

Sloane & Oppenheim D.D.S., P.C.

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(610)-437-9000

INSURANCE, YOU and US

Patients should realize that professional services are rendered to a person, and not to an insurance company. Thus, the insurance company is responsible to the patient, and the patient is responsible to the Doctor. We cannot render services on the assumption that the charges will be paid by an insurance company. However, we will help in EVERY way that we can in filing your initial claim, follow-ups, lost claims, etc., from our office on your behalf.

Most insurance companies make payments directly to our office. After THIRTY (30) days, if a claim goes unpaid, the outstanding portion of that claim becomes your responsibility to pay.

For those patients whose treatment involves dental laboratory charges to us, such as, crowns, bridges, and dentures, we ask that half of the fee be paid at the start of treatment when we incur our laboratory costs. We invite you to get a pre-treatment estimate from your insurance company before you start those procedures so that you will know your coverage before you make a commitment to treatment. We will be happy to assist you in seeking a pre-treatment estimate. If there are special considerations or other circumstances, please consult our financial secretary.

Our fees are carefully constructed to reflect the realistic cost of delivering a state-of-the-art dental service and are neither high nor low for the area. It is the patient's responsibility to pay any sums not paid by their insurance carrier.

Statements by insurance carriers that fees exceed "usual, customary, and/or reasonable charges" are not reflective of dental fees in the area, but actually represent the quality of the dental insurance program purchased by your employer. So called "UCR" fees vary greatly from one insurance program to another, even within the same insurance company.

This information about finances and insurance is provided to help avoid any misunderstandings regarding payment.

Sincerely,

Drs. Sloane & Oppenheim & Staff

Non-Participating vs. Participating Insurance

Approximately three-quarters of our patients have dental insurance from a company with which we do not participate. Our experience is that this has not posed an inconvenience for our patients. With any dental insurance plan you have, we will file the insurance claim for you. Most plans will directly pay our office; however, some plans do not. Our patients seem not to mind paying a few extra dollars for some services that are not 100% covered by their plan. We hope you have confidence in the fact that we try to exceed your expectations to provide a comfortable and caring service. Sometimes, depending on the services rendered, there is little or no difference in the patient co-payment between a participating and non-participating dental office. It mostly depends not on the insurance company, but rather the plan your employer has purchased for you. The dilemma for some patients is whether or not to get their dentistry at a participating dental office. If history is a guideline, the majorities of patients who left our office for a participating office have since returned and were always welcomed back. Sometimes a few dollars seemingly saved at a participating provider actually ends up being more expensive for a variety of reasons (mistakes, neglect, over-zealous treatment or under treatment). It is a fact that employers are trying to save dollars wherever possible and with your dental benefits, they are attempting to transfer some of the burden to you and your dentist. As your doctors, we are already making every effort to keep our fees in line and commensurate with the level of service you have come to expect from us. So we hope this relieves any anxiety you have in making a choice of dentist, and we want you to know that we certainly value our relationship with you.

If you have any additional questions regarding your dental insurance, please do not hesitate to call our office at 610/437-9000. We would be happy to answer!