

## Infant Frenectomy Financial Policy

Patients who do not have dental insurance at the time of service are still obligated to pay for services. Our private or regular fee for a frenectomy is \$625; there is a separate required consultation fee of \$125; for our infant patients, your **maximum out of pocket patient portion is \$750.**

If the patient has been added to your dental insurance plan later on, as a courtesy we can try to bill your insurance as long as the effective date is prior to the date of service. Please be aware that we are in-network with many different insurance companies and each insurance plan and coverage percentages can vary from person to person. Your insurance policy is an agreement between you and your insurance company and it is your responsibility to pay for any balance not covered or paid by your insurance. If you have any questions regarding your dental insurance plan, you may contact your dental insurance company as well.

**REFUND CHECKS:** IF and WHEN the insurance pays their portion we will process any needed adjustments and send a refund check out to you within 30 days of us receiving the check from insurance company. Commonly refunds have been around \$0 to \$350, and NOT \$750, due to insurance fee schedules, co-payments, and deductible.

**CONTRACTED INSURANCE billing:** If we are contracted ("in network") with your insurance then we will accept their fees. For example we are currently a Delta Dental PPO Premier Provider charging \$625.00 for each frenectomy site; however, depending on your group coverage our contracted fees will vary. For example, if the In Network Delta Dental Plan you are on allows \$499.00 at 80% coverage per frenectomy site then that is what we will accept and make any adjustments needed. The details of this example are as follows: from our private fee of \$625.00, we will adjust off \$126.00 down to the contracted fee of \$499; the insurance may pay \$399.20 (80% of \$499), in which case your 20% portion will be \$99.80 PLUS any deductibles that apply.

**NOT CONTRACTED INSURANCE billing:** If we are NOT contracted with your insurance plan then our fees will not be adjusted. In this SECOND example if we charge \$625.00 per frenectomy site, and your insurance pays \$361.00 per frenectomy site at 80% coverage: this would mean they will pay \$288.80 for each frenectomy site, which leaves a difference of \$336.20 per site that would be your responsibility to pay out of pocket PLUS any deductibles that apply.

In every scenario your **maximum out of pocket patient portion is \$750.**

I understand and have received a copy the Infant Frenectomy Financial Policy.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_