

Patients' dental misconceptions

As I travel and interview dozens of strangers monthly, it amazes me how many people in the general public have total misconceptions regarding dental insurance and dental care in general. Some of these misconceptions include:

* I am self-employed and have no dental insurance; therefore I don't go to the dentist unless I have a problem.

* I can only do what my insurance plan covers. If it is not covered, I must not need it!

* I would never spend a lot of money on my teeth. I'll just get them all pulled so I'll quit having dental problems.

* My husband's company just changed insurance plans. I must find a new dentist because Dr. X is not on the plan's list of providers.

The following patient education cards are now available to hand out or mail to patients. The patients' inquiries are answered completely, which improves case acceptance and clears up many misconceptions patients have, even for those who do not ask!

Pertinent Answers Regarding Dental Insurance

Q: Our Company just changed benefit plans. I really like my dentist. Does this mean I must change to one of the dentists on the provider lists?

A: Patients are being misinformed regarding these issues. In most cases, the patients have choices of WHO provides their care. The only thing that changes for these patients is the way in which their accounts are paid. The practices most often still file the claim forms as a courtesy. Using electronic claims gives a faster turnaround of the funds directly to the patients. The patients normally prefer to use their credit cards for payment and by the time the credit card statement arrives, the reimbursement is back to the patients.

In some treatments, there is a difference in copayments paid by the patients but in almost every instance, the patients would rather pay this difference than change dental practices and chance not having the same level of care or service.

Q: I'm self-employed and do not have dental insurance; therefore I don't go to the dentist unless I have a problem. Isn't this the norm for most people who don't have dental insurance?

A: This misconception by patients is one of the biggest problems dental practices face across the country. Dental insurance is an appeasement benefit, which in most cases is a joke. The annual maximum allowable benefit has not changed on most plans in over 30 years. Fees then were a third of what they are today. Oftentimes, the premiums paid by the patient or their employer cost more annually than their total benefit. If we didn't have food insurance would we still eat? The answer to that is simple. Good dental health is as important as fueling one's body, yet many people use being nondental-insured as their excuse to neglect their teeth. Preventive dentistry is not expensive, neglect is!

Q: I cannot/should not have anything done to my teeth that is not covered by insurance plan, right?

A: Many patients use dental insurance as their crutch. They have the misconception that if it is not covered on their plan, it must not be a necessary treatment, or it is out of reach financially. Following the advice of a benefit plan company that is in business to save money by restricting care is an unwise decision. Listening to your dentist and dental health care team who are in business to save your natural teeth for a lifetime is a much wiser choice.

Q: Why doesn't my insurance cover this?

A: Dental insurance is meant to be a partial reimbursement for basic preventive and basic restorative care. Ninety-five percent of all adults need more than basic dentistry. Taking care of small dental problems before they develop into major dental emergencies is a goal every patient should have. Having a dentist who performs a comprehensive oral health examination and one who presents a complete treatment plan that will restore the mouth to an optimal level is key, regardless of who pays for the service. The same people who complain about the fees involved in total dental care are the same people who think nothing of buying big screen TVs, eating out six times per week, getting a new car or truck every other year and taking expensive vacations. Smart consumers know that you get what you pay for, and having your priorities in the right order, includes having a clean, healthy and attractive smile.

- Linda L. Miles

Healthy Tips



8 Tips on Dietary Fiber

1. Keep in mind that a high-fiber diet may tend to improve:
 - Chronic constipation
 - Coronary heart disease
 - Hemorrhoids
 - Diabetes mellitus
 - Diverticular disease
 - Elevated cholesterol
 - Irritable bowel syndrome
 - Colorectal cancer
2. Try to double your daily fiber intake.
 - Average American intake: 10-15 grams per day
 - Recommended intake: 20-35 grams per day
3. Understand what fiber is, where it comes from:
 - *Insoluble fiber*
 - Cereals
 - Wheat/wheat bran
 - Whole grains
 - *Soluble fiber*
 - Brans
 - Fruit
 - Oatmeal/oat bran
 - Psyllium
 - Vegetables
4. Substitute high-fiber foods for high-fat and low-fiber foods.
5. Keep your daily fiber intake stable. Consider a fiber supplement if you:
 - Travel
 - Eat away from home often
 - Find it difficult to get enough fiber through food choices alone
6. Don't shock your system: Increase fiber levels in your diet gradually.
7. Always increase fluids (water, soup, broth, juices) when you increase fiber.
8. Add both soluble and insoluble fiber, from a variety of sources.