

About Dental Insurance...

Rapid, confusing changes in the insurance industry are causing all of us in American society to reflect on and decide how we both give and receive healthcare. In the past few years, I have deeply contemplated the meaning of these changes relative to my mission to render the best dentistry I am capable of in an environment which truly cares about each and every one of you. With this in mind, let me share a few thoughts with you.

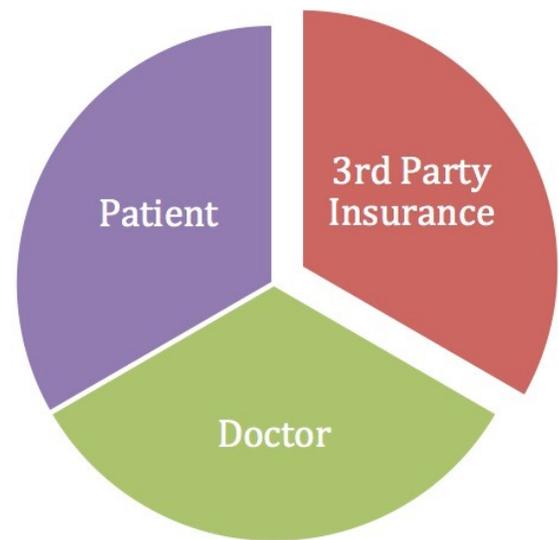
Before we get into the heart of the issue, I want to explain that I have lived on both sides of this issue. When I first started practice, I was contracted with numerous 3rd party insurance carriers. My dissatisfaction came from the inability to provide individualized and personalized restorative dental care *at the highest level* for my patients. These discount plans do not afford the opportunity to make choices as a team with our patients, and limit the amount of time we can spend with our patients. For example, a comprehensive new patient examination in my office takes a *minimum* of 1.5 hours. This equates to 3-5 minutes in the "average" insurance-driven dental practice. It is for scenarios like this that I found it unacceptable to partner with 3rd parties whose mission clearly states that their objective is to make the largest profits possible, with no mention of patient care at all.

What is insurance? Insurance is defined *when a 3rd party takes the risk and responsibility for a catastrophic loss*. Unfortunately, this makes "dental insurance" a misnomer, and in my belief, is communication malpractice to the patient and consumer.

Insurance companies are in business to make money. They are not concerned with caring for your teeth or health. In fact, it is the insurance company's best interest if you do not seek any healthcare. That way, they earn money on your premium dollar without having to do anything for your health. Seminars and newsletters to dentists are filled with stories of insurance companies' tactics in delaying payment to dentists and denying needed treatment to patients.

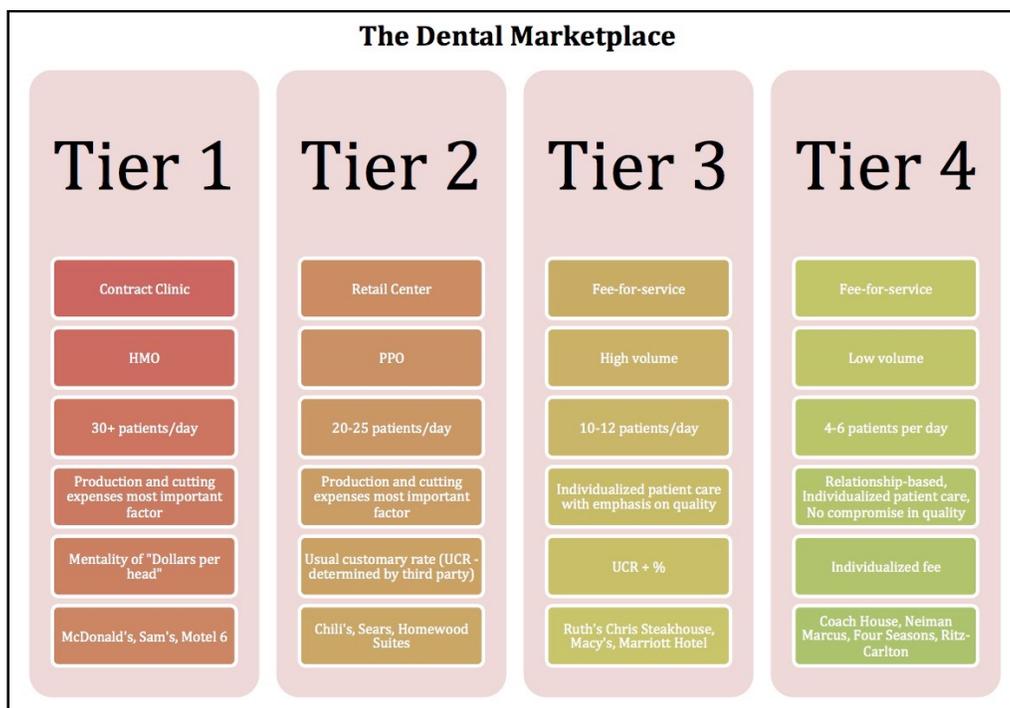
In recent years, the insurance industry has moved rapidly in ways which interfere with or destroy the doctor-patient relationship, which I hold has one of the few remaining sacred things left in modern life. In fact, I believe that my devotion to each and every one of you is one of the key factors which makes our practice special, and is also why you have chosen us and remained with us.

When dental insurance came into the consumer market in the 1970's, an individual's maximum annual benefit was \$1,000. I find it amazing that, although premiums for these policies have *risen dramatically*, the maximum benefit has remained the same. In other words, what was a very generous benefit some 30 years ago, is a very paltry sum now. Think of what \$1,000 bought in 1970 compared to today!



We want you to receive the maximum insurance benefit to which you are entitled, and will work very hard to assure this; however, we realize that an insurance policy is a contract between you (or your employer) and the insurance company, subject to rules and regulations which we cannot control. *We will also never make any healthcare decision based on the edicts of any third party, which puts profits ahead of human well-being.*

Unlike medical insurance, dental coverage was never intended to be all-encompassing. With this in mind, please understand that even the best dental policies today cannot be viewed as anything other than a payment assistance program with some very severe limits. Please know that my team and I are devoted to your well-being, and will help you make decisions which will preserve the health, comfort, function, and aesthetics of your mouth regardless of what any for-profit third party has to say. We will do all we can to assist you in paying for what we consider to be excellent care; however we will not compromise on the nature or quality of our treatment of any human being.



In summary consider the following points:

- 1 Did your insurance company examine your oral health before giving you the plan?
- 2 In 1967, the annual limit was \$1,000. That equates to nearly \$7,000 today. So, in a 5-year period, you could get well over \$30,000 in treatment completed. Today, the annual limit is still \$1,000. Therefore, it is impossible to get everything you need paid by insurance.
- 3 I promise you, I will never be guided by your insurance plan. Let's talk first about what dentistry you need, then how you can pay for it.
- 4 Insurance is a method of payment, not a method of treatment. We are always going to look out for your best interests first.
- 5 We firmly believe that any patient will spend less dollars in a quality dental practice over the course of a lifetime than in an insurance-driven, high production office.

Please feel free to discuss this issue openly with my team or myself.