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## A Dentist is not Banker

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As dental providers, we have so many things we take care of. We wear various hats besides being a Doctor that heals the patient. We are a radiologist reading x-rays, a pathologist diagnosing abnormalities of the oral cavity, a construction worker rebuilding anatomy to functional state, a psychologist dealing with patient's personal struggles, fears and listening to their life stories, a teacher providing education of oral health....and very often a **BANKER** allowing patients to pay for services over time like a loan.

We **CAN NOT** be a Banker! Unlike all the other jobs we perform, being a banker is detrimental to the dental business operation. When do we officially become a banker? When we do not collect the patient's portion at time of service and the patient walks out of the office with a service that they received but did not pay for. Then, we send a bunch of bills tot he patient to recover the owed amount. As a result, the balance is paid off, just like a car loan, over time. But, often, the balance is not paid off and we need to resort to ugly measures like sending the patient to collections. This conflicts with our good ethical nature of helping people, and we either chicken out and do not send them to collections, or we send them and feel like we harmed an innocent human being. By the way, I say you send them to collections and charge the patient the

collection service fees. Why should you pay for the patient's delinquent activities. In your financial agreement, as long as you state "the patient agrees they will be responsible for any collection fees associated with recovery of a delinquent account" you are fine to charge the patient the attorney fees or collection fees.

So, the best practice is to collect the patient balance at time of service or obtain a pre-payment. But to do so, you need some items in place.

1. The fee schedules must be entered in the software so that you can obtain an estimate.
2. In addition, the dental benefit has to be set up correctly inside the software for the system to configure the numbers.
3. You need a confident team member who will present the financial agreements, obtain a signature, and collect that amount at time of service.

Why not just be a Banker and bill the patient after the claim settles? Because statistics show that the dental bill is the last one paid in households. Patients feel that dental service should be covered like medical service and they will procrastinate in payment as long as possible. The patient perceives the Dentist as rich and they feel that the Dentist will not notice the lack of payment nor does the Dentist really need that money. Also, you can not be a Banker because you do not have enough money to subsidize the services you perform. Your cash flow will get so low you will be struggling to stay open just to break even.

No matter how large or small the treatment is, there should be a treatment presentation and a financial agreement in place. Even if you feel that the insurance will pay 100%, the patient needs to know the amount they are responsible for in the event the insurance does not pay as expected. You will appreciate this practice when you obtain a big fat insurance denial you did not expect and your appeal efforts did not overturn the decision. Best of Luck and be the best in all the other jobs, but don't be a Banker.

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