

# Savor the right to choose

Dental insurance is a “benefit” offered by employers because its value is misunderstood. Unlike conventional insurances like fire, liability, and collision that are based on a gamble, dental insurance is used by nearly everyone. In conventional insurance, the insurance companies bet that claims will be less than the premiums received. Dental insurance claims almost always are maximized, creating an entirely different type of business dilemma. In order to “beat the odds”, dental insurance companies play all kinds of games to avoid paying for claims. Quite often, legal language that is too convoluted for most people to understand allows dental insurance companies to deny payment for legitimate dental therapy diagnosed properly by a qualified clinician. Until the huge recent legal victories of organized dentistry against major dental insurance companies, misleading language claiming that dentists were charging too much for treatments rendered was prevalent on statements from insurance companies. Now, claims are simply denied with obtuse



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reasons stating that procedures are not covered because of specific details hidden in each individual employer’s policy.

The reality is that dentists generally charge ethically for services rendered, and dental insurance companies do not pay fairly for the premiums that they charge. Interestingly, in 1970 the average annual dental insurance maximum was \$1000. In 2006, the average annual dental insurance maximum was still \$1000, but premiums paid have increased exponentially since 1970!

Another common tactic is for insurance companies to “require” patients to go to “provider” or “network” dentists for “better reimbursement”. There are few closed insurance plans currently in existence where patients must go to a specific dentist. Changing dentists because an insurance company recom-

mends it is foolish and, quite frankly, irrational. Remember, insurance companies always have their own financial interests as a priority and not the patient’s well-being. Surveys suggest that the average dental patient changes insurance companies every five years. Insurance companies know this. It may be reasonable to assume that they would only care about authorizing payment for dental treatment that would last until the next company assumes financial responsibility. In other words, why would an insurance company want to pay for a crown, for example, that may last for 15 or more years rather than a large filling that may only last five or six years and cost them much less?

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