



River City

Oral & Maxillofacial Surgery

Mark Haverkorn, DDS, MD
5418 N Loop 1604 W Ste 101
San Antonio, TX 78249

210-778-0002

www.RiverCityOMS.com

@RiverCityOMS

Dealing With Your Dental and/or Medical Insurance Company

Dear Patient,

River City OMS (RCOMS) is dedicated to excellent care and reasonable prices. One way we keep prices low is by not hiring employees who only deal with insurance companies. We are out of network with all medical and dental insurance companies.

We realize many of our patients do have insurance. We will provide you with a “Super Bill” which has the key information required for you to file a claim with your insurance company:

- Date(s) of service
- Location(s) of service
- RCOMS address
- RCOMS phone number
- RCOMS federal tax ID number
- Dr. Haverkorn’s NPI number
- ICD-10 diagnostic code(s)
- CPT (medical) or CDT (dental) treatment code(s)
- Certification of the amount you paid

Most dental insurance companies will accept the Super Bill from you, their insured, as the claim. Medical insurance companies may request you complete additional forms. Please check your insurance company’s website or call them and inquire about how to file a claim for “out-of-network” treatment and follow their instructions.

Every time you speak to an insurance company employee you need to make notes and keep them in a medical file forever. Make sure you record the:

- Date & time of the call
- Name of the employee you spoke with
- “Reference number”, aka the serial number, for the call. Your insurance company gives a serial number to every call. The reference number for the call is more important than anything else.

Your insurance company may say that treatment is covered as long as we code it correctly or it is “medically necessary”. The insurance companies will often tell you that I just need to declare your surgery as medically necessary or code it appropriately. This is a half-truth designed to appease you.

Regarding medical necessity, your insurance company will have a definition of what they consider medically necessary. Medical necessity is NOT dependent on my opinion. Ask your insurance company their specific criteria to determine medically necessary. They may require a certain diagnosis and treatment code before they will consider something medically necessary.



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Regarding coding, we can only code the truth. We cannot use a code that does not apply to your case no matter with your insurance company says. Intentionally miscoding is insurance fraud. At times insurance companies almost seem to be encouraging us to commit insurance fraud!

Finally, we can help you deal with your insurance company(s). We do charge a fee for these services:

Assist with completing an out-of-network insurance claim form, 3 business day turnaround	\$50
Preauthorize or predetermine a benefit, can take 1-2 month for insurance to respond.....	\$50
Doctor letter to insurance company, 5 business day turnaround	\$100
Additional miscellaneous forms, 5 business day turnaround	\$15 per page
Expedite turnaround of any form or letter	\$50/each

Thank you!