



## Frequently Asked Questions

### How do we get started?

The first step is to make sure the patient is a good candidate for a release. The front office will give the parent a questionnaire to complete. If the patient is indeed a good candidate, we will schedule the patient for a consult. Before the consultation, the front desk will send over videos of the procedure being performed and the post op exercises. We schedule enough time during the consult to complete the release if the parent desires. The procedure is completed using a Light Scalpel CO2 laser, which provides minimal to no bleeding, excellent visualization, and a quick procedure.

**Parents are allowed to be with their child during the consultation, but during the procedure, due to laser safety, parents will exit the procedure room and wait in our waiting room.**

### How do we evaluate for tongue and lip ties?

We utilize a questionnaire to identify all symptoms that could be related to a tongue-tie. We then interview the parent to document the child's history and discuss any functional issues. After compiling this information, we perform a full evaluation of the child to determine the degree of restriction. If a restriction does exist, we take photos inside the mouth with our special camera to make sure we can visualize the unique structure of the tongue- or lip-tie before developing a plan for treatment.

### **One provider says my child does have a tie, but another says my child does not. What should I do?**

Tongue-ties and lip-ties can be tricky to diagnose properly, and training in this area is lacking among healthcare professionals. The subject is not covered in dental or medical schools, or even in residency programs. A provider must seek out additional training and continuing education to be up on the latest trends and diagnostic factors. Dr. Mary has received additional training and continues to pursue additional education. We are happy to evaluate your child and, if there is a restriction, give you our recommendation for treatment. Often, parents will sense that something is not right, even after another provider has told them there is no restriction. They come to us for a second opinion, and we evaluate the child, identify the restriction, and provide treatment. After the child receives the care they need, the issue resolves.

### **Is the procedure covered by insurance?**

This is an important concern for all our families. What we find is that some dental insurances cover the procedure, but some dental insurance companies will deny the procedure, classifying it as a congenital medical condition. We are happy to conduct a predetermination on the patient's behalf to determine the benefits. If we do not have the appropriate time to file the predetermination, or the insurance does not cover the procedure, then patients will pay out of pocket before treatment is completed and will be

informed of any charges before they are due. We do not file with medical insurance, and we are considered out of network with health insurance companies since we do not have any contracts with them. Please feel free to ask our team if you have any questions, and for the current investment for this procedure and consultation.

### **What if my newborn has not been added to our dental plan yet?**

We highly recommend calling your dental insurance to ask if code D7961 (upper frenectomy) or D7962 (lower frenectomy) is a covered benefit on your dental plan. If so, then contact the human resources department and have your infant added to the dental plan within the eligible time period. It may take up to 30 days for a newly added dependent to show on a policy for us to file a claim. In this case, payment is due upfront, and when the dependent is showing active, our office can file a claim and have the reimbursement sent directly to you.

### **How much is the procedure, and how will I pay for the procedure if my insurance does not cover it?**

Our payment options include cash, credit card, and CareCredit, which offers no-interest financing for six months. Payment in full is due at the time the exam or procedure is performed. The procedure is an investment in your child's current and future health, as we see issues with breastfeeding, bottle-feeding, eating solids, speaking, and sleeping resolve after the procedure. If the child needs any buccal cheek ties released, we do not charge an additional fee for these. We also do not charge for any follow-up visits. Consultation fees are \$192.00, and our fee for a release is \$655.00 per area.

### **My predetermination was approved, but my insurance denied paying for it when the claim was submitted. Why?**

Insurances have a disclaimer that states predeterminations may not guarantee payment. Actual benefits will be determined when the services are completed and submitted for payment. It is unfortunate, but this can happen. Each plan and carrier is different, and they have guidelines and stipulations for each code that may not be known when a predetermination is processed. Codes are evaluated differently when they are submitted for final payment.