

To our valued patient:

Many insurance plans will no longer release information to us regarding your plan due to “The Privacy Act.” For this reason we ask that you provide us the following information regarding your dental plan.

You will need to contact your employer or they may have given you a booklet that will provide you with the details. **Unfortunately, if we do not have the proper information we are not able to keep track of your limits which may result in charges to you for necessary treatment.**

Please provide us with:

- ☺ Name of your employer
- ☺ Name of your insurance company
- ☺ Policy or group number
- ☺ Certificate or Policy ID number
- ☺ Percentage covered for basic and/or major work
- ☺ Is the benefit year a calendar year? If not when does the benefit year start/end?
- ☺ Is there a yearly deductible or limit? Are there separate limits for basic/major work or is it combined?
- ☺ How often are cleanings allowed? Are there frequency limits for recall exams, prophylaxis (polish) or fluoride? How many units (15 min = 1 unit) of scaling and root planing are allowed per year?

If you are on your spouse’s plan we will also need to know (along with the above):

- ☺ Your spouse’s date of birth
- ☺ Your spouse’s place of employment

Thank you for your cooperation, this will help us to service you better.

Sincerely,

Image Smiles Dental Team