



East Credit Dental Center
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Facts every insured patient needs to know

You may be asked to provide the following information when calling your insurance company

Patient's Name:

Date:

Insurance Company:

Telephone:

Name of Subscriber: D.O.B.:

Employer: SIN#:

Policy #

Certificate # Division #

Questions you should ask about your dental coverage

What is the annual maximum allowed per patient?

What is the anniversary date of the policy? i.e.: Jan. 1st (Calendar Year) or benefit year

Is there an annual deductible? If yes, how much is it? Per Person \$ _____

Family Max \$ _____

What year's Fee Schedule are dental benefits paid on? _____

How many units of scaling and/or root planning are covered:

_____ Scaling Units per calendar year

_____ Scaling Units per rolling 12 months

_____ Scaling Units per benefit year

How many Recall appointments are allowed annually?:

every 6 months every 9 months every _____ months

What percentage of coverage is allowed for the following:

Diagnostic _____% Preventive _____% Restorative _____%

Endodontic _____% Periodontal _____% Major _____%

Major:

Crown and Bridge Yes No

Dentures Yes No

Extraction Clause: Does a tooth have to be removed while insured? Yes No

Are resins covered in molar teeth? Yes No

What is the annual maximum for major treatment?

Is Endodontic and/or Periodontal treatment classified as basic or major treatment? _____

What amount of the Maximum is used to date for the current year?

\$ _____

When was the last New Patient or Complete Oral Exam done? _____

When was the last Recall Exam done?

When was the last Full Mouth Series or Panorex taken?

You are responsible for keeping your insurance information up-to-date. Please notify us of any changes to your dental coverage.