



ORAL SURGERY ASSOCIATES OF COLORADO SPRINGS, P.C.

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.

Ameritas PPO/ Principal

Anthem Blue Cross Blue Shield (not medical---NOT ALL BCBS dental plans)- Anthem Dental PPO Plus, Dental Blue 100/200/300, Dental Complete, Dental Prime

Careington Care Discount

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

Cigna PPO

Cigna Discount Plan - must pay in full at time of service.

Delta Dental plans with premier benefits (not DPO, EPO, T-Mobil)

DenteMax /Companion/ Anthem Dental PPO+, Dental Blue 100/200/300, Dental Complete, Dental Prime, Lincoln

Direct Dental Plan (discount plan)

GEHA Connection Dental Network/Dental Select Platinum/ Dominion National (some)

Guardian DentalGuard Preferred

Humana

Sunlife (Assurant) PPO

United Concordia

United Healthcare—Contracted through Connection Dental/Dentemax

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 – In addition to Medicaid, pt must have commercial insurance and sign a “Private Contract”

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****

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