Dear Patient,

Starting May 1, 2024 Blue Cross & Blue Shield will no longer send payments to us on your behalf. They will pay you directly in an effort to force our hands to enroll in their network. If you are not covered with Blue Cross & Blue Shield this letter does not apply to you.

Why doesn't my dentist participate in my network?

Many restrictions are placed on dentists by being in "network" plans. Participating in dental networks will affect my relationship with my patients. Patients trust me to be their doctor—not the insurance company. I want to provide the dental care that is needed to all my patients without any insurance guidelines & restrictions. I believe in empowering patients to make their own decisions concerning their dental health.

I am a patient advocate, and I practice patient-focused care. I want to do what is best for the patient, not what is best for the insurance company shareholders. Going In-Network will negatively affect the quality of care we provide, the materials we use, as well as the services we offer, and I believe that you should have the freedom to choose the level of care you receive. As some of you know at the age of eighteen I had an accident and my front teeth were knocked out. My insurance at the time wanted me to extract all my teeth and put me in dentures. I made the decision with my Dental provider to do what was best for my oral health & save my teeth.

What it means for you

We will continue to provide the state of the art services that you have come to expect from us, and will continue to submit claims on your behalf. When you receive your insurance payments, we will need a copy of the explanation of benefits and a check for the amount paid. Any adjustments will be made once that payment is received. Our hope is that this arrangement will help all our patients to continue receiving the treatment and care needed for their oral health. We hope that we can work together with this new change that your insurance has made.

Best Regards,

Dr. Trey Vereen