



DISCLAIMERS FOR TREATMENT PLANS

The insurance policy is owned by the patient. Hence, all patients are personally responsible for understanding his/her own insurance plans and coverage in detail. This is not the responsibility of Lakeside Implant & Oral Surgery. However, our team is committed to collaborating with insurance companies to better understand the respective policy coverage as it pertains to the respective treatment plan proposed. However, these are preliminary and complimentary services. It is ultimately the responsibility of the patient to understand his or her policy and coverage. Any account balance not covered by the insurance company will be the full responsibility of the patient.

- The treatment plan presented is an ESTIMATE based on a verbal discussion with your insurance company on the date verified.
- This ESTIMATE will not reflect any pending claims billed by your general dentist or other dental specialists that have been billed to your insurance provider.
- This is an ESTIMATE and is not an authorization, a pre-treatment estimate nor a guarantee of eligibility, benefits or payment by your insurance company.
- Pre-treatments, although formally provided by your insurance company, are ESTIMATES. Nothing is guaranteed until services are complete and all claims are formally reviewed post treatment by the insurance company.
- Benefit amounts may be subject to the dentist's participation status and procedures are subject to professional review by the insurance company once the formal claim is submitted.
- Predetermination of benefits is recommended for procedures in excess of \$300.
- It is important to note that insurance companies have multiple plans, each of which have numerous disclaimers, that may or may not be disclosed to our staff when we are obtaining your preliminary benefit information via phone, fax, email, etc. Some of these disclaimers could pertain to, but are not limited to, the following:
 - Maximum met
 - Waiting periods
 - Missing tooth clause
 - Anesthesia guidelines
 - Downgrading of codes/services (which also impacts other procedure coverages)
 - Nitrous coverage
 - Implant coverage
 - Same day consult and extraction guidelines
- Insurance companies may downgrade codes, of which most of times our surgical and professional expertise disagrees. However, if these codes are downgraded based on the review of the insurance company, this could heavily impact the overall financial breakdown of the patient vs insurance company. This possible downgrade could also impact other procedure code coverage for complimentary procedures required for which the patient may become responsible.
- We will calculate an estimate of patient responsibility based on the patient's respective insurance plan. We require patient payment in full at the time of the procedure.
- Once all payments have been made by your insurance company, the balance on the account is the full responsibility of the patient.
- There are other disclaimers not laid out in the enclosed for which our office is not responsible.