

Smilematters

PATIENT FACT SHEET

Dental Insurance Myths — Get the Most of Your Dental Care

MYTH: I can't go to the dentist if I don't have dental insurance.

FACT: Absolutely not true. Many people without dental insurance find that regular dental care is affordable, especially since preventive treatment helps safeguard against future problems, before they become more serious and expensive to treat. Regular dental visits are an important part of your overall health, as studies show that poor dental health is linked to other medical issues such as diabetes, oral cancer and heart disease.

If you don't have dental insurance, talk to your dentist about payment options that may be available to you.

MYTH: My dental plan should cover all of the costs of my dental care.

FACT: Dental plans are designed to help pay for a portion of your dental costs. Many plans cover 100 percent of basic preventive and diagnostic services, and then between 50 percent and 80 percent of restorative care and other treatment needs. Your cost depends completely on the services and procedures which your employer has purchased as part of your dental benefit plan.

MYTH: My dentist has recommended a more expensive procedure that is only partially covered by my dental plan. Is my dentist trying to take advantage of me?

FACT: Absolutely not. While your plan may limit certain types of treatment it will cover, you and your dentist should always decide what treatment is best for your specific needs. Dental plan administrators are not usually dental professionals and therefore are not in a position to decide which treatments are right for you. Don't let the plan coverage dictate your treatment.

MYTH: A note on my explanation of benefits indicates that my dentist's fee is more than was allowed by the dental plan for a procedure. Is my dentist charging me too much?

FACT: Your dentist is not over-charging you. Dental plans set limits for the amount paid for any treatment based upon a fee schedule — the plan's fee schedule, not your dentist's actual fees. The administrator will pay either a set percentage of your dentist's fee, or a maximum plan benefit, which is based upon the benefit level of your specific plan.

MYTH: My dental plan is better-able to determine the fees for my dental needs than my dentist.

FACT: Your dentist is educated to diagnose and treat oral disease and promote oral health and disease prevention. This requires a pre-dental degree from a college or university, followed by a minimum of four years of dental school. A dental specialist undertakes an additional two to four years of training after dental school. Your dentist is a doctor of oral health who has taken the time to study your oral condition and develop a treatment plan for your specific dental needs. The cost for your care is based on treatment recommendations that take into account your dentist's clinical expertise and your specific needs and preferences.

Dental plans often limit your options through a contract with your employer and are not based on your individual needs. So, be sure to talk with your dentist about your individual treatment plan and any questions you may have about your dental benefits.

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