



Top five deadly insurance mistakes

Dental insurance. Those are two of the most powerful, as well as sometimes feared, words in a dental office. Most people admit to a love/hate relationship with the insurance process. Dental teams and patients “love it” when dental insurance is the influencing factor which allows them to take care of their oral health, and the doctor and staff “hate it” when insurance is used as a solitary excuse to avoid needed treatment because it may not be covered.

There is no denying the power of dental benefits in motivating patients to see their dentist more often. Another huge influencing tool is the manner in which dental teams handle communication to patients about their coverage and the filing of claims. Both are deciding factors in the relationship the dental practice can have with their patients who have dental benefits.

Tired of not feeling the love? To receive maximum profit and pleasure from patients’ utilization of their dental insurance, be sure to avoid the following “Deadly Dental Insurance Mistakes.”

❶ **Not confirming eligibility immediately prior to treatment.** Requests by payers for overpayments are becoming an unnecessary and costly reality. If your office routinely files claims for benefits without confirming eligibility immediately prior to treatment, you are responsible for the replacement of any overpayments made on the part of the payer.

❷ **Submitting the wrong code for today’s completed procedure.** Nearly all coding questions generated by support team members occur when there is an incomplete or unknown diagnosis. Your clinical record needs to specify not only *what* procedure was performed, but the specific reason *why*. Don’t fall into the trap of inaccurately billing for services you know to be reimbursable by the individual benefit plan. You have no option but to bill and code for exactly the service that is rendered.

❸ **Telling patients about their benefit plans.** Dental offices must stop telling patients about their benefit plans. When you tell patients about their plans, you are holding yourself out as being knowledgeable and accountable for the strengths and weaknesses of the patients’ plans.

Make patients accountable for the specifics of their benefit plans by not accepting responsibility for *their* plans. Uncooperative patients will always tell you that they never received or have misplaced all documentation about their plans.

❹ **Not separating financial arrangements from benefit assessment.** Years ago, it was not uncommon to

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treat patients and wait for their insurance to pay, prior to billing patients for their part of the bill. In today’s competitive marketplace, that old modality of patient administration is nothing more than an invitation to financial hardship and an unnecessary increase in your accounts receivable. Does this mean that your office should stop accepting authorization for payment, as well as assignment of benefits? Definitely not ... as long as you follow some simple rules. Be certain you have written financial objectives established and agreed to prior to the initiation of treatment. Doing this will eliminate any confusion and miscommunication. Remember: if you inform someone before it happens, it’s a *reason*; if you tell them afterwards, it’s an *excuse*.

❺ **Not submitting all claims and attachments electronically.** Electronic claims speed up the payment process. Like it or not, our children will technologically surpass any and all expectations of our experience. So tell me — what are you doing with that old amalgamator? How about that molten metal sterilizer? When did you do your last gold foil restoration? Why are you still not submitting your claims and attachments electronically?

Do any of these mistakes hit close to home? If so, make a plan of action to tame the insurance beast in your practice. Don’t ignore insurance! It’s a motivating factor in getting many people to come in to see your hygienist every six months, and it will certainly give you many more opportunities to influence and educate your patients about their oral health needs.

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