

## Contracted Dental Insurance

As a courtesy, OSA will file claims with any insurance plan. If we are not contracted with that plan, we will inform the patient that their insurance requires them to see one of their plans participating providers.

OSA is contracted with the following Dental insurance plans:

**Aetna PPO and Assurant PPO—Contracted through (DHA) Dental Health Alliance**

**Alpha Dental** - 20% discount plan, patient must pay in full at time of service.

**American Dental Group** – 20% discount- must pay in full at time of service.

**American National Dental Services** – discount plan requires payment at service.

**Ameritas PPO/ Principal**

**Anthem Blue Cross Blue Shield of CO** (not medical---NOT ALL BCBS dental plans)

**Careington Care 15% Discount**

**Cigna DHMO** - *must have referral*, patient has a co-payment

**Cigna DPPO**

**Cigna Discount Plan ( Cigna fee schedule)**

**Delta Dental plans with premier benefits** (*not DPO, EPO, Tmobil or Medicare Supplemental plans*)

**DenteMax /Companion**

**Direct Dental Plan** (discount plan)

**GEHA Connection Dental Network/Dental Select Platinum**

**Guardian DentalGuard PPO**

**Metlife**

**PacifiCare Dental PPO**

**Sunlife (Assurant) PPO**

**United Concordia**

**United Healthcare—Contracted through Connection Dental**

OSA is **not** contracted with: (OSA will still see these patients on a fee-for-service basis)

Medicare – pt must sign “Private Contract”

Secure Horizons

Tricare

Medicaid – *Due to Medicaid guidelines, OSA will not treat Medicaid Patients*

**\*If a patient is being seen for TMJ or pathology, these services will probably fall\* under the patient’s medical insurance. The patient should call their insurance plan to verify if OSA’s services will be considered an “in-network covered benefit.”**

***\*We offer patient financing thru Care Credit\****

***LAST UPDATE 04/06/2017***