

# Contacting Your Insurance Provider

You will need the following information:

- Your name
- Your relationship to the member (self, spouse, child, etc)
- Your address, date of birth, and possibly other confirming identification
- Your Plan/Policy Number (provided on an insurance card or correspondence)
- Your Certificate ID Number (provided on an insurance card or correspondence)

## Client Worksheet

Here's a place you can record your benefit information for quick reference.

Insurance provider:

Phone Number:

My Plan#:

My Certificate #:

Plan Maximum (Fiscal vs Calendar year):

Scaling units:

Examination Frequencies:

Radiographs(X-rays) Frequencies:

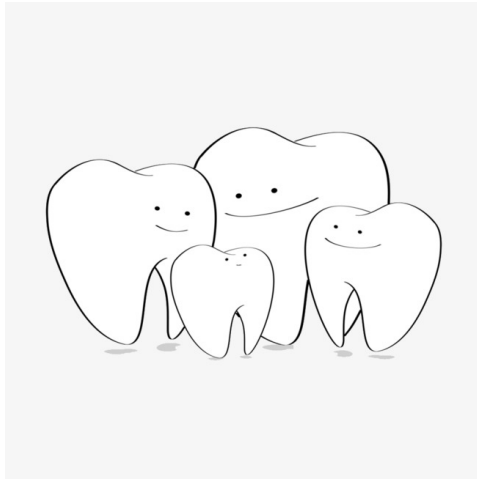
% for Major Restorative:

Orthodontics:

# Dental Insurance Guide

A quick guide to help you navigate your dental benefits





## What are dental insurance/benefits?

A dental insurance benefits package can be purchased by the individual or their employer based on a set budget. It is a contract between yourself, the employer (when applicable) and the insurance provider; not the dental professional.

It is important to know that these benefit packages are **not designed to your specific needs**. Your treatment here will always be based on your specific oral health status and findings, not your benefit package.

Insurance companies do not always stay current with new treatment modalities, and most current treatment options may not be assisted with.

**Your dental office will never be informed of any changes made to your benefits package or what it includes.** It is your responsibility to know your plan and what it can offer you.

**We are here to help!**

## Questions to ask your Insurance Provider

1. What is my policy annual maximum?
2. Does my policy run on a calendar or fiscal year? Meaning will it renew January 1<sup>st</sup> of the New Year, or another date.
3. Does this plan assist with major restorative procedures like crowns and bridges?
4. Are there allowances for additional treatments to be approved with supporting documentation?
5. Has my dental estimate been processed? What is the status?
6. Has my request for additional scaling units been approved?
7. Could my predetermination be re-issued, I don't seem to have the original in my files?



## Key Terms

Not too sure what a term means? You are not alone. Many people struggle to understand what their dental benefits can offer due to the dental and insurance terminology. When in doubt, ask.

**Annual Maximum** – the amount set by the plan to be the maximum amount of benefits allowed in a 12-month period.

**Deductible** – the amount insurance has set to be un-claimable before the package becomes active (specific to some plans)

**Scaling units** – the unit of time allotted to you for tooth debridement in a 12-month period.

**Frequency Limit** - how often that code can be claimed for assistance in a set time

## Contact Us

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