



Insurance Claim Submission Process

At Aura Orthodontics, we are committed to making your orthodontic journey as smooth as possible — including helping you navigate your insurance coverage. To better support you, we are introducing an Insurance Claims Submission Guide, designed to empower you to submit your own claims with ease while ensuring you receive the coverage you're entitled to.

By submitting claims directly, you can:

- Have full control over the process and track your claim status.
- Ensure timely reimbursement from your insurance provider.
- Receive our full support—we'll provide the necessary documents and guidance to assist you every step of the way.

This guide includes detailed instructions and tips to help simplify the process. If you have any questions, our team is always here to assist you!

We appreciate your trust in us and look forward to supporting you throughout your treatment.

In This Document You Will Find

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- [What Are Insurance Claims?](#)
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- [When are Insurance Claims Sent?](#)
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Contact Our Offices

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(604) 427-3001
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Step-By-Step Guide:

Initial Steps

- Aura Orthodontics will send the estimate to your insurance company(s) after your treatment starts.
- Once the pre-determination is received, you can submit a claim for your down payment to your primary insurance.
- If you have a secondary insurance with a different provider, then after your primary insurance pays, you can submit the down payment claim to your secondary insurance, including the paid statement from your primary insurance.

Monthly Steps

- On the 20th of each month, Aura Orthodontics will collect your monthly payment. After this, you can submit your monthly receipt to the primary insurance.
- If you have a secondary insurance with a different provider, then after primary insurance pays, you can submit the monthly receipt to your secondary insurance, including the paid statement from your primary insurance.
- Continue submitting your monthly receipts until the insurance maximum(s) are reached.
- If your primary plan reaches its maximum prior to your secondary plan reaching its maximum, you can bill your secondary plan first however, be sure to include the statement from your primary plan indicating that the dollar amount has maxed.



Orthodontic Appointment Codes

Consultation

- These codes are excluded, Aura Orthodontics does not charge for consultations

Predetermination (Pre-Approval) of Orthodontic Treatment

- 93341 Pre-determination (Pre-approval)

Payment for Comprehensive Orthodontic Treatment In-Progress (see table)

93331	Payment/Instalment for Orthodontic Treatment in Progress
93332	Monthly Payment/Instalment
93333	Quarterly Payment/Instalment
93334	One-time Appliance (applies to any fixed or removable appliance)



Additional Information For Filing Insurance Claims

Office	Scottsdale	Guildford	Langley
Company	Aura Orthodontics		
Orthodontist Name	Dr. Vishal Sharma	Dr. Julia Koo	Dr. Everett Lin
Practice Address	7192 120th St Surrey, BC V3W 3M8	405-15127 100th Ave Surrey, BC V3R 0N9	19971 64th Ave Langley, BC V2Y 1G9
Phone Number	604-593-5225	604-585-1304	604-427-3001
Unique Identification Number	100687250	102873550	102695950



FAQs

1. Why is Aura Orthodontics no longer submitting claims on my behalf?

While we are happy to assist, many insurance providers have eliminated their support for service providers making it difficult for Aura to successfully submit claims directly. The new process gives you more control and transparency over your claim status and reimbursement.

2. What documents do I need to submit a claim?

You will typically need:

- A detailed receipt of payment from Aura Orthodontics.
- A pre-determination for which Aura will send on your behalf, or supporting documents (if required by your insurer)

3. How do I know if my insurance covers orthodontic treatment?

Coverage varies based on your plan and provider. We recommend:

- Checking with your insurance provider for details on orthodontic coverage.
- Reviewing your policy documents for any exclusions or limitations.
- Aura is happy to assist in the confirmation of your coverage.

4. How long does it take to get reimbursed?

Processing times vary by insurer but typically range from immediately to 6 weeks. Contact your insurance provider for specific timelines.

5. What if my claim is denied?

If your claim is denied:

1. Review the denial explanation from your insurer.
2. Contact them to understand why the claim was rejected.
3. Reach out to us—we can help provide additional documents or guidance for an appeal if needed.

6. Can I submit my claim online?

Most insurance providers offer online claim submission through their website or app. Check your provider's portal for digital claim options.

7. Who can I contact if I need help?

Our team is here to assist you! If you need support with documents or have questions, please reach out to your insurance provider and/or the Aura Orthodontics office of which you are receiving treatment.



What Are Insurance Claims?

Insurance claims are requests made by policyholders to their insurance company for reimbursement. In the case of orthodontic treatment, insurance claims can be submitted based on your monthly payments at Aura Orthodontics. Insurance plans have both a maximum coverage amount and a percentage that they will pay. For example, if you are paying \$100.00 per month to Aura Orthodontics and your insurance covers 50% of treatment up to \$1,000.00, after submitting your monthly claim, you should receive 50% of the \$100.00, which is \$50.00. This will continue until the insurance maximum is reached (e.g., \$1,000.00 in this example). Once the maximum is reached, the insurance company will notify you that you have used all available orthodontic coverage.

Note that different insurance companies and plans have varying maximum amounts and coverage percentages. Additionally, some insurances may have age restrictions, waiting periods, and deductibles that could apply. Be sure to contact your insurance company to confirm the details of your coverage.

Please refer to the table on page 4 for additional office-specific information.

What If You Have Dual Insurance?

When you have dual insurance coverage (two insurance plans), the process of submitting claims is slightly different, but the general process remains similar with a few additional steps. The first step is to determine your primary and secondary insurance. If you are submitting a claim for a dependent, the primary insurance is the plan of the parent whose month of birth comes earlier in the calendar year, and if the month of birth is the same, refer to the earlier day of birth. The secondary insurance is then the plan of the parent whose birth month or day falls later. If both policies are under the same person, the primary insurance is the one that was activated first. If you are submitting a claim for yourself, as the patient, and have dual insurance (through your own plan and your spouse's plan), your own insurance is typically considered primary, and your spouse's plan is secondary. You can always call your insurance provider to confirm which plan is primary and secondary.



It's important to know which insurance is primary or secondary because the secondary insurance will only pay after the primary insurance has paid and will only cover the remaining balance. Here's an example:

- Primary insurance covers 50% of up to \$1,000, and secondary insurance covers 60% of up to \$2,000.
- If your monthly payment to Aura Orthodontics is \$100.00, the primary insurance will pay you \$50.00 (50% of \$100.00), and the secondary insurance will pay the remaining \$50.00, even though they cover 60%.

Once the primary insurance reaches its maximum coverage, the secondary insurance will cover up to 60% of your \$100.00 monthly payment until its own maximum is reached.

When Are Insurance Claims Sent?

At the beginning of treatment, Aura Orthodontics will send a pre-approval (also referred to as an estimate) to your insurance company, outlining the treatment details, timeline, and cost. Once the estimate is received and approved by the insurance company, the plan holder will receive a pre-determination either through their online portal or via mail which will outline the details of the coverage, for which claims should be submitted thereafter. Estimates are sent out by our office via mail (currently the only accepted method for most insurance providers), and can take anywhere from 1-4 weeks for processing, depending on the providers processing times. The estimate will need to be received by the insurance company prior to payment being issued, therefore, it is most ideal to wait for the estimate to be processed and the predetermination to be received prior to submitting your first claim. You can also call your insurance company to confirm that they have received the estimate from our office if you do not receive a pre-determination within 2 weeks, generally.

You can submit a claim for your down payment first, and then continue submitting claims for each monthly payment charged on the 20th day by Aura, up until the insurance maximum is reached. If you have dual insurance, the process changes slightly.

For dual insurance, where you are dealing with the same two providers, you can submit both claims at the same time for reimbursement. For dual insurance, where you are dealing with two different providers, you must first submit the claim to your primary insurance, then after the primary insurance has reimbursed you, you can submit the claim to the secondary insurance, be sure to include the primary insurance's statement of payment along with your down payment or monthly receipt.



Note that the secondary insurance will not pay until they have received a statement from the primary insurance—either the paid statement or the statement with the notification that the lifetime maximum has been reached. Once the primary insurance's dollar maximum is reached, you must always attach the statement indicating this when submitting claims to the secondary insurance.

Example for dual insurance:

If your treatment starts in January 2024, you will first submit to primary and then to secondary insurance. If the primary insurance reaches its maximum in June 2024, you will receive a statement from the primary insurance that indicates the maximum has been reached. In July, after making your monthly payment, you can submit the claim directly to the secondary insurance however, be sure to include the primary statement from June 2024 indicating the plans dollar maximum has been reached to avoid declines.

How Are Insurance Claims Sent?

The easiest way to submit insurance claims is online through the insurance company's website or via your health benefits application on your mobile device. The website will provide instructions on how to submit claims. For example, below are web links to some insurance companies' instructions for submitting claims:

- [Canada Life](#)
- [Pacific Blue Cross](#)
- [Greenshield](#)
- [Manulife](#)
- [Sunlife](#)

You can check your insurance provider's website for similar instructions on how to submit claims online. Most insurance companies also offer excellent customer support over the phone if you need assistance with setting up an account or submitting a claim.

When submitting your claim, you will need to attach the receipt for your monthly payment. If you are submitting to secondary insurance, you will also need to attach the paid statement from your primary insurance in addition to your monthly or down payment receipt. Insurance companies may also request additional information, which is outlined in Table 1. Be sure to include any required information from the office where you are receiving treatment. If you have any questions, feel free to contact the Aura Orthodontics office where you are receiving treatment.