



## **DR. MURRAY L. RABALAIS PERIODONTICS**

### **INFORMATION FOR PATIENTS WITH DENTAL INSURANCE**

Here is some information about the dental insurance system that will help to explain why what is best for you may not always be the same as what your insurance will pay:

**FACT #1:** Dental insurance differs in some ways from regular health insurance that covers physician and hospital costs. Not everyone gets ill but nearly everybody has some dental costs. The amount of money available to pay dental insurance costs is equal to the amount contributed by employees and employers minus costs of operating the insurance company and a normal company profit. So the lower your premiums for the insurance the less money there is available to pay claims.

**FACT #2:** To protect themselves, insurance companies usually make up a schedule of what they view as "usual and customary." It is our experience in dealing with over 1,000 dental insurance plans that some schedules actually only cover 40 to 50% of customary fees. Others may cover up to 80% with certain deductibles, maximums and exclusions. Rarely does insurance cover 100%.

**FACT #3:** Since insurance companies are in business to sell insurance and make a profit, it is natural that they may try to shift the blame for their lack of coverage onto the dentist and his fee schedule rather than admitting their coverages are less than customary.

**FACT #4:** The amount of coverage insurance companies pay, which ranges from 1000 to 1500 per year, has not kept pace with the expense of delivering dentistry in this highly

technological field. When one considers that the yearly dental insurance premium is over \$500 it can be seen that dental insurance is no bargain.

It is very appropriate for you to call your insurance carrier and ask any questions regarding the details of the insurance plan they are operating in your behalf.

Your treatment by us will be determined by your dental needs and your general health, not by your dental benefit plan. It is not in your best interest to compromise your treatment to fit an insurance program's benefits. Your treatment plan will be discussed with you. You make the decision, not your insurance company.