ROJANTODAY 2018 VOLUME 20 ISSUE 05 MAY 2018 A NEWSLETTER FOR CLIENTS OF TROJAN PROFESSIONAL SERVICES, INC.

# Dentistry's Untapped Resource: MEDICAL INSURANCE BILLING & CODING

By Rebecca Gerber

In today's competitive dental market, more and more dentists are finding it prudent and profitable to bill medically necessary dental procedures to medical insurance carriers. Submitting selected dental treatment to medical carriers not only provides a valuable service, but it can increase the bottom line of the practice through greater case acceptance. Offering this benefit to patients who qualify may help them accept needed dentistry that otherwise may not be affordable. Procedures connected to bone, anatomy, and the alveolus can be sent to medical carriers, thus saving the dental benefits for tooth-related procedures. Medical insurance plans carry higher deductibles; however, there are no frequencies or maximums involved, as there are with dental insurance benefits.

The number of patients who may benefit from medical billing will vary according to the demographics of the practice. Clientele, location, and specialty services offered are major factors in whether a dental provider decides to offer this service.

# Some of the dental procedures that can be submitted to medical carriers include:

- Biopsies
- CT scans
- Oral cancer screenings
- TMD appliances
- Sleep apnea appliances
- Services on patients needing dentistry before chemotherapy or transplant surgery
- Procedures related to trauma

#### Establishing a systemic link is the most important part of

medical billing. For example, when submitting for endodontic procedures, it is essential to establish a medical connection that necessitates endo therapy. The majority of endodontic procedures may not be covered, unless infection is present and either compromising or exacerbating a patient's medical condition. A letter of medical necessity from the patient's physician is a necessary document when submitting endo treatment to the medical carrier.

Appliance therapy, or interceptive orthodontics, may be a covered benefit if the patient exhibits bone anomalies that possibly can be corrected with a nonsurgical approach. In that case, a CT scan and all follow-up adjustments can be submitted to the medical insurance carrier. CT scans and oral cancer screenings can be submitted for detection of oral cancer or other diseases of the mouth. However, a CT scan and report cannot be submitted for an implant if a systemic link is not present.

Additional requirements for medical billing include increased documentation, such as **SOAP** notes.

#### The SOAP format is universally known and accepted:

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SUBJECTIVE: What the patient says

**OBJECTIVE:** The provider's findings after x-rays, models, and diagnostic tests



**ASSESSMENT:** The provider's diagnosis

**PLAN:** Treatment plan, including the treatment and all-follow up visits

It's also mandatory to update all health histories with the medical carrier's name, address, and a thorough review of the patient's systems. The health history needs to include questions regarding the Respiratory, Circulatory, G.I., Neuro-Muscular, and Endocrine systems, along with medications used and lifestyle habits.

The role of the doctor is to understand these requirements and clinically evaluate head, neck, and sinus issues, while documenting all medical concerns. It is important to make sure all the proper records and reports are available when contacting the insurance carriers for authorization of treatment.

#### Vital reports include:

- Comprehensive medical exams
- Letters of medical necessity
- Emergency room reports
- Police reports, if needed

All documents should contain diagnosis codes as well as procedure codes. Make sure the language used contains medical terminology, not dental. For instance, a Panorex is called an Orthopantogram or an OPG.

In an average general dental practice, there are a limited number of dental codes that can be translated into medical CPT codes. It is important for the provider to choose codes based on the diagnosis of the patient in the chair. It is essential to be as specific as possible and not allow anyone to assume that procedure codes are one code fits all. Remember, the doctor is painting a picture with codes, and the medical carrier insists on specificity. There are excellent websites and books available that can help providers and billers choose the proper medical codes.

The last step is to submit the claim. There are many clearinghouses and medical billing software programs available at little or no cost to the dental practice. Make sure that whatever is chosen is user-friendly and practical, based on the volume of medical claims generated monthly. The office can also outsource the billing to a company which specializes in processing medical claims. When using an outside service, obtain a signed Business Associates Agreement. Customized superbills and encounter forms can help establish consistent communication when outsourcing. They can also be helpful for internal communication within the office.

**Medical Billing for Dental Practices** is in the embryonic stages and is an art, not a science. However, many dental benefits are now becoming embedded in medical plans. In the foreseeable future, it is important to have knowledge of medical billing and proper documentation, so the practice administrator can assess and make a conclusion on how to make a medical billing system an integral part of the practice.



**Rebecca Gerber RDA,** is the Owner and Lead Instructor at Academy of Dental Practice Careers, Inc. ADPC is a Dental Front Office Training Facility, specializing in educating front office personnel and organizing systems for the dental practice.

For more information regarding Medical Billing or any other classes: info@dentalpracticecareers.com, 877-235-7100, or <u>www.dentalpracticecareers.com</u>

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

# Ask the Consultant

This is a HIPAA question: Can we leave messages for patient reminders on voicemails and answering machines, on home or cell numbers that have been provided to us by patients for their appointments?

The HIPAA privacy rule permits health care providers to communicate with patients regarding their health care. This includes communicating with patients at their homes, whether through the mail or by phone or in some other manner. In addition, the rule does not prohibit covered entities from leaving messages for patients on their answering machines. However, to reasonably safeguard the individual's privacy, covered entities should take care to limit the amount of information disclosed on the answering machine. For example, a covered entity might want to consider leaving only name and number and other information necessary to confirm an appointment. Or simply ask the individual to call back.

A covered entity may also leave a message with a family member or other person who answers the phone when the patient is not at home. The privacy rule permits covered entities to disclose limited information to family members, friends, or other persons regarding an individual's care, even when the individual is not present. However, covered entities should use professional judgment to assure that such disclosures are in the best interest of the individual and limit the information disclosed. *See: 45 CFR 164.510(B)(3).* 

In a situation where a patient has requested that the covered entity communicate in a confidential manner, such as alternative means or at an alternative location, the covered entity must accommodate that request, if reasonable. For example, the Department of Health and Human Services considers a request to receive mailings from the covered entity at a post office box rather than at home, or to receive calls at the office rather than at home, to be reasonable requests, absent extenuating circumstances. *See 45 CFR 164.522(B)*.

I usually advise staff member to leave this kind of message: This is Kathleen from Dr. Gentle's office. Please call me at XXX-XXX-XXXX.

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



# Remember...

**Ask the Consultant** provides a direct line to experts who offer advice on how to design an effective management program for your practice.

They can help you improve your image, create a more patient-centric workflow, and keep your chairs full by providing best practices and up-to-date information on how to run a successful dental practice.

Ask your question today: http://www.trojanonline.com/AskTheConsultantRESP.html

## Service Savvy



### The Magic of Linking

Do you have Trojan Benefit Service with the ability to attach Trojan Benefit Plans to your patient's coverage table? If you answered yes, you need to know this!

Every time you link to a Trojan Benefit Plan, patient insurances and coverage tables may be updated without your even knowing it! How can that be? Here's an example:

- Each Trojan Benefit Plan has its very own Trojan Plan Number. Let's say, you have linked Trojan Plan Number 12345 to five of your patients in your practice management system. These five patients all have three things in common:
  - 1. Same employer
  - 2. Same group/policy number
  - 3. Same Trojan Plan Number linked to their file in the practice management system
- Next, you, or maybe even another Trojan client, asks Trojan to update Trojan Plan Number 12345 for just one patient.
- While only one patient was researched by Trojan, when you process your update, all five of those patients will be updated. Same Trojan Plan Number, same employer, different insurance and/or different benefits are populated into all those patient files in your practice management system!

We call that magic!! Each time you process your weekly update, you'll have no idea how many of your patients are being updated behind the scenes!

To make the best use of your time, prioritize the patients for linking in this order:

- 1. New Patients
- 2. Patients of Record with new insurance
- 3. Patients whose coverage hasn't changed. (These patients can wait until their insurance has changed.)

Don't forget to link! Take a little time today to save a lot of time in the future.

To learn how to link properly, please contact your Trainers at 800-451-9723 ext. 5. We're here to help!

# What Clients Say



"Trojan Collection Services

has proven to be very successful in helping our office recover Past Due balances. I like the fact I can send all the information by fax and receive confirmation almost immediately. Using Trojan has taken the burden of collecting past due accounts from our staff so we can focus on patient care."

> - Deana, Officer Manager

### Write for TROJAN TODAY

Share your dental and front office experience with others! Articles should be no more than 750 words. Include a short bio and recent photo.

Submit to: nikkim@trojanonline.com

Trojan encourages a wide variety of contributors and subjects to its newsletter.





800.451-9723 ext. 1



# FUN! L Fact

In 1790, John Greenwood, one of George Washington's dentists, constructed the first known dental foot engine.

He adapted his mother's foot treadle spinning wheel to rotate a drill.

A former soldier in the Revolutionary War, Greenwood also fashioned a set of dentures carved out of hippopotamus ivory and employing gold wire springs and brass screws holding human teeth for George Washington, who had only one original tooth at the time of his inauguration.

Greenwood even left a hole in the dentures to accommodate that single tooth as he believed a dentist should "never extract a tooth when there is a possibility of saving it."

# What Clients Say

"The nice thing about Trojan Professional Services is that I have never had to consider their services. Twenty years and not a worry or problem."

— Dr. G, DDS



## Quote-Worthy

You are not here merely to make a living. You are here in order to enable the world to live more amply, with greater vision, with a finer spirit of hope and achievement. You are here to enrich the world, and you impoverish yourself if you forget the errand.

– Woodrow Wilson

### **Meeting Place** May 17-19, 2018 CDA Anaheim Booth #1520



### **TROJAN** Closings May 28, 2018 Memorial Day

July 4, 2018 Independence Day





# **Seminars**

Front Office Master's Program

Presented by Becky Gerber

July 26-28, 2018 Portland, OR

<u>Click here</u> for more information or visit: dentalpracticecareers.com

### **Navigating the Dental Transition Minefield**

Presented by Kathleen Johnson

June 29, 2018 Costa Mesa, CA

Click here for more information or visit: Kjohnsonconsulting.biz

### Front Office Rocks

**Presented by Laura Hatch** 

June 22, 2018 Salt Lake City, UT <u>Click here</u> for more information or visit: frontofficerocks.com



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PRESIDENT: Ingrid Kidd Goldfarb • EDITOR: Romalyn Tilghman • PUBLICATION COORDINATION: Nikki Myers • GRAPHIC DESIGN & PRODUCTION: Moller Creative Group

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