



**Valley  
Dental**  
**Insurance Filing Policy**

As a courtesy to our patients, we offer to file claims to in-network insurances on your behalf. As the insurance holder/patient covered under the plan, it is up to you to be aware of dental coverage, benefits, and how it is managed. We are in-network with over 100 insurance companies, each with their own separate plans and coverages. It is impossible for us to know everything about your plan. This form serves as an agreement with our office staff to do our best to utilize your insurance, get you the best coverage, and for you to understand that insurance is its own entity that you are responsible to have a general knowledge and understanding of.

1. If insurance information/card is not provided or cannot be verified, you will be expected to pay out of pocket in full for and procedure(s) day of.
2. Not all insurance plans cover 100% of procedures.
3. Dental insurance benefits are not determined by our office.
4. You are responsible to know about and pay for any co-pays & deductibles.
5. You are responsible for keeping the office up to date with changes to insurance.
6. Any estimate that our office staff provides to you is just that, an estimate.
7. Pre-determinations cannot be sent to insurance for plans under \$1000 and take 4-6 weeks to process.
8. Any amount not covered by insurance is your responsibility, regardless of previous estimates.
9. Patient portion estimates are due date of service.
10. Our office can only work as fast as insurance, but we do our best to resolve claims and predeterminations as quickly as we can.

By signing this document, I agree to the above listed terms and do ask that Valley Dental provide me the courtesy of filing to my insurance on my behalf. Without signing, I agree to pay up-front for all procedures and file to insurance myself.

\_\_\_\_\_  
Signature of Patient or Guardian

\_\_\_/\_\_\_/\_\_\_  
Date