



Solution to A Problem in Most Dental Offices

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Dental Claims Cleanup

PROBLEM

The health and wealth of a dental practice is highly dependent on accurate, efficient, and consistent dental billing. With the changing landscape of the Dental Industry, increased dependence on dental insurance, the increased debt of the young Dentists and the gobbling up of practices by Dental Service Organizations, the private practice needs help. There is a reason why DSOs are so successful. It is because they provide a solution to the dental business management and the dental billing headache. However, not all of us private practice practitioners want to be a DSO Dentist. So what can we do in this changing Industry that will solve the headache of administration but not change our practice philosophy? Did you know that outsourcing dental billing

is available to practices, without the ties of DSOs. Dental Claims Cleanup has solved this dental billing problem with our services and we provide an alternative to a DSO.

DECISIONS

Here is what happens. When the office loses an employee to disability, medical leave or pregnancy leave, or does not have the manpower to plow through the dental billing workload, or if the team is lacking skills, or the Dentist does not have the ability to supervise the dental billing and accounting, the Dentist is left vulnerable. They are at the mercy of local talent to hire, train, and hope that the new employee will be honest, self-motivated, and skilled to run the financial aspect of the practice. After a few hires and fires, and a progression into increased accounts receivable, the Dentist realizes that business management and dental billing is a huge headache and they start investigating options. The first one that comes to mind is partnering with a DSO. All of us are getting notices from Heartland, Aspen, and Pacific. They are successful organizations and employ many happy Dentists. The offers are very tempting, but we went into private practice for a reason, right? So if we don't want to sell the practice, don't want to partner with DSO, and do not want to pay for consultants, what options do we have?

THE VISION

What if you can keep all as is, but outsource the part that is a keeps you up at night?

What if, instead of you paying and supervising the employee performing the job, someone else will have that headache?

What if, instead of you paying the employee benefits, you get bothered about raises and time-off, someone else will deal with that burden for similar or lesser price?

What if you had all the help you need to take the headache away, without changing your practice philosophy or have any ties to other business organizations?

What if, in exchange, you and your team have more quality time with your patients and have more time to focus on the schedule and treatment acceptance?

HOW DO YOU SCORE?

Answer these questions to see how effective is your office in dental billing and business administration:

1. **Claims Management** (claim submission, claim follow-up, claim correction) is a job that needs to be performed every day.
 - a) Are your claims submitted at the end of every business day?
 - b) Does your team have at least 2 solid hours to follow-up on unresolved claims per day?

2. **Account Receivable** volume aging over 30 days: AR reports need to be run weekly. Industry standard is no more than \$5,000 in over 30 days total unresolved claims and \$3,000 in unpaid patient balances over 30 days for every 80,000 of monthly production. Carve out 1 hour per week to meet with the person doing your dental billing. Your team should have reports for you: a) status on ALL unresolved claims over 30 days, b) amount of unresolved claims over 30 days, c) amount of unpaid patient balances over 30 days. Keep the reports from week to week. Expect insurance payments in 3 weeks. Expect patient payments in 1 month.

a) Is your total accounts receivable over 30 days less than \$10,000 for every \$80,000 gross production?

3. **Patient Balances:** Patient co-pays MUST be collected at time of service or NO service is performed

a) Does your team collect the patient's portion at time of service?

b) Are your total overdue patient balances, over 30 days, less than \$10,000?

4. **Insurance Verification** is done 3 days prior for ALL hygiene patients. All new patients and emergency patients are verified and setup as they make the appointments. Use a benefits verification sheet to obtain plan specific clauses that match your frequent procedures. Correct

plan setup is a must and the team should be trained in this area. Use an electronic verification service that, with a click of a button, verifies patients from the schedule. It will not necessarily tell you plan breakdown, but it will tell you they have active coverage.

a) Does your team perform benefits verifications and draft treatment estimates based on verifications so they can collect the correct amount at time of service?

5. **Accounting:** When EOBs are entered and there is a remaining balance, call the patient after you enter the insurance check payment, and ask to resolve the balance over the phone with a credit card. If you do not reach the patient send a statement. Statements should be going out daily and at least once per week.

a) Does your office enter ALL the EOBs and EFT's, for that day, same day?

b) Does your office send statements at least once per week?

6. **Financial Agreements and**

Treatment Estimates: Sound financial agreements must be drafted, signed by patients, and retained so that clear patient responsibility that was discussed prior to procedure is documented. The amounts to be collected at time of service, should be reviewed with the team in the morning huddle and reviewed the following day to make sure it was actually collected. Review with the team

reasons why the money was not collected. This accountability helps keep employees motivated to collect at time of service.

a) Do all of your patients, regardless of amount, have a signed financial agreement, and are they clear what their portion is at time of service?

7. Hygiene Reactivation: A full hygiene schedule ensures a full doctor’s schedule. Hygiene reactivation is a daily task. The goal is to call at least 30 patients per day, speak to at least 4, and schedule at least 4 for a single provider operation. The schedule is dynamic and must be worked every day to fill last minute openings. An unfilled appointment is money that can never be recovered.

a) Does your team work on hygiene reactivation daily?

b) Does your team track their efforts?

c) Does your team fill last minute openings successfully?

YOUR SCORE-write the number of “Yes”

$$\#YES \frac{\quad}{12} \times 100\% = \frac{\quad}{\quad} \%$$

10-50% Need Help: systems not in place or lack of knowledge or manpower.

50%-60% Lack of Supervision or Consistency: make sure there is clearly defined systems for the team to follow and get involved by reviewing reports and set accountability.

60-75% Average: systems are most likely in place, motivated team, most likely time management is an issue, re-define tasks and schedule time for execution.

75-85% Above Average: focus on the task the team is not executing, find out why, or define the system and expectations

85-100% Healthy Practices: owner/manager supervising and holding team accountable, reviewing weekly reports and resolving problems as they arise.



SOLUTION

Today, the entire dental billing position, and other business tasks like hygiene reactivation, can be outsourced.

Dental Claims Cleanup provides the dental billing services via a remote, HIPAA secure access connection to the dental office workstation. We seamlessly work in the background without disrupting the clinical operations. We provide the clinical team more quality time for patient care. We work with all dental practice management software's. Our services include:

1. Daily claims submission, unresolved claims research, follow-up and claim correction and re-submission with supporting documentation or start of an appeal process.
2. Patient balances research, statements, and phone calls to collect the balances.
3. EOB, EFT entry in the dental software
4. Benefits verification eligibility, full plan breakdown for new patients, emergency patients, existing patients with insurance changes, and new insurance account setup or correction as needed.
5. Medical billing for dental procedures.
6. Hygiene reactivation program: we manage all your unscheduled recalls and fill your schedule.

Dental Claims Cleanup works the accounts efficiently, producing results, and we do this for a fraction of the cost of an employee with benefits, raises, payroll taxes, and time off. We report weekly on our progress and we are the watchdog of the practice's health and

wealth. Our weekly reports inform the Dentist of trends and team's productivity so the Dentist can make informed business decisions. We provide the resources without compromising your practice. The medical industry has been outsourcing medical billing for years because they understand that it is cost effective, efficient, and more productive. Now we have the same service available to the Dental Industry.

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