

ORTHODONTIC INSURANCE – HELP US HELP YOU

Due to a variety of insurance plans, including different plans within the same insurance company, our office requests that you bring any insurance information in at the first visit:

1. Please make sure that *all* the information is complete and accurate, including the insurance company’s address, phone number, policy and group numbers.

2. An accurate quote of your orthodontic insurance coverage, which should include the percentage they will pay and the maximum lifetime allowance. For adults and dependant children over the age of 18, please check the age limitations imposed by your insurance company. This information can be obtained by calling your insurance company or in your insurance plan booklet.

Do you have orthodontic coverage? ____ Yes ____ No

Subscriber _____

What is the Orthodontic Lifetime Maximum? _____

What is the Orthodontic Percentage ? _____

Do you have a second insurance? ____ Yes ____ No

Subscriber _____

Lifetime Maximum? _____

Percentage? _____

Who is the Responsible Person for the Account? _____

Upon receiving all the necessary information, we will submit claims to the insurance company at the required time. **We are not required to pre-authorize orthodontic treatment.** We would be pleased to pre-authorize by request, although it is not a guarantee of payment. Please keep us updated on any changes to your insurance coverage throughout treatment. If you have any questions regarding this matter, please feel free to contact our office. We appreciate your assistance with this information.