

HOW DOES ORTHODONTIC INSURANCE WORK?

Orthodontic insurance differs from regular dental insurance in that it rarely pays for treatment in full. Every individual has a maximum lifetime orthodontic benefit. This benefit is usually paid out over the course of treatment. For example, if treatment lasts for 24 months, the payments from the insurance company will be paid out over 24 months until the maximum has been reached. There are many different agreements between insurance carriers and their subscribers, and each contract provides a different benefit.

HOW WILL OUR OFFICE ASSIST YOU WITH YOUR INSURANCE?

We will generate insurance claim forms that will describe the orthodontic problem, the length of treatment, and the financial arrangements that you've made with us. We will then submit these forms to your insurance carrier for reimbursement to you for payments made for treatment. We do not receive notice of payment from your insurance company. Please keep us informed if you have not received reimbursement so that we can re-file a claim.

HOW CAN YOU MAXIMIZE YOUR BENEFITS?

Know your benefits before treatment begins! If you are not sure, contact your insurance company or benefits administrator so that you know your total benefit amount, how much you can expect to receive, and when to expect payment.

A FEW WORDS ABOUT FLEXIBLE SPENDING ACCOUNTS

Flex plans are designed to allow families to set aside pre-tax dollars to pay for "out of pocket" medical and dental expenses. Flexible spending accounts can be very beneficial and should be used whenever possible. They are, however, strictly regulated. The facts are:

- These programs are regulated by the government and there are guidelines that must be followed.
- Payments must be for services rendered and cannot be a pre-payment for future charges. Very few plans will reimburse for payment in full at the beginning of orthodontic treatment.
- Funds are to be used for "out of pocket" expenses. If you have insurance coverage for treatment you must allow for what portion of the fee your insurance will cover.
- Documentation to receive reimbursement from your benefits administrator may be in the form of a receipt for payment or may require a statement of charges. Please check with your administrator.