SPRING 2010



delta dental of minnesota SPECIAL EDITION

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MINNESOTA HEALTH CARE PROGRAMS BENEFIT CHANGES

The 2009 Minnesota Legislature made significant changes to Minnesota Health Care Programs (MHCP) dental coverage, that was effective January 1, 2010. Delta Dental of Minnesota sent a packet of information in December to all dental offices who have seen a MHCP recipient who utilizes the CivicSmiles[™] Network. The most significant changes are to the nonpregnant adult (21+) dental benefits. Delta Dental of Minnesota - on behalf of our health plan partners Blue Plus, Medica and Metropolitan Health Plan (MHP) - implemented the changes to our programs for consistency with the Minnesota Department of Human Services (DHS) administration.

If your office did not receive a packet with this important information, please call our Customer Service Department at **1-800-774-9049**.



CARE COORDINATION

In an effort to alleviate barriers to accessing oral health care, and on behalf of our health plan partners – Blue Plus, Medica and Metropolitan Health Plan (MHP) – Delta Dental of Minnesota has implemented a care coordination process. This feature coordinates everything from the appointment to follow-up care.

Delta Dental of Minnesota will help the member locate a dentist, contact the office to schedule an appointment, determine any special needs, such as language interpretive services, transportation (if eligible for this service), confirm the appointment and help coordinate any follow-up care the member may need. This program is available to all of our health plan partners' members. If you have any questions regarding our Care Coordination program, please contact our Government Programs Department at **I-866-303-8138**.

FEE TABLE MAXIMUMS

Delta Dental of Minnesota reviews Maximum Allowable Charges annually. We consider a variety of factors including the healthcare and dental marketplace, trends in submitted charges using our claims data and filed fee data, inflationary trends, consumer price index data as well as competitive data that may be available. This year we have also paid close attention to the economy and economic indices, unemployment rates, and general corporate climate regarding staffing (such as hiring and layoffs, etc).

There has been a decrease in dental membership over the past year due to many employer groups being forced to downsize their workforce or who have had to drop their dental coverage completely. Employer groups understand the importance of dental care, and in order to preserve dental benefits for these employer groups as much as possible and considering the factors mentioned above as well as the general economic climate, the decision has been made not to increase the current Fee Table Maximum at this time.

We feel this is the best way to ensure you maintain your current patient base because we all know that people who have dental benefits visit their dentist nearly twice as often as those who do not.

We understand the economy has affected everyone, including you, and we want to assure you that we will keep a constant watch on this situation. Even though we did not increase the reimbursement effect January I, this doesn't preclude us from increasing the reimbursement during 2010 if there is a change in the economic conditions.

SMILES ACROSS MINNESOTA IS EXPANDING

In addition to the Twin Cities locations, we've expanded the Smiles Across Minnesota program to other communities across Minnesota including Duluth, St. Cloud, Rochester and the Iron Range. Delta Dental of Minnesota supports Smiles Across Minnesota, which helps fill gaps that exist in each community.

Smiles Across Minnesota is one of the most successful coalitions of Oral Health America's Smiles Across America program, which focuses on providing school-based dental care to low income and uninsured children. Smiles Across Minnesota is a great opportunity to help identify which dental services can be referred to local community practitioners. (Similar to when schools screen for scoliosis and vision within the schools.) One of our primary goals is to help students and their families find and establish a dental home within their community. For more information on Smiles Across Minnesota, visit **www.deltadentalmn.org** and click "Community Involvement".



HEWLETT-PACKARD CHOOSES DELTA DENTAL

Hewlett-Packard (HP) employees now have a choice between two Delta Dental PPOSM plans through Delta Dental Insurance Company.

For eligibility and benefit information for your Hewlett-Packard patients, please: Visit **www.deltadentalins.com/hp** and log in, or **Call toll-free**: **866-222-9018**.

Mail paper claims to: Delta Dental Insurance Company P. O. Box 1809 Alpharetta, GA 30023-1809

The payer number for electronic claims is **94276**.

Something to Smile About

According to a 2009 Consumer Dental Benefits Survey, Americans with dental benefits are much more likely to see a dentist annually than those without benefits. In fact, 81 percent of those with benefits see the dentist twice a year or more, as compared to just 34 percent of the uninsured.

STAY UP-TO-DATE ON HEALTHCARE REFORM FROM DENTAL PERSPECTIVE

Healthcare reform could also affect dental benefits. The Delta Dental Plans Association recently launched a Web site to keep you informed about healthcare reform and its potential impact on dental coverage. This site answers such questions as:

- What is the role of dental benefits in healthcare reform?
- Why is it important to address oral health in federal healthcare reform legislation?

You can also sign up to receive e-mail updates about healthcare reform. Visit **www.advanceoralhealth.com**.

CLAIMS SUBMISSIONS AND PRE-ESTIMATES

In early 2004, Delta Dental's Participating Dental Provider Policies and Procedures were amended to include the following statement under Section I, U.: "If a Pre-Estimate of Costs is submitted, proposed treatment costs estimated, and a claim subsequently submitted, the service is subject to audit for consistency with coverage under the Subscriber's Plan. Services not covered by the Subscriber's Plan are subject to monetary recovery. An example of such services is dental services performed for cosmetic purposes."

Similar language has also been added to Delta Dental's Estimate of Benefits forms issued to both the dental office and subscriber. Services not covered by our group contracts should not be submitted to Delta Dental. The typical contract that Delta Dental administers on behalf of our employer groups provides a schedule of covered dental benefits. This schedule does not include every dental service that may be required by a patient, nor does it dictate the actual treatment a patient needs.

Treatment plan decisions are strictly between the treating dentist and the patient.*

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CLAIMS SUBMISSIONS AND PRE-ESTIMATES (CONTINUED)

Some examples of restorative dental services generally covered include, but are not limited to, the following: *

- Amalgam, anterior resin or posterior resin restorations where lost tooth structure is a result of decay or fracture
- Crowns and indirectly fabricated restorations when the amount of lost tooth structure does not enable the placement of an amalgam or composite restoration
- Restorations for treatment of cracked tooth syndrome are a covered service with adequate clinical explanation

Some examples of dental services generally NOT covered include, but are not limited to, the following:

- Dental procedures performed for purely cosmetic purposes
- Dental procedures, appliances or restorations that are necessary to alter, restore or maintain occlusion, including, but not limited to: increasing vertical dimension, replacing or stabilizing tooth structure lost by attrition (wear), realignment of teeth, periodontal splinting and gnathologic recordings.

Should a patient require a denied Estimate of Benefits for either submission to a secondary carrier or for a personal flex dollar program, please send your preestimate forms directly to our Professional Review Department with a notation that a denial is required.

If your patients have questions regarding their coverage, please refer them to our Customer Service Department at (651) 406-5916 (local) or (800) 553-9536 (toll free).

Members can also check benefits information online. At **www.deltadentalmn.org** members should click Subscriber Connection, then Subscriber Login. Should you or your staff have questions regarding your contractual agreements as a participating dentist, please contact our Professional Services Department at (651) 406-5900 ext. 4170 (local) or (800) 328-1188 ext. 4170 (toll free).

*All coverages under all Delta Dental of Minnesota contracts are also subject to the contract exclusions, limitations, deductibles and co-payments.

RONALD MCDONALD CARE MOBILE NOW IN TWIN CITIES



We are delighted to collaborate with Ronald McDonald House Charities on the Ronald McDonald Care Mobile, a mobile dental unit that provides cost-effective, highquality dental care directly to underserved children in Minnesota. The 40-foot, 26,000 pound vehicle was built specifically to deliver pediatric dental services. The Care Mobile features two dental operatories and a welcoming reception area. Ronald McDonald Care Mobile dental services include:

- Regular cleanings
- Fluoride treatments
- Sealants
- X-rays
- Fillings
- Extractions
- Education on proper dental care

The Ronald McDonald Care Mobile is able to visit a number of community sites:

- Schools
- Community festivals and events
- Youth programming
- · Community and family-based organizations

We are pleased that we could provide the seed money to fund this endeavor. Thanks to Ecolab and the Ronald McDonald Care Mobile team, who brought the van to fruition. We are grateful we could play a supporting role in this project. The Care Mobile was launched in the Twin Cities in August 2009.

YOU EARNED IT – NOW PROTECT IT; BEST PRACTICES IN CASH MANAGEMENT: THE RX FOR PROTECTION

Written by: Harlene S. Stevens, CPA As published in Insurance Solutions Newsletter, July/August 2009 www.dental-ins-solutions.com

In today's unpredictable environment of small or non-existent investment returns, job losses at an all time high, and collections low, both dentists and staff should pay extra attention to their practice's cash management policies and procedures.

During my own experience as an accountant, I have seen the following:

- An outside bookkeeper conspired to defraud a large dental practice by opening an account under the name of a phantom vendor. Because the dentist trusted the bookkeeper, he approved the expenses and signed the checks.
- A dental practice lost track of a \$5,000 insurance check. Only when the practice moved was the check found it had fallen behind a desk.
- A part-time employee who worked during the evenings and weekends had access to the credit card machine and processed weekly credits to her personal credit card.
- In many practices, NSF checks (insufficient funds) and insurance refunds are not properly adjusted back to patient accounts, and provider write-offs are not calculated correctly when patients have multiple plans.

In each of these situations—some of which are malicious and some just messy — following proper procedures in cash management would likely have prevented the problems. The solution lies in a combination of checks and balances, proactive policies, and system-wide accountability.

Dentists are often so consumed with patient care that they tend to be unaware of flaws in their cash management systems, which makes them particularly vulnerable to fraud. Unfortunately, far too many dentists have been victimized, either by employees in trusted positions or by poor controls in their cash management systems.

Consistency is critical

Preventing cash-related fraud necessitates following consistent protocols. Deposits should always be tied to the practice management software's daily report, which should include all encounters, charges, collections and write-offs for the day. If 20 patients are seen on a particular day, the daily report should reflect 20 patients. The total deposits on the daily report generated from the practice management software should reconcile with the daily bank deposit slip plus any credit card receipts. The bank deposit slip should be reviewed by the office manager or dentist. If the dentist does not make his/her own bank deposits, the stamped deposit slip should be compared to the daily register. With this practice, a deposit slip should be prepared for each day that the practice has collections, regardless of the amount or when the deposit is actually made at the bank. It is imperative that each day's bank deposit slip and credit card activity be entered into the dentist's accounting software (i.e., QuickBooks® or Quicken®), using the same date as the bank deposit slip. Following this practice should ensure that the collections for both systems agree. In addition, the dentist or office manager should review the daily register to make certain that there are no unauthorized write-offs, discounts, or adjustments.

How does your practice ensure that all patients seen on a particular day have been accounted for? If your office uses a sign-in sheet, make sure that the daily report agrees with the sign-in sheet. If your practice utilizes encounter forms, there should be an encounter form for every patient, even if there were no charges incurred. Each and every patient seen on any given day should be accounted for, both in the appointment book and on the daily report. By comparing the appointment book to the daily report, it should be easy to identify discrepancies, not to mention deposits left in lab coat pockets and between car seats.

The people part

Several of my cash management recommendations focus on personnel. Make sure you always do the following:

- Run background checks to verify credit history as well as employment history.
- Establish a policy of mandatory vacation. If an employee closely associated with cash activities never takes time off, that could indicate a problem.
- Insist on separation of duties. The individual who opens the mail should not be the person who posts payments. Not only is this a sound business practice in terms of cash management, but you will find it very helpful when valued employees are out of the office.
- Look at your accounts receivable on a monthly basis. This number should remain fairly consistent.
- Eliminate the temptation to take petty cash without accounting for it. Maintain a fixed balance, and reconcile it at month's end. A dental office has no need to keep a large petty cash balance.

Beyond the obvious

It's an unfortunate truth – when people are desperate, the possibility of fraudulent activity increases. It's not enough to monitor petty cash. Dentists and their accountants need to look beyond the obvious. As a case in point, at a mid-sized dental practice, it was discovered that the insurance coordinator was consistently upcoding procedures in order to pad insurance reimbursements. For example, she would report a one-surface amalgam (billable at \$150) as a two-surface amalgam (billable at \$195). The extra \$45 did not go into her pocket. It went to the practice unbeknownst to the practice owners, and her high collection yields earned her praise and hefty bonuses. While this may not seem as devious as someone who steals money, by submitting fraudulent information to insurance companies, she was putting the practice owners at risk of losing their dental licenses.

Paranoia not required

Despite these words of caution, there is no need for paranoia. Rather, dentists should continue to do what they do best care for patients and prevent disease. What is needed is a professional audit of cash management techniques, plus an acknowledgment that bad things happen in good offices, especially those less aware of the possibilities.

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2010 STAR of the North Meeting

Mark your calendars for April 22 through April 24 at the Saint Paul RiverCentre. Delta Dental of Minnesota will be at **booth #227**.

We look forward to seeing you there!



Thank You!

To all providers who treat public programs patients, we would like to thank you for your continued service.

Special Edition is published for participating dentists. Article ideas and questions from readers are welcome. **Publisher:** Delta Dental of Minnesota. **Send questions or comments to:** Editor, Delta Dental of Minnesota, 3560 Delta Dental Drive, Eagan, MN 55122, E-mail: editor@deltadentalmn.org.

DDMN.008.05

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