

Daniel G. Klauer, DDS

Board Certified

American Board of Craniofacial Pain

American Board of Craniofacial Dental Sleep Medicine

American Board of Dental Sleep Medicine



TMJ & Sleep
Therapy Centre

When you receive a service from an out of network provider or facility, you are responsible for the charges associated with the service, procedure or equipment. If there is in fact insurance coverage or benefits available when payment is due, it will be made to the member or policy holder instead of to the provider because the contract is between you and the insurance company.

While Placing your phone call to your insurance carrier, ***please take note of the date, time and name of the representative you spoke with and if there is a reference number to track your phone call. You should document that information in the boxes provided below.***

Date: _____ Time: _____

Representative Name: _____ Call Reference #: _____

Date: _____ Time: _____

Representative Name: _____ Call Reference #: _____

Date: _____ Time: _____

Representative Name: _____ Call Reference #: _____

Let us know if you have any questions, or need any guidance. We will be more than happy to help you understand how your specific plan will work in our office.

1245 E. University Dr.
Granger, IN 46530
(574) 968 - 5166 Phone
(877) 317-3186 Fax
TMJSleepIndiana.com