

**IMPORTANT ANNOUNCEMENT  
FOR ALL NINTH DISTRICT MEMBERS  
RESPONDING TO INSURANCE  
COMPANY REFUND DEMANDS**

**From The Desk of Judith Shub, Ph.D., Assistant Executive Director Health Affairs, NYSDA.**

June 21, 2001

NYSDA has received numerous calls over the past month from members that have received letters from dental insurance companies. These letters state that the company has determined that monies sent to the dentists on their patients' behalf should be returned to the insurance company. The insurance company has determined that these individual patients were not in fact covered by the company at the time it made payment on their behalf to the dentist. Many of these dentist are asking NYSDA for advice about their rights and options.

In situations in which the dentist is *not* a contractor with the company or any affiliated benefitrelated companies [e.g., IPAs, PPOs, HMOs, etc.], the simple answer is that the company's issue should be addressed to its customer - the dentist's patient - directly. First of all, the company made payment for its customer and only the customer can dispute or confirm that the monies were improperly paid.

The dentist involved has several options:

1. Return the monies requested and, notifying the patient of the company's request, bill the patient directly for the treatment provided.
2. Throw the letter in the waste basket.
3. Respond to the company directing them not to contact the dentist again and to take this matter up directly with their customer [send a copy to the patient as well]

Dentist receiving these letters may also wish to register complaints about the company with the NYS

Insurance Department:

Mr. Gregory Serio  
Superintendent of Insurance  
NYS Insurance Department  
Empire State Plaza  
Agency Building 1  
Albany, NY 12257