

Your Patients Deserve The Personal Touch

Dental Town

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This month I wanted to share a letter I recently received from one of the DentalTown readers:

Dear Corine

What an awful collections month September was. Was it because I had not made firm financial arrangements? No. Had I stopped collecting over the counter? No. Had I stopped billing insurance companies? No. The nightmare that happened to me and kept me awake at night was chasing after insurance companies. Most notably- Delta and Aetna. I was finding myself in the following scenario over and over. I would give the patient an estimated co-payment amount – always with the caveat "Nothing is definite until the mailman brings the insurance check. If this estimate is under, I will let you know your additional portion. If it is over, I will promptly send you a refund check." The patient would pay their co-payment the day of treatment. I would bill the insurance company electronically or by snail mail. I would wait. A month would go by without a word. I would call the insurance company. I was told, "We never received your claim." If it had gone electronically, I had a report saying the claim was sent. If it went snail mail, it never came back "return to sender". I would send it again and sometimes a third time by fax. Some would be processed. Some would not. I'd call again 2-3 weeks, I was told again, "We never received the claim". I started threatening to drive to their offices and sit in their office until someone came out with payments on these claims. I had visions of security guards carrying me out while I was yelling, "But, wait you never paid on that composite filling we did last January on tooth #4". Then the light bulb went off in my head. I can remember when we would submit for payment on a crown or onlay and it would get sent back to me for more information. I would ask Dr. for more details, we started taking more photos during preps and suddenly I never got these claims back anymore. I got really good at answering all the questions ahead of time. The claims were not getting paid any faster but somehow they were getting "lost". I was coming in on my day off calling insurance companies. I was spending more time on hold and learning to circumvent insurance company automated help. It was on my mind all the time and seemed to be getting worse all of a sudden. Then I read your article. A kindred spirit. Dr and I agreed to drop insurance from our practice. We are now filling out forms for our patients and assigning benefits to them. I am happy to explain why and have yet to encounter resistance. But, this is the first week. I wonder if you feel a letter to patients explaining the reason for this move is best or if you feel contact as they come in is best?

I plan on keeping things as they are with existing treatment plans and instituting this policy for new patients and new treatment plans.

I began in dentistry in 1974. So although you have a few more years in it than I do, I am no novice. This is the worst I have been treated by the insurance industry.

Thanks for your article,

"Alberta"

Your letter is like so many others I have received. These patients are part of your patient family. They have established a relationship with you. I feel it is best to advise the patient of your new payment "options", face to face. Your patients deserve that personal touch. It gives you the opportunity to explain how the changes will benefit them. It allows you the opportunity to answer any questions they may have. You have the opportunity to explain how there will no longer be any surprises or need to guess regarding the cost of their treatment, that comfortable payment arrangements will be made for the entire treatment and then the insurance reimbursement will be theirs to do with as they wish. I think it is very important to handle existing treatment plans as you are. I would suggest explaining the new payment "options" at their recall appointments, allowing them to pay that day as they have in the past. Informing them that the new payment "options" will be place at their next visit, and that arrangements will be made for the insurance company to reimburse them directly at their home address.

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