

Joseph M. Crow, D.M.D., P.C.  
Family Dentistry  
4634 Bit and Spur Rd  
Mobile, AL 36608

**NON-COVERED SERVICES POLICY**

As your dentist, I want to provide you with your choice of the best dental services available for your care.

However, you may select certain services that are not covered by your dental insurance contract. In such cases, you will be responsible for the cost of these services, or the difference of what your insurance does not cover. For example; most insurance contracts will only pay for amalgam (silver) fillings on posterior (back) teeth, though composite (tooth colored) fillings are used. In some cases, there will be an additional lab fee for the type of crown we provide. This will be patient's financial responsibility, as this is not a covered insurance benefit. Often, the best course of treatment for the patient is to make a special type of denture. In most cases, insurance companies do not take this into consideration and only pay for basic dentures. In addition, cosmetic procedures will not be covered by your insurance policy and you will be responsible to pay for the procedures. If treatment is performed and the patient's insurance policy does not pay, it is the patient's financial responsibility to pay for the services rendered.

Let me reassure you, I will only perform treatment that is necessary and appropriate for your care. My staff does their best to estimate what your insurance contract will pay for services rendered. However, this is only our best estimate and if the insurance company does not pay for the services, the financial responsibility will fall on the patient to pay the balance in full.

If you have questions, someone in my office will be happy to assist you. Thank you for understanding.

Sincerely,

*Joseph M. Crow, D.M.D*

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**To be completed by the patient:**

I have read your policy and agree, as indicated by my signature below, to pay for the services that are not covered or for which payment is not allowed by my contract.

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Signature of Patient/Responsible Party

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Date