



Okamoto Dentistry

September 2019

OUR MISSION IS TO PROVIDE EXCELLENT DENTISTRY THROUGH THE COMPREHENSIVE CARE OF OUR PATIENTS IN ORDER TO IMPROVE THEIR QUALITY OF LIFE



San Francisco State University has a new student from the Okamoto Family! Ethan Okamoto started SFSU at the end of August and is part of the School of Cinema. We went up as a family and helped him move into his apartment style dormitory. He is enjoying college so far and even reports he has started eating vegetables!

Out of Network – What this means for you

Okamoto Dentistry is committed to providing the highest quality dentistry to all patients. We are an “Out of Network” provider on any PPO insurance product. This means that as long as you have an “Out of Network” benefit associated with your PPO insurance, we can provide you with our exceptional dental care. We will bill your insurance on your behalf and the insurance will send us a check according to your benefits and then you will be responsible for the “patient portion” remaining. With Delta Dental, we still will bill your insurance on your behalf, but the “Out of Network” benefit will come to you directly as a reimbursement. This is why we will collect the entire amount for dental services provided as if you were a cash paying patient. It usually takes about two weeks for your reimbursement check to arrive at your home. If it takes longer than this, then please contact us so that we may research when you can expect your reimbursement. As always, we will work with patients to find the best financial arrangement to be able to complete your necessary dentistry.

Okamoto Dentistry

Office Phone
626-440-9095

Address
**Cotton Medical Building North
50 Bellefontaine Street
Suite 204
Pasadena, CA 91105**

Website
www.OkamotoDentistry.com

Doctors
**Geri Lynn G. Okamoto,
DDS
Christopher P. Bigley, DDS**

Hours
Mondays 7am to 5pm
Tuesdays 7am to 5 pm
Wednesdays 7am to 5 pm
Thursdays 8 am to 5pm
Fridays 7am to 1:30pm



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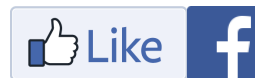
Use it or Lose it- End of the year Insurance Benefits

As we head toward the end of the year, it is a good time to check if you have any outstanding dental treatment that needs to be done. If you have dental insurance, you may have some remaining benefit that you can apply toward these procedures so that you maximize your dental insurance benefits and don't leave "money on the table." If you have some procedure you have been waiting to complete, please contact us so we can check if you may have remaining insurance benefits that can help with the cost.

**Let The Word Out—
Do you know friends or family that need a new dental home?**

The greatest compliment is the referral of your family and friends. We are always happy to have new additions to our dental family. If you know of someone that is looking for a new dental home, please think of us. We appreciate your continued loyalty and thank you for the opportunity to provide you with the best dental health care.

Like us on Facebook: Okamoto Dentistry



Review us on 

Visit our website: www.OkamotoDentistry.com

Is Dental Insurance Worth It?

Information referenced from Nerd Wallet Online

<https://www.nerdwallet.com/blog/health/considering-dental-insurance-may-not-worth/>

Dental Insurance is not a good deal if you don't use it

A majority of people underutilize their dental insurance. If you have healthy teeth and are just coming into the office for regular Dental Hygiene and Yearly check up x-rays and exams, you can add up your yearly dental expense and see if it is less than your premiums plus your out of pocket expense. Usually, the average person spends around \$400 to \$500 per year for these services. The average insurance premium per year is usually around \$300 to \$600. You will likely save money to just pay out of pocket for your dental appointments.

Dental Insurance may only be marginally a good deal if you do use it

When you pay a premium to your health insurance, it works to cover yourself against a catastrophic event. This means that if you have a major health issue occur, you pay only your deductible and a small fraction of costs above that amount; your insurance pays the rest.

This is not how dental insurance works. You pay a yearly premium for your dental insurance which on average is \$300 to \$600. This buys you a maximum amount of coverage which ranges from \$1000 to \$2000 benefit per year. Some plans have a deductible that you pay before your insurance kicks in, the insurance will pay a percentage of your treatment costs, and then you will pay the rest which is considered your "patient portion." When the payout reaches the maximum benefit, your coverage stops and you will be responsible for 100% of your costs out of pocket. The annual exams and hygiene appointments that are "included" in your plan count towards this maximum benefit.

As an example, if you needed to have a root canal and then a crown, the average cost is around \$2500. This will quickly use up your benefit amount and you will be likely paying out of pocket for a large portion of your care on top of paying for the premiums and the "patient portion."

Not only will the benefit be limited to a maximum of \$1000 to \$2000, but you may also be trading away the ability to select your dentist of choice. For routine dental issues, many of the best dental practices are no longer participating providers for insurance at all. Dental insurance could possibly save you some money, but it is also possible that you may be better off paying out of pocket for your care. Look at your dental insurance benefits and what you spend on dental care each year, then decide whether it is a good deal for you instead of assuming it is a good idea because it is "insurance."