.
- Please let us know if there have been any changes in your employment or insurance that might affect your benefits.
- If you are fortunate enough to have two insurance carriers, please let us know so that we may obtain any necessary documentation to file your secondary coverage.

Thank you for reviewing our insurance policy. We want to avoid misunderstandings so that we may focus on your health.

I understand and accept Dr. Dixon's policy on dental insurance.

Insured Signature: _____ Date: _____