

ADVOCATING INSURANCE FOR YOUR PATIENTS

By Roz Fulmer



Advocating insurance for your patients can be fun! Want in on the secrets?

Secret #1

Play the game! Yes, it is a game of chance. Will the insurance company pay this claim or not? Is this claim free of any errors? Is there any cause on this claim that might motivate the insurance carrier to delay your reimbursement? The number one reason insurance claims get denied or postponed for payment is an error on the claim form, usually in box #13 (Date of Birth), #15 (Policyholder ID or SS#), and/or #39 (Number of Enclosures – needed if procedures require x-rays and/or photos). Are you updating your software each day when you receive the report from your healthcare claims clearinghouse which includes errors that were on current claims?

Secret #2

Play nice! When speaking with an insurance call center person, speak with respect. Did you know your body language can come across the phone line? Talk to the representative like you would talk to your best friend and they will be glad to help

in most cases. Thank them for their help in advance and you will be pleasantly surprised how much information you will receive towards processing your unpaid claim. At the end of your conversation, ask what could have been done differently to get this claim processed correctly the first time. Thank them again for their time and help in getting this claim processed for the subscriber (your patient). Kindness and respect work every time!

Secret #3

Ensure quick claim processing! Know which procedures will process through the system more quickly if you send the appropriate documentation and narratives beforehand. Do they know “why” the treatment was done, the defects of the tooth? Does this patient have any medications and/or medical conditions that could be a problem if this treatment were not done? What “evidence” (x-rays, photos, etc.) is being sent to validate the necessity of the procedure for the patient?

In the very near future, our dental coding system will undergo a change; insurance companies will not want any narratives on claims once electronic health care records are implemented. Most codes will have an additional diagnosis code as well as the procedure code like medical coding has now. An example is a diagnosis code (**ICD**) will be created in dental for **relief of pain** and then we will also submit the procedure code like we currently do.



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Trojan Today provides a forum for industry professionals to offer a diversity of information and to provide ideas and suggestions in the area of practice management. These articles are meant to be informative and do not necessarily represent the opinions of Trojan Professional Services, Inc.

Secret #4

Code correctly! Dentists have a legal obligation to report the code that best describes the procedures they performed, not the code that will be paid. Knowledge of the procedures and understanding of the ADA codes are a must for all team members in the practice, not just your insurance coordinator. Often overlooked by the dentist is the fact there is a learning curve for the business team members when the CDT codes get revised every two years. We have to learn how to present the benefits of these procedures to the patients and to share what the changes may mean towards their reimbursements by their insurance plans.

Secret #5

Train! When was the last time you held a team meeting on the topic of "Understanding the CDT Procedure Codes Correctly"? If you need an agenda, please call me at 815-481-3851 and I will be happy to email one to you. Do you know how many examination codes your practice could be submitting to insurance plans? Do you know when to submit the code D9110 for Palliative Treatment versus using the Limited Evaluation code D0140? These are only two areas of coding training that should be covered on a regular basis at a team meeting. Support your insurance coordinators with continuing education courses that are offered at local and national dental meetings. Hire a professional trainer to come to your practice to help train you and your entire team in coding correctly in order to get maximum reimbursement for your patients and your practice.



In 2003, Roz Fulmer founded "Making a Difference...Today!" a Dental Training Company that customizes onsite training to the needs and wants of the dental practice. For the past 15 years, she has served as a practice trainer and adviser for more than 450 dental practices throughout the U.S. and Canada. <http://www.rozfulmer.com>

QUOTE-WORTHY

“Any man who can drive safely while kissing a pretty girl is simply not giving the kiss the attention it deserves.”

– Albert Einstein



ASK THE CONSULTANT

Q: I recently hired an office manager. She is working out fine with one exception; she regularly has bad breath. It's a very sensitive issue and I don't know how to address it. Any advice?

A: If you have a dress code for the business desk and the clinical team, this topic should be added. If you do not have a dress code, this is a great opportunity to put one together. Use or modify the verbiage below.

“Because of the nature of our work and the resultant very close contact with our patients, extreme care must be exercised in personal hygiene and grooming. Make-up, if worn, should be moderate. Avoid strong perfumes. Fingernails must be kept extra clean and short. Clinical staff must style hair away from the face and shoulders. Jewelry must be moderate in type and wearing of rings is discouraged. It is also very important to exercise care with regard to certain strong foods eaten prior to patient care, such as garlic or onions.”

Q: What are the regulations in California about having a patient bring into the operatory a designated service guide dog, such as those used by the blind or disabled?

A: According to the California Department of Justice, patients with disabilities such as you described have a right to have their service dog with them. However, the service dog can be kept out of a sterile environment. As state regulations may vary, others may contact their own State Department of Justice.

Responses provided by Kathleen Johnson, President of Kathleen Johnson Consulting, Inc.

The purpose of Ask the Consultant (ATC) is to address your individual questions and help you move forward in designing a management program for your office. Our goal is to provide consultation to help define your practice image and create a patient-centered practice with questions directed to and responses from Top Industry Consultants. Trojan clients have access to ATC around the clock at www.trojanonline.com.