

9

SECRETS

dental insurance companies
don't want you to know



HIDDEN FACTS
YOU CAN'T
LIVE WITHOUT

CUSTOM DENTAL
Cares 

Before I share with you the **9 Secrets Dental Insurance Companies Don't Want You to Know** and the solution, I must clarify what dental insurance really is and what it is not. First, what it is not. Dental insurance is NOT like medical insurance. Typical medical insurance not only covers preventive care after a small co-pay, but also covers you through catastrophic events. Dental insurance covers most preventive services to some extent after co-pays and deductibles **BUT NO DENTAL INSURANCE COVERS MAJOR DENTAL CRISIS or CARE.** I'll explain later how insurance companies get around this. My purpose in writing this article is to equip you on what dental insurances will and will not cover and why, and what you can do to protect you and your loved ones. So here we go.



Who really makes the decisions about the quality of care you receive?

People have come to believe that their care is restricted by dental insurance companies. Let me share why that might not be a good philosophy.

Unlike medical insurance, which started being offered in 1850 by the Franklin Health Insurance Company of Massachusetts, Dental Insurance is a relatively recent phenomenon. Dental insurance was first introduced in California in 1954, and quickly rose in popularity. From the beginning the primary purpose for any insurance company was NOT to protect the insured but to make money for the company. They make their money by collecting more premiums than they pay out. By the 1970's, dental plans were widely available. The first plans



established usual and customary fees for the area, and would pay (typically) 100% of preventative care, 80% of minor dental work (such as fillings) and 50% of major work (like crowns, bridges, etc.) up to \$1,000 per year. Then came Preferred Provider Organizations (PPO).

PPOs were a new tool to control how much insurance companies would pay out. They would sign dentists into becoming in-network providers in exchange for a reduced fee schedule. Over the years PPOs have become more and more aggressive, not only controlling the dentist's fees but also the care that they would cover. Each of these moves once again improved their bottom line. PPOs are just a branch of a much larger umbrella company. The umbrella company typically covers medical also. Insurance companies took a beating with the advent of the Affordable Care Act. So to tighten the belt and stop the bleeding they proceeded to squeeze as much profit from the dental side as possible. This is why the number of in-network dentists has been on the decline since 2011. To give you some perspective in 1970 the cost of an average new car was \$3,542. The average price today is \$33,560. The average crown in 1970 was \$120. Today it is \$1,200. If dental insurance would have kept up with their annual maximums, today annual maximums should be \$10,000. Do you see the problem? Don't be surprised if one day the closest dentist in your PPO coverage is in the next state.

If you rely on PPOs to dictate what is best for you and your family, remember that it will be bean counters and investors not a licensed dentist making those decisions.



2 Preventive care is controlled by insurance companies and it is detrimental to your health.

Experts agree that routine dental exams and regular cleanings prevent the incidence of higher-cost treatments such as periodontal surgery, root canals, extractions, tooth replacements and fillings. However, insurance companies ignore the experts and continue to reduce coverage on preventive services.

Let's discuss the danger in that. First let's consider gum disease. Research shows that the presence of gum disease increases the frequency of diabetes, heart attacks and early onset of Alzheimers. People who have the genetics and lifestyle that contribute to gum disease need to be monitored more closely. Yet PPOs continue to slash coverage on the necessary treatment. They limit the visits to as few as one covered appointment per year and restrict some tests and x-rays necessary to monitor your progress to once every five years. Can you imagine if you were a cancer survivor or a patient with acute high blood pressure having such restrictions?

Next let's look at tooth decay, jaw bone degeneration and bone abscesses. These degenerative processes can be detected early by x-rays and can only be corrected before they become devastating. PPOs continue to restrict coverage on x-rays to the point some can't be taken but once every five years. Do you know jaw cancer can destroy a jaw and a person's life in less than five years? But that doesn't bother insurance companies as bad as the thought of losing some profit.

I have had patients come into the office with a painful abscessed tooth two weeks after their 6-month re-care visit. The reason the problem was not previously detected was that insurance companies would not cover adequate x-rays and the patient decided the insurance company knew best.

3

Best care options are frequently denied.

Many times when your dentist is designing a care plan for you; you and he might like to consider optimal care that would

include treatments that the insurance company refuses to cover. Your choice is to do what is best with little or no insurance coverage or accept the care that is covered at 50% or less and live with the inconvenience of coping with the outcome. I have patients who live with pieces of plastic in their mouths, catching food, causing mouth odor and promoting more dental disease because that was all the insurance company would cover.

The question becomes “How many years have the insurance executives in fancy boardrooms spent in dental school? What are their qualifications to decide your care?”



were covered, the insurance company will NOT pay claims on replacing them. I have had many patients disappointed because they believed that dental insurance companies would help them finally restore their confidence with a healthy smile, only to find out they had not read the pre-existing condition clause.

4

Hidden costs with insurance with deductibles.

In 1970 dental insurance companies typically covered 100% of preventive services

(with fewer restrictions than today) and after a \$50 deductible would cover 50 to 80% of all other work. Today many insurance companies have deductibles as high as \$200 but let's assume it is \$50. They may say your preventive is covered at 100% but in the small print, it says you must pay the deductible first. So if a cleaning and x-rays come to \$200, you will pay \$50 first then they will cover 100% of \$150. That would be the same as covering your preventative at 75%. That's pretty sneaky in my books.

6

Waiting periods can jeopardize your health.

Many insurance companies have

waiting periods before they will cover certain dental procedures. Minimally this creates an inconvenience or worse it can be detrimental to your health. I have had a patient delay getting a root canal until her insurance would cover the care. Ultimately she ended up in the hospital with a life-threatening infection and eventually experienced a stroke from the accompanying high fevers. Waiting periods promote health risks to you and higher profits for insurance companies.

5

Correcting pre-existing conditions is frequently not covered.

Although dental insurance companies claim to cover major reconstructive dental procedures

like replacing missing teeth with removable partial dentures, dentures, bridges and implants, beware of the little clause covering pre-existing conditions. What this means is if a tooth was missing before you



Many dental insurance companies create a paperwork barrier to

processing your claim.

Lost coverage requests and insurance claim denials are standard operating procedures with most dental insurance companies. It is called stalling as long as you can. There are only two things that can happen with that game. The dentist gives up on collecting the money he earned and cuts his losses. Or the insurance company gets to keep his earned money a little longer to invest it somewhere else. When a claim is denied or ignored, it is not uncommon for a dental employee to be on hold for over 30 minutes trying to recover it. If a dental office has 16 unpaid claims, you can see the dentist will have to hire someone full-time to do nothing but listen to elevator music while trying to recover the money the office has already earned. Some dental offices have a policy that if they don't get paid by the insurance company within 60 days, you will pay and join them in the fight to recover your insurance benefits. How well do you like elevator music?



Braces are seldom covered by insurance companies.

Although experts know that crooked teeth not only cause psychological and social problems,

crooked teeth promote dental disease. It just makes sense when teeth are bunched up and growing in different directions that it is challenging if not impossible to keep them clean. Food trapped between crooked teeth causes tooth decay, gum disease, and bad breath. Many insurance companies dodge the coverage for correcting crooked teeth with the pre-existing conditions clauses. The few companies that cover the correction usually pay as low as 20% of the fees, leaving you with the rest. You will be disappointed if you depend on your dental insurance to straighten your smile.



Cosmetic care is never covered.

In today's competitive world; jobs, opportunities, and even romance can be affected by your smile and how you feel about it. Insurance companies don't care. If you have multiple cavities on the front teeth, the solution is that they will pay for white fillings. Although white fillings are not bad, even the best white fillings microscopically look like sandpaper as compared to tooth enamel. So imagine what happens when you eat cherry pie or have a glass of red wine. Yep, you've got it. White fillings turn a light shade of pink. Pink fillings might work during breast cancer awareness week, but for the other 51 weeks, it is not so cool. Also, I have seen white fillings catch food between the teeth promoting tooth decay on adjacent teeth.

I had patients who have let insurance companies influence their decision on accepting large white filling up front only to come back

later regretting their decision. Many decide to pay out of pocket to do it right. Although they are much happier today, they paid a hefty price. They paid the deductible and co-pay for the fillings and then for the full coverage porcelain crowns. Plus they had to go through an additional dental procedure.

I can't count the number of times insurance companies have declined to pay for more comprehensive and aesthetic procedures. They don't mind if their customers experience the consequences of bubble gum and bailing wire dentistry as long as they can experience more profit.

I hope you feel more equipped with an understanding what dental insurance really is and what it is not. At the top of this report I promised you a solution to this irritating problem. So here it is.



Solution: Join others who are reaping the benefits of the Custom Dental Smiles Club. It is not a dental insurance plan; however, it does give you 2 FREE COMPLETE exams, ALL NECESSARY x-rays and 2 FREE Cleanings per year and a savings of thousands of dollars on other services. And the BEST News is:

- NO yearly maximums
- NO deductibles
- NO claim forms
- NO pre-authorization requirements
- NO health questions
- NO one will be denied coverage
- No waiting periods (immediate eligibility)
- FREE consultations

All of this for *62 cents or less a day*. All savings go directly back to our patients, no insurance company middlemen. With the **Custom Dental Smiles Club**, investment bankers and equity firms will no longer determine your care. Finally, you and your dentist are in control.

To find out more about the **Custom Dental Smiles Club** call our office for more information.

This is why we do what we do...

Custom Dental runs a top notch dental office and delivers with an incredible staff. I have never felt more welcome walking into a dentist appt. Their approach to serving the patient was different than my past experiences with run of the mill dentists (most of whom are aging and stick to out dated methods of running a practice). Their dental savings program had great value and really worked for those like me who don't want to pay a dental premium for insurance. I highly recommend his practice to anyone needing to find a reliable dentist.

- Ryan Baserra

Hi. I have had the pleasure of having a full cleaning and exam and also just had a root canal build up and crown on a tooth that has been hurting. This was such a warm and inviting and gentle fun environment. I am so happy to have such a great Dentist and great group to work with. You're an A+ super team. I will refer you to all my family and friends. Custom Dental can offer you a savings policy if you don't have dental insurance. Do it! I have saved over \$500, so far. It will include 2 free cleanings, exams, x-rays, and much much more. Tell them I sent you. They are amazing.

- Elizabeth Truitt

Custom Dental and his team are awesome! My brother went in for his first visit in 10 years because of a toothache. We don't have dental insurance but Custom Dental told us about the savings plan. We saved almost \$1000 at his FIRST visit. Thank you!

- Azucena Rodriguez

I have so many good things to say about the Savings Plan! I will keep it short, but I love that I get to save 20%. Such great service! Thank you all!

- Richie-Sarah Makinde

Wow, found out that I needed three implants. Not what you want to hear. Talked to the treatment coordinator and she told me about how much I could save by enrolling in the Savings Plan. After calling my husband, I took the plunge and has it been worth it! Can't tell you how happy I am to have a discount program that actually saves me money! My son now needs braces and I'm grateful that I will be getting a discount.

- Teri Moore