



CARRUTH ENDODONTICS

Understanding Dental Insurance

Dental insurance can be very confusing. Especially since it functions very differently from medical insurance. Unfortunately, dental insurance coverage and benefits are relatively unimproved since the 1980's and often leave people feeling disappointed.

So we would like to provide as much upfront clarity as possible.

Limited Reimbursement Benefit

Dental insurance is better described as a reimbursement benefit plan. Meaning, your policy outlines a certain "pot" of money (maximum benefit) that they are willing to reimburse you in a given coverage period if you incur covered dental services and fees. That amount is typically around \$1,000-\$1,500 but every policy is different. Once that reimbursement maximum is fully paid out, your insurance provider will no longer reimburse you for dental services and fees for that period.

Limited Coverage and Percent of Coverage

Just because you have reimbursement benefits remaining does not mean they will pay that full amount on dental services. Firstly, not all dental services are covered by a given policy. Secondly, insurance providers choose to pay only a percentage of dental fees, typically between 50-80%, as defined by your particular policy including any network coverage differences. For example, if you have a \$1,000 maximum reimbursement benefit available and you incur \$2,000 worth of services and fees, they will not automatically reimburse you the full \$1,000. Instead they will reimburse you only a certain percentage of those fees up to the \$1,000 maximum benefit, depending on your policy details.

Who? How? When? & How Much? of Reimbursement

At the time of service, we will electronically file a reimbursement claim on your behalf. Your dental insurance provider will then reimburse you directly through a mailed check. In general, you should receive the check from your insurance provider anywhere between 14-45 days. If you have not received a check within 30 days, we recommend reaching out to your insurance provider directly for clarity. If they need any additional information from us we will be happy to help.

Unfortunately, dental insurance companies like to keep a lot of their information behind the curtain. This means we cannot tell you the exact amount they will reimburse. When you provide us with your insurance information, we will give you our best *approximation* of what they may reimburse you based on your general policy coverage details and your remaining benefits. However, until they actually process your claim they will not reveal the exact amount they will reimburse.

For specific details on your policy benefits, please contact your insurance provider directly