

Insurance & Payment Explanation

Pacific Family Dental welcomes you as our new patient. We would like to take this opportunity to explain the benefits of dental insurance as we know it. Insurance can be confusing with terms such as co-payments, deductibles and percentages.

Pacific Family Dental is a fee for service dental office. We ask, that at the time of service, you pay your "estimated" portion based on your dental insurance's verification of benefits.

As a courtesy, Pacific Family Dental contacts each and every patient's insurance company to get a basic breakdown of insurance benefits to best help you in planning for your dental expenses. Please understand that this is not a guarantee of payment by your insurance company, only an estimation of payment. Be aware that if we are unable to verify insurance coverage for you, we must collect payment in full for any services provided that day.

Most dental insurance companies cover a percentage of your total cost for dental services. However, most insurance companies will only pay the percentage of their own determined cost of a procedure, regardless of the billed amount or the "usual and customary" cost for a procedure in this area. This leaves a difference between your "estimated" responsibility (due at the time of service) and your actual responsibility. Unfortunately we are limited by what your insurance company is able to tell us. This difference in cost is then billed to you after all outstanding claims have been paid. This balance is your responsibility to pay and is due upon receipt of the statement.

Example

Let's say that a dental procedure you had today has a fee of \$92.00

Your insurance plan benefit states that they cover 80% of this service. We estimate your portion to be \$18.40 due at the time of service.

Your insurance company sends payment of \$57.60 (This is 80% of your insurance company's determined maximum for this procedure or \$72.00).

This leaves you with a balance on your account of \$16.00 which is then billed to you.

If you have any questions about the above explanation, please ask us and we will do our best to clarify.

We appreciate your understanding of the limitations we are provided by your insurance company. We aim to give you the best quality of care and service that you deserve. We would be happy to accommodate your request for a preauthorization for treatment from your insurance company if you would prefer. You are also welcome to ask your insurance company for a copy of their fee maximums in order to better estimate your payment responsibility.

Please note that past-due accounts will be assessed a late charge of 1.5% per month on any outstanding balances. There will be a \$25 charge for any returned checks.

We reserve the right to charge **\$75 for missed appointments** if we do not receive **48 hour notice** prior to cancellation.

Thank you for being a Pacific Family Dental patient!