



**Patient Notification for Being an Out of Network Provider with Insurance Companies.**

We are informing you of a change in our Insurance network at Kaufman & Kaufman Smile Design Studio.

As of January 1, 2018, our status has changed with BCBS, United Healthcare, United Concordia, Humana and all subsidiary companies using the Dentemax and DNOA Fee Schedule. **We are no longer in-network providers.** Although we will continue to accept the above stated insurance companies, we no longer participate with a negotiated fee. *You will be charged our fee for service and will be responsible for any balance due.* \_\_\_\_\_ (initial.) As a courtesy to our patients we will submit your claim and bill you for the remaining balance. That balance is due within 30 days of insurance payment. We will also continue to submit pre-treatment estimates for our patients and notify you with the patient portion amount, as well as reviewing the treatment plan.

If you carry dental insurance through BCBS Anthem, payment will be due at the time of service due to Anthem reimbursing the patient directly. \_\_\_\_\_ (initial).

The change on *your* end is that you will be subject to slightly different rates for your portion of care.

This decision is based on our desire to remain as your doctor and to provide you with the highest level of care. We are committed to meeting your needs based on our professional judgment which is based on education and experience rather than the dictates of insurance companies.

I, \_\_\_\_\_, have been advised that Kaufman & Kaufman Smile Design Studio, LLC is an **out of Network Provider** with my dental insurance. I understand that there will be a higher patient portion due once the insurance company has made payment on a claim. The balance due is my responsibility and payment is due within 30 days of payment by the insurance company. This out of network agreement is in conjunction with Kaufman & Kaufman Smile Design Studio, LLC Financial Policy.

Guarantor: \_\_\_\_\_ Date: \_\_\_\_\_