

Progressive Dental Solutions

Wayman J. Brown, D.D.S.

Excellence: The Art of Surpassing Our Patients' Expectations

Assignment of Benefits Agreement

We must emphasize that as your dental care provider, our relationship is with you, our patient, not with your insurance company. Dental insurance is very different than medical insurance. Dental insurance is not designed or intended to pay for the needs of the patient. It is an employee benefit provided by an employer to help offset the cost of preventive dental care. We understand how important it is to maximize your insurance benefits. We are more than happy to help you by filing your claims electronically or by mailing a claim with x-rays or other supporting documentation. We will defer the estimated benefit while we file with your insurance carrier. We do not have the detailed information on the limitations of your dental plan. These limitations are determined by the employer and are subject to change. Feel free to call your insurance carrier and ask them to send you a detailed explanation of your plan coverage and limitations.

Our office will accept an assignment of benefits from your insurance company with the following provisions:

- We ask that you complete a dental insurance form or proof of current insurance for each visit. In order to process your claims properly we must ask that you provide our office with the correct policy information necessary to help you receive your benefits.
- We ask that you keep your insurance policy current by completing and returning questionnaires inquiring if you or your family has other insurance coverage. Failure to provide your insurance carrier with requested information will result in a denial of benefits by your insurance carrier. The denied benefits by your insurance carrier will result in a billing statement due by you within 15 days. You will then become responsible for seeking reimbursement directly from insurance company.
- We will file with your insurance carrier and defer the estimated benefit for 30 days. All services rendered are subject to review and plan limitations by your insurance carrier prior to allowing benefits. We cannot guarantee the outcome of your claim. By having our office process your insurance claim and defer an estimated benefit, it is important to understand that this does not eliminate your obligation for any unpaid portion by your insurance carrier. Any unpaid portion is due by you within 15 days of receipt of a billing statement.
- We ask that if you have questions or concerns regarding how your insurance carrier handled your claim that you call your insurance carrier for an explanation. If you dispute the claim and plan on submitting an appeal to your insurance carrier our office will cooperate fully by providing any necessary documentation your insurance carrier requests. We do ask that you remit the unsettled amount and seek reimbursement directly from your insurance carrier. Our office cannot defer estimated benefits after 30 days pending an appeal between you and your insurance company over an allowed benefit or plan limitation.

I have read and understand the above terms and conditions. I authorize my insurance company to pay allowed benefits directly to Dr. Wayman J. Brown.

Print Name

Signature of patient/responsible party

Date