

**New Dental Insurance Information**

**Basic information we require to direct bill:**

Insurance holders name \_\_\_\_\_

Date of birth \_\_\_\_\_

Insurance Company \_\_\_\_\_

Policy # \_\_\_\_\_

ID # \_\_\_\_\_

Basic % \_\_\_\_\_ Major % \_\_\_\_\_

Deductible \_\_\_\_\_

Limits \_\_\_\_\_

How frequently can you come for check-up and cleanings (recall exams)?

\_\_\_\_\_

Limit for Scaling \_\_\_\_\_

Any other information?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In most cases, your dental insurance will not provide us with information of your plan. The more information you can provide to us, the less likely you will have a surprise financial bill. As a courtesy to our patients, we direct bill your insurance. Ultimately, it is the patient's responsibility to pay for anything not covered.