



5 Steps to Getting Patient Portion Estimates You Can Trust

Presenter Information

Ashley Olds

- 14 years of dental experience.
- Certified Dentrrix Ascend Trainer for 2.5 years.
- Dentrrix Ascend Trainer of the Year for 2022.
- “I have a true passion for getting offices acquainted with their Ascend program and establishing a workflow that will not only work for them but let them excel in all areas from patient care to profitability.”



In this webinar:



Adding a New
Insurance Carrier



Adding a New
Insurance Plan



Building & Applying Fee
Schedules



Setting Up Coverage
Exceptions



Setting Up
Predetermination Alerts



Adding a New Insurance Carrier

Adding a New Insurance Carrier

Adding a New Insurance Plan

Building & Applying Fee Schedules

Setting Up Coverage Exceptions

Setting Up Predetermination Alerts

Introduction

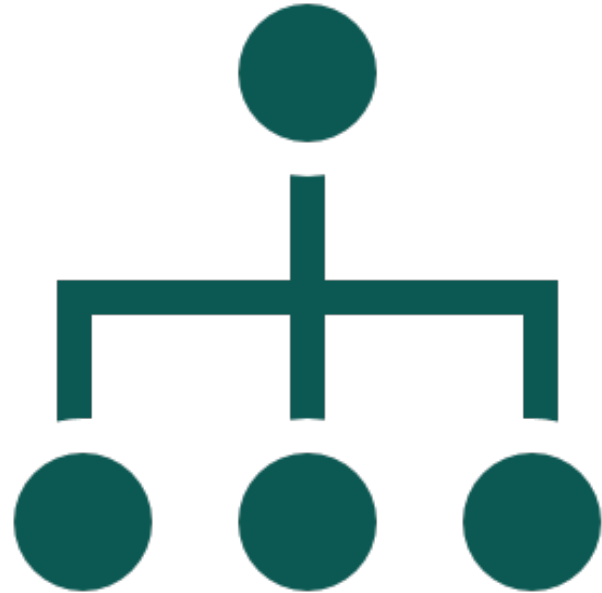
In this section we will discuss:

- Carriers work at the organization level.
- The Henry Schein One carrier database.
- Rights recommended for insurance carriers.
- Recommendations for a clean carrier database.
- Steps to ensure a carrier is recognized as in-network.



Organization or Location?

- When you add a carrier, insurance plan, or fee schedule, it is available to your entire organization.
- However, fee schedules are *applied* at the location level.



User Rights



We recommend you:

- Limit the number of people who can add carriers and plans
- Keep your data clean and accurate

Security Category	Assigned Access Rights		
▼ Insurance	● Review Insurance	● Create Carriers	● Edit Carriers
<input type="checkbox"/> All available rights			
<input checked="" type="checkbox"/> Review Insurance	<input type="checkbox"/> Create Insurance Claims	<input type="checkbox"/> Edit Insurance Claims	
<input type="checkbox"/> Delete Insurance Claims	<input type="checkbox"/> Send Insurance Claims	<input checked="" type="checkbox"/> Create Carriers	
<input checked="" type="checkbox"/> Edit Carriers	<input type="checkbox"/> Delete Carriers	<input type="checkbox"/> Create Insurance Plans	
<input type="checkbox"/> Edit Insurance Plans	<input type="checkbox"/> Delete Insurance Plans	<input type="checkbox"/> Edit Benefits	
<input type="checkbox"/> Create Fee Schedules	<input type="checkbox"/> Edit Fee Schedules	<input type="checkbox"/> Delete Fee Schedules	
<input type="checkbox"/> Add Ins. Plan to Patient	<input type="checkbox"/> Edit Ins. Plan for Patient	<input type="checkbox"/> Manage Subscriber Authorizations ⓘ	
<input type="checkbox"/> Edit Ins. Benefits for Patient	<input type="checkbox"/> Remove Ins. Plan from Patient ⓘ		



Note: Team members without rights to add insurance plan elements can still attach insurance to patients.

Carrier Database



Important:

- Henry Schein One maintains a database of supported payers.
- The database is updated regularly.
- Selecting a carrier from the list of supported payers ensures that your practice has up-to-date information for that carrier.

Insurance Carriers

Add New Carrier: CB621

Select carrier *

Carrier Name	Payer ID
Blue Care Dental Traditional- BCBS IL	CB621
Blue Cross Blue Shield of IL (FEP)	CB621
Blue Cross Blue Shield of Illinois	CB621
Chicago Regional Council of Carpenters	CB621

DENTRIX ASCEND

Adding a New Carrier

Click here to watch [Adding a New Carrier](#)



Tip

Avoiding Duplicate Insurance Carriers

- Look to see if the carrier has already been added to your practice!
- Search before you click **Add Carrier**.
- Ascend will warn you as a precautionary backup.

Insurance Carriers

[Add Carrier](#) [Show All Carriers](#)

Name	Group Plan Name	Group #	Payer ID
Blue Cross Blue Shield of Illinois	Big Kahuna Burger	330231089	CB621
Blue Cross Blue Shield of Illinois	CHOAM	745356132	CB621
Blue Cross Blue Shield of Illinois	Dunder Mifflin	207807424	CB621
Blue Cross Blue Shield of Illinois	Globex	875003754	CB621

Home Schedule Patient Patient Search

Error

This carrier has already been added to your practice.

Select carrier *

Blue Cross Blue Shield of Illinois

This searches all known carriers in the Henry Schein One database.

Unsupported Payers

Carrier NOT in HSONe database (06126)

- If you type or modify the carrier name, it becomes an unsupported insurance carrier.

This means that:

- The clearinghouse will print and mail a hard copy of the claim to the payer.
- You cannot add electronic attachments. If there are attachments, you will have to mail them yourself.

Insurance Carriers

Add New Carrier: US Health Plus

Select carrier *

Warning. The carrier "US Health Plus" does not match one of the supported carriers in the Henry Schein One database.

To select a supported carrier, please refine your search criteria.
To create a new (unsupported) carrier, please use the button below.

A Payer ID of 06126 will be assigned to an unsupported carrier. The Payer ID cannot be edited once a carrier has been added. Claims for unsupported carriers may be printed and mailed by the clearinghouse, rather than processed electronically. Electronic attachments and eligibility verifications will not work for unsupported carriers.

[Use New Carrier Name](#)

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Using the Payer Search Tool

Click here to watch [Using the Payer Search Tool](#)



Tip

Linking the Carrier Website to Insurance Eligibility

- Fill out the carrier **Website** field.
- Do not include "http://" or "https://" at the beginning of the website address.
- Click the carrier name to access and log in to the insurance carrier's website for verification.

Insurance Carriers

Edit Carrier: Blue Cross Blue Shield of Texas

Payer ID * 

CB900

Does not accept Automated Eligibilities
Accepts Electronic Attachments

Available Procedures

Expected period of Insurance claim resolution

28 days

Phone number

(800) 451-0287

Ext

Fax number

(xxx) xxx-xxxx

Website

www.bcbstx.com/provider/claims/index.html

Claim Form Options

Printed claim format

American Dental Association, 2012 version



Tip

Customizing Overdue Claim Timeframes

- How long before you consider claims overdue?
- The default turnaround time is 14 days, but you can customize this time frame for each insurance carrier.
- Set the number of days in the **Expected period of Insurance claim resolution** field.

Insurance Carriers

Edit Carrier: Blue Cross Blue Shield of Texas

Payer ID * i

CB900 Does not accept Automated Eligibilities
Accepts Electronic Attachments

[Available Procedures](#)

Expected period of Insurance claim resolution

28 + - days

Unresolved Claims

[Denti-Cal Reports](#) Show only rejected claims **Off**

Blue Cross Blue Shield of Texas (800) 451-0287 [Visit carrier page](#)

Overdue Claim

Subscriber ID	1818181819	Service date	03/23/2022
Subscriber	Isaac Chiltepin	Created on	03/30/2022
Birthdate	02/24/1993	Patient	Isaac Chiltepin
		Birthdate	02/24/1993
Amount	\$ 1196.00	Status	Queued
Rendering provider	DANW - Dan Wells (DANW)	Procedures	D2751(Porcelain/Base Crown)

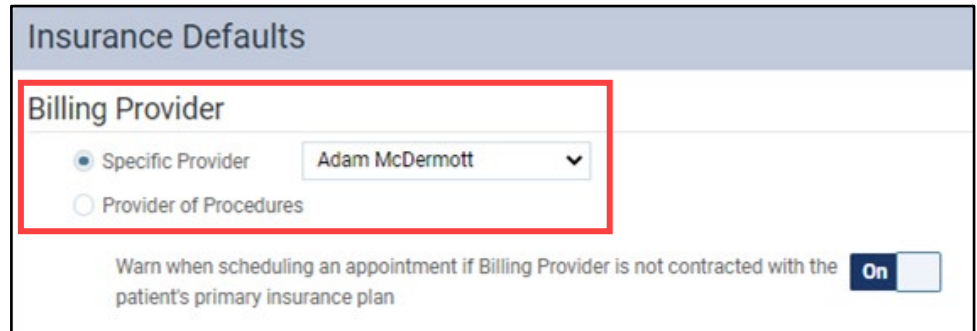
Verify Your Billing Setup

After adding a carrier, you must link it to the **Contracted With** list. To do this, first verify your billing setup.

1. From the **Settings** menu, select **Insurance Defaults**.

If you have multiple sites, each location has its own Insurance Defaults.

2. Verify your Billing Setup under Billing Provider.



Note: Requires the **Review Insurance Defaults** right.

Which Billing Setup Do You Use?

Bill by Location




Insurance Defaults

Billing Provider

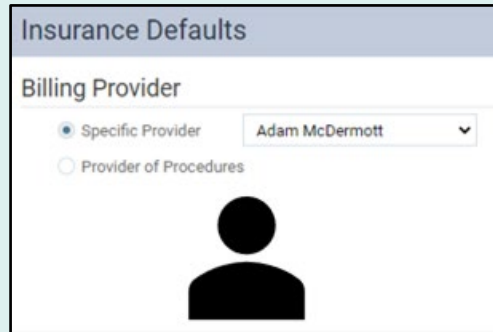
Specific Provider Provider of Procedures

Alpine Dental LLC



Your **location** is selected as the Specific Provider.

Bill by Provider




Insurance Defaults

Billing Provider

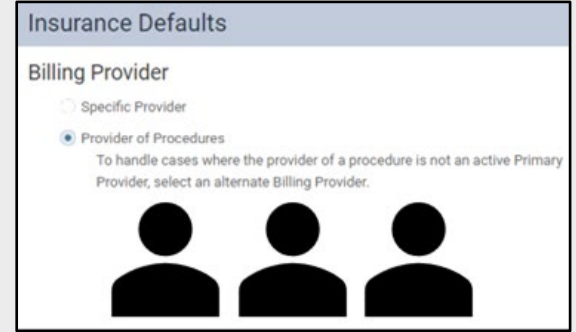
Specific Provider Provider of Procedures

Adam McDermott



One **person** is selected as the Specific Provider.

Bill by Multiple Providers




Insurance Defaults

Billing Provider

Specific Provider Provider of Procedures

To handle cases where the provider of a procedure is not an active Primary Provider, select an alternate Billing Provider.



Multiple people are selected as the Provider of Procedures.

- The treating provider is the billing provider on the claim.
- Procedure fees are based on the fee schedule attached to each provider.

Most Common Billing Methods

How to Verify Your Billing Setup

Bill by Location



Verify your setup on the **Location Information** page.

OR

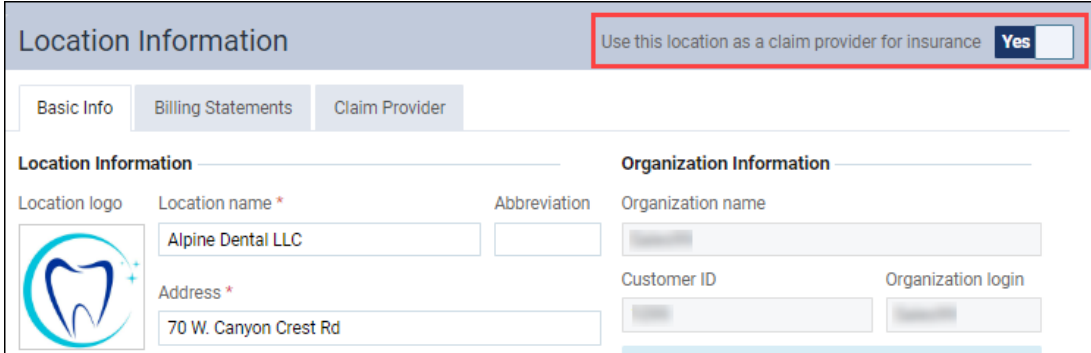
Bill by Provider



Verify your setup on the **User Account** page.

Verify your setup on the **Location Information** page.

1. From the **Settings** menu, select **Location information**.
2. Make sure the **Use this location as a claim provider for insurance** switcher is set to Yes.



Note: Requires the **Review Location Information** right.

Bill by Location



3. Select the **Claim Provider** tab.
4. Under Contracted with, click the **arrow dropdown** next to a letter to see the list of insurance carriers.
5. Verify that the correct insurance carrier(s) are selected. Edit as needed and click **Save**.

Location Information

Basic Info | Billing Statements | **Claim Provider** **3**

Information. By completing the information below, this location may be used as a billing provider for insurance cla

Claim Provider Information Billing Enti

Specialty State ID #

General Practice

TIN # * NPI # *

12-3456788 1234567893

Medicaid ID # Provider #

BCBS # BlueShield #

Prov ID ⓘ

0013

Contracted with

▶ A	3
▶ B	
▼ C 4	1

- CDS Group Health
- Central States Health & Welfare Funds
- Central United Life Insurance
- Chesterfield Resources Inc.
- CIGNA Dental Health (DMO)
- Cigna Dental Health PPO
- CIGNA/ EQUICOR **5**
- Clayton County Self Funded Dental Plan

Save **Cancel**



Verify your setup on the **User Accounts** page.

1. From the **Settings** menu, select **User Accounts**.
2. Search for and select the provider.

Settings Alpine Dental LLC Administrator 6 Betty Clocked Out

LOCATION	PRODUCTION	PATIENT CARE
Location Hours	Coverage Tables	Clinical Note Templates
Location Information	Fee Schedules	Medical Alerts Library
Patient Forms	Insurance Defaults	Patient Communications
Operatories	Procedure Codes & Conditions	Prescriptions
User Accounts	Ledger Options	Recare
User Roles	Discount Options	Referral Sources

User Accounts

mc

Last Name	First Name	Username
McDermott	Adam	amcdaniel
McMillen	Jim	Jim

Bill by Provider



4. Select the **Fees** tab.
5. Verify that the office fee schedule is selected.
6. Under Contracted with, expand a letter to see the list of insurance carriers.
7. Verify that the correct insurance carrier(s) are selected. Edit as needed and click **Save**.

Adam McDermott - User Account Information

Basic Info | User Roles & Locations | Provider Info | **Fees** | Hours

Fee Schedules:
OFFICE - Location-1

Contracted with

▶ A	2
▶ B	1
▼ C	1

- CDS Group Health
- Central States Health & Welfare Funds
- Central United Life Insurance
- Chesterfield Resources Inc.
- CIGNA Dental Health (DMO)
- Cigna Dental Health PPO
- CIGNA/ EQUICOR
- Covenant Administrators Inc

Save Cancel



Tip

Billing Provider Not Contracted Warnings

- Enable the warning on the **Insurance Defaults** page.
- Look for the orange warning triangle next to the patient's name in the appointment panel and Insurance Information page.
- Click the triangle to see who the billing provider is.

Insurance Defaults

Billing Provider



Specific Provider

Provider of Procedures

Warn when scheduling an appointment if Billing Provider is not contracted with the patient's primary insurance plan

Warning

The Billing Provider (1 - Alpine Dental LLC) is not contracted with this patient's primary insurance plan.

 **Daren Bender** 
09/21/1966 (55 years)

[Chart](#) [Ledger](#) [Tx Planner](#)

[Appt](#) [Contact Info](#) [Rel. Appts](#) [Med. Alerts](#)



RECAP

Adding a New Insurance Carrier

- Henry Schein One maintains a carrier database.
- Carriers are shared by the entire organization.
- We recommend you limit rights for carrier creation.
- Always check for duplicates before adding a new carrier.
- You must complete the billing provider **Contracted With** portion to place a carrier in-network.



If you have questions, submit them in the question box.

Where to Get Help

Webpage

- [Payor Search - Dental Insurance Eligibility](#)

Video

- [Adding Insurance Carriers and Plans](#)

Articles

- [Adding insurance carriers](#)
- [Setting up a location or an entity as a billing provider](#)
- [Setting Up RCM Rights in Dentrix Ascend](#)





Adding a New Insurance Plan

Adding a New Insurance Carrier

Adding a New Insurance Plan

Building & Applying Fee Schedules

Setting Up Coverage Exceptions

Setting Up Predetermination Alerts

Insurance Plan

Carrier Fee
Schedule

Benefits &
Deductibles

Coverage
Percentage and
Exceptions

Predetermination
Alerts

User Rights



The team members designated to create and maintain insurance plans will need the following rights:

- Edit Insurance Plans
- Create Insurance Plans
- Edit Benefits

Security Category	Assigned Access Rights		
▼ Insurance	<ul style="list-style-type: none">● Review Insurance● Create Insurance Plans	<ul style="list-style-type: none">● Create Carriers● Edit Insurance Plans	<ul style="list-style-type: none">● Edit Carriers● Edit Benefits
<input type="checkbox"/> All available rights ⬆			
<input checked="" type="checkbox"/> Review Insurance	<input type="checkbox"/> Create Insurance Claims	<input type="checkbox"/> Edit Insurance Claims	
<input type="checkbox"/> Delete Insurance Claims	<input type="checkbox"/> Send Insurance Claims	<input checked="" type="checkbox"/> Create Carriers	
<input checked="" type="checkbox"/> Edit Carriers	<input type="checkbox"/> Delete Carriers	<input checked="" type="checkbox"/> Create Insurance Plans	
<input checked="" type="checkbox"/> Edit Insurance Plans	<input type="checkbox"/> Delete Insurance Plans	<input checked="" type="checkbox"/> Edit Benefits	
<input type="checkbox"/> Create Fee Schedules	<input type="checkbox"/> Edit Fee Schedules	<input type="checkbox"/> Delete Fee Schedules	
<input type="checkbox"/> Add Ins. Plan to Patient	<input type="checkbox"/> Edit Ins. Plan for Patient	<input type="checkbox"/> Manage Subscriber Authorizations ⓘ	
<input type="checkbox"/> Edit Ins. Benefits for Patient	<input type="checkbox"/> Remove Ins. Plan from Patient ⓘ		

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Adding a New Insurance Plan

Click here to watch [Adding a New Insurance Plan](#)



Tip

How to Avoid Creating a Duplicate Plan

- Add all plan information, including group number.
- Search for the plan before adding a new plan!

Insurance Carriers

Edit Carrier: Aetna

Payer ID * ?
 Accepts Automated Eligibilities
Accepts Electronic Attachments

Expected period of Insurance claim resolution
 days

Phone number Ext Fax number

Plans/Employers

Plan/Employer Name	Group #
Acme	411889530
Acme	464112944
Acme	656708695
Acme Corp.	535108232
Acme Corp.	943610648



Tip

Attaching New Insurance to a Patient

1. Use the **Plan Search** box to search for an insurance plan.
2. If there are no search results, click **Add New Carrier or Plan**.

Note: Requires the additional **Add Ins. Plan to Patient** right.

The screenshot shows the 'Add Plan' interface. It includes fields for 'Subscriber *' (Claude Ballard) and 'Subscriber ID # *'. A search box contains 'Cody Center of the West'. Below the search box, there are radio buttons for 'Search by Carrier/Plan/Employer' (selected) and 'Search by Patient'. A message states 'No carriers or plans found for the input "Cody Center of the West"'. A button labeled 'Add New Carrier or Plan' is highlighted with a mouse cursor. The interface also shows 'Patient Information' fields like 'Relation to Subscriber' (Self) and 'Insurance coordination' (Primary).

Carrier Fee Schedule

- The fee schedule in the insurance plan represents the contracted amount the carrier agrees to pay for each procedure.

If left blank:

- The UCR fee applies.
- There will be no write-off.
- The guarantor and insurance portion estimates will be wrong.

Edit Plan: Washakie County Sch

Benefit renewal month *

July ▼

Source of payment

Commercial Insurance ▼

Type

Dental ▼

Max allowable amount fee schedule ⓘ

Select a Fee Schedule ▼

Coverage Table Benefits

Coordination of Benefits

Predeterminations



Deductibles and Benefits

Deductibles and Benefits

Deductibles

	Annual Individual	Annual Family	Lifetime Individual
	Required	Required	Required
Preventive	<input type="text"/>	<input type="text"/>	<input type="text"/>
Basic	<input type="text" value="50.00"/>	<input type="text" value="100.00"/>	<input type="text"/>
Major	<input type="text"/>	<input type="text"/>	<input type="text"/>
Ortho	<input type="text"/>		

Benefits

	Annual Individual	Annual Family	Lifetime Ortho
Maximum	<input type="text" value="1,200.00"/>	<input type="text"/>	<input type="text" value="1,500.00"/>

Note: You must save the plan before you can edit the **Benefits** table.

Source of Payment

- Commonly set to **Commercial Insurance**

Notes on Medicaid:

- Patients whose insurance plans have "Medicaid" as the Source of Payment **will not receive billing statements**, as it is illegal in many states to send billing statements to Medicaid patients.
- You can still build a plan for Medicaid in case the patient consents to paying for a non-covered service.

The screenshot shows a web interface for editing a plan titled "Edit Plan: Aetna - Acme". The "Benefit renewal month" is set to "January". The "Source of payment" dropdown menu is open, showing a list of options: "Commercial Insurance", "Blue Cross/Blue Shield", "Champus", "Commercial Insurance", "Commercial Insurance (PPO)", "Commercial Insurance (DHMO)", "Medicare Part B", and "Medicaid". The "Commercial Insurance" option is highlighted in blue, and a mouse cursor is pointing at it. Below the dropdown menu are several buttons: "Coverage Table", "Benefits", "Coordination of Benefits", and "Predeterminations".



RECAP

Adding a New Insurance Plan

- The insurance plan is the link to multiple insurance factors.
- Plans are shared by the entire organization.
- We recommend you limit rights for plan creation.
- Always check for duplicates.



If you have questions, submit them in the question box.

Where to Get Help

Video

- [Adding Insurance Carriers and Plans](#)

Articles

- [Adding insurance plans](#)
- [Updating insurance plan information](#)
- [Editing the deductibles and benefits of insurance plans](#)

Blog

- [“Use It or Lose It”: Use a Monthly Communication Plan to Fill Your Schedule](#)





Building & Applying Fee Schedules

Adding a New
Insurance Carrier

Adding a New
Insurance Plan

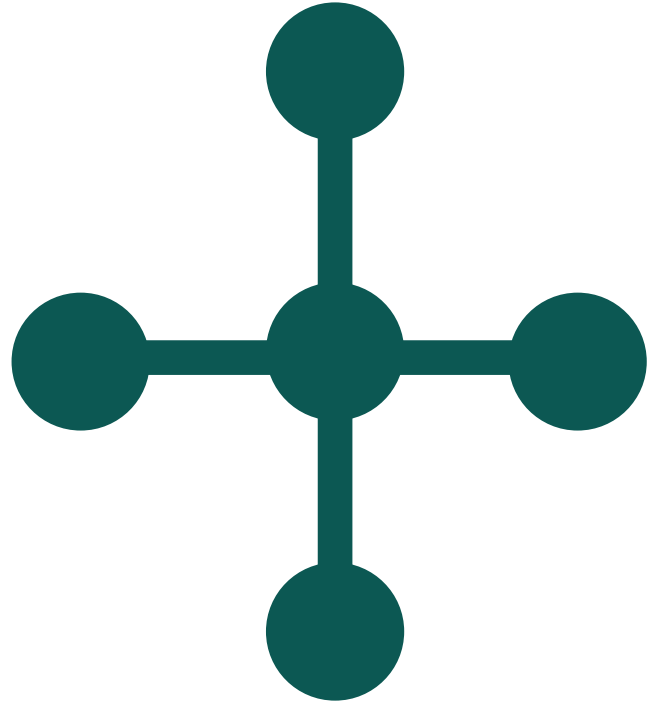
Building & Applying
Fee Schedules

Setting Up Coverage
Exceptions

Setting Up
Predetermination Alerts

Introduction

- Fee schedules are global (available to all your organization) but attached at the location level.
- You can attach a fee schedule to:
 - a provider
 - an insurance plan
 - a location in your organization
 - a patient (as a discount plan)
- Locations should have different fee schedules if the carrier changes payments by region.



User Rights



The team members tasked with creating and maintaining fee schedules will need the following rights:

- Create Fee Schedules
- Edit Fee Schedules

Security Category	Assigned Access Rights		
▼ Insurance	<ul style="list-style-type: none">• Review Insurance• Create Insurance Plans• Create Fee Schedules	<ul style="list-style-type: none">• Create Carriers• Edit Insurance Plans• Edit Fee Schedules	<ul style="list-style-type: none">• Edit Carriers• Edit Benefits
<input type="checkbox"/> All available rights			
<input checked="" type="checkbox"/> Review Insurance	<input type="checkbox"/> Create Insurance Claims	<input type="checkbox"/> Edit Insurance Claims	
<input type="checkbox"/> Delete Insurance Claims	<input type="checkbox"/> Send Insurance Claims	<input checked="" type="checkbox"/> Create Carriers	
<input checked="" type="checkbox"/> Edit Carriers	<input type="checkbox"/> Delete Carriers	<input checked="" type="checkbox"/> Create Insurance Plans	
<input checked="" type="checkbox"/> Edit Insurance Plans	<input type="checkbox"/> Delete Insurance Plans	<input checked="" type="checkbox"/> Edit Benefits	
<input checked="" type="checkbox"/> Create Fee Schedules	<input checked="" type="checkbox"/> Edit Fee Schedules	<input type="checkbox"/> Delete Fee Schedules	
<input type="checkbox"/> Add Ins. Plan to Patient	<input type="checkbox"/> Edit Ins. Plan for Patient	<input type="checkbox"/> Manage Subscriber Authorizations ⓘ	
<input type="checkbox"/> Edit Ins. Benefits for Patient	<input type="checkbox"/> Remove Ins. Plan from Patient ⓘ		

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Building & Applying Fee Schedules

Click here to watch [Building and Applying Fee Schedules](#)



Tip

Fee Schedule Naming Recommendations

- Be as descriptive as possible.
- Develop a plan, and stick to it.

Popular naming formats:

- “Payer Name - Location Name”
- “Location - Carrier”

Payer - Location

Location - Payer

Fee Schedules	
List of Fee Schedules	Create New
ACS - Alpine	
ACS - Cottonwood	
Aetna - Alpine	
Aetna - Cottonwood	
Allied Benefit Systems - Alpine	
Allied Benefit Systems - Cottonwood	
Alpine - AARP	
Alpine - ABN	
Alpine - AFLAC	
Alpine - Ameritas	
Alpine - BCBSWY	
Alpine - Concord	
Alpine Discount Fee Schedule	
American Heritage - Alpine	

Zero Value Warning

- If an office has 0.00 in a fee schedule, the whole amount for that procedure gets written off.
- This leads to inaccurate insurance and guarantor portion estimates in the Treatment Planner.



Fees for ACS - Alpine Associations

Name of fee schedule *
ACS - Alpine **Set End Date**

Increase all by
0 \$ Round up resulting values to the nearest dollar **Apply**

Code	Description	Current Fee	New Fee
D2140	Amalgam 1 Surface	\$0.00	\$ 0.00
D2150	Amalgam 2 Surface	\$0.00	\$ 0.00

Treatment Plan for Giannis Antetokounmpo [← Back to Treatment Planner](#)

Case 1 Status: Presented **Signatures** Print

Treatment plan case total: 132.00 Created on 09/01/2022
Estimated deductible applied: 0.00 Presented on 09/01/2022
Estimated write-off adjustments: 132.00
Estimated insurance payment: 0.00
Estimated guarantor portion: 0.00 ⓘ

Planned Procedure

Code	Th	Surfaces	Description	Provider	Amount	Pri Ins	Patient
D2140	4	L	Amalgam 1 Surface	Brannan Greenwell	132.00	0.00	0.00



Tip

Shortcut to find a specific procedure

- Use Ctrl+f to search

Dentrix Ascend - Fee Schedules x +

ascend-sales.ident.com/pm#/feeSchedule

Home Schedule Patient Patient Search Settings Alpine Dental LLC Administrator Joel

Fee Schedules

List of Fee Schedules [Create New](#)

ACS - Alpine
ACS - Cottonwood
Aetna - Alpine
Aetna - Cottonwood
Allied Benefit Systems - Alpine
Allied Benefit Systems - Cottonwood
Alpine - AARP
Alpine - ABN
Alpine - AFLAC
Alpine - Ameritas
Alpine - BCBSWY
Alpine - Concord
Alpine Discount Fee Schedule

Select an existing Fee Schedule from the list on the left or create a new one by clicking the Create New button

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Importing Fee Schedules from File

Click here to watch [Importing Fee Schedules from File](#)

UCR Fee Schedule


- There must always be one in the **Location Information** page.
- Dentrix Ascend automatically creates a default fee schedule for each location.

Location Information

Basic Info | Billing Statements | Claim Provider

Location Information

Location logo Abbreviation

 Address *

City * State * ZIP code *

Phone number * Email

Website eTrans User ID

Accounting Information

Preferred fee schedule * Local tax * % E.g. \$100 * 5% = \$5

Carrier Fee Schedule

- Applied in the **Insurance Plan** page.
- This is the fee schedule for in-network carriers.
- Required if you to want calculate a write-off.

Insurance Carriers

Edit Plan: Blue Cross Blue Shield of Wyoming* - Washakie County School District

Plan/Employer name *	Group #	Benefit renewal month *
<input type="text" value="Washakie County School District"/>	<input type="text" value="209837465"/>	<input type="text" value="July"/>
Claim mailing address *		Source of payment
<input type="text" value="Blue Cross Blue Shield of Wyoming"/>		<input type="text" value="Commercial Insurance"/>
<input type="text" value="P.O. Box 2266"/>		Type
City *	State *	ZIP code *
<input type="text" value="Cheyenne"/>	<input type="text" value="WY"/>	<input type="text" value="82003-0000"/>
Phone number	Ext	Fax number
<input type="text" value="(800) 851-2227"/>	<input type="text"/>	<input type="text" value="(307) 634-5742"/>
Contact	Email	
<input type="text" value="Patricia Ventimiglia"/>	<input type="text" value="patricia.ventimiglia@bcbswy.com"/>	

Max allowable amount fee schedule ⓘ

Where do you get the procedure amount?

Procedure amount in the Ledger or the Treatment Planner

- If billing by provider, the UCR fee schedule located under User Accounts.
- If billing by location, the UCR fee schedule located in Location Information.

Visit 1 Total - 234.00 Appointment length (hh:mm) 1:00

Date	Code	Th	Surface	Description	Provider	Amount	Appointment
09/06/2022	D2392	15	DL	Posterior Resin Composite...	DDS1	234.00	

Enter Procedure (+)

Transaction date: 09/06/2022

Provider: DDS1 - Adam McDermott

Status: Completed

Procedure *: D2392 - Posterior Resin Composite 2s

Bill to insurance: On

Amount: \$

Tooth *:



Note: There is not currently a way to post the fee associated with a carrier fee schedule.

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PPO Insurance Recap

Click here to watch the [PPO Insurance Recap](#)

Patient Discount Plan

(Also known as in-house benefit or membership plans.)

Patient discount plans can be:

- Offered to **uninsured patients only**.
- Entered in the Basic Info tab of the **Patient Information** page.

Claude Ballard 1/15/1988 (33) M | Chart # B0000715 | Primary Contact Glen Ballard | Call me H (800) 336-8749 | Primary Provider DDS1 | Related Glen B

Patient Information

Basic Info | First name * Claude | M.I. | Last name * Ballard

Preferred name | Title | Suffix

Social Security # [info icon] | Primary provider DDS1 - Adam McDermott

Discount plan Basic (uninsured) | **Select a fee schedule *** Alpine Discount Fee Schedule

Discount plan expiration



Tip

Easily create a discount version of an existing fee schedule

1. Create a new fee schedule by copying your location fee schedule.
2. Apply a *negative* percentage in the **Increase all by** field.

New Fee Schedule

Name of fee schedule * Copy existing

Fees for Alpine Discount Fee Schedule

Name of fee schedule *

Increase all by Round up resulting values to the nearest dollar

Code	Description
------	-------------



Tip

Automatically view insurance estimates and write-offs in the Ledger

1. From the **Settings** menu, select **Ledger Options**.
2. On the Ledger Rules tab, toggle the **Automatically post contracted write-offs when claims are created** switcher to Yes.

Ledger Options

Transaction Types **Ledger Rules**

Transaction Locking Transaction lock is currently enforced for all transactions with dates that are prior (or equal to) 09/03/2022

Insurance Estimates & Write-Offs Automatically post contracted write-offs when claims are created **Yes**

Edit Procedure (+)

Transaction date 09/06/2022

Provider DDS4 - Ken Fillem

Status Completed

Procedure * D2392 - Posterior Resin Composite 2s

Bill to insurance **On**

Amount \$ 234.00

Teeth * 2

Options Insurance Estimates Diagnosis

Outstanding Insurance Estimates

Automatically calculate insurance estimates **On**

Prim. ins portion	Sec. ins portion
\$ 187.20	\$ 46.80
Ins write-off	Guar. portion
\$ 0.00	\$ 0.00

Portion estimates immediately visible



RECAP

Building & Applying Fee Schedules

- Fee schedules are shared by the entire organization but applied at the location level.
- Each location needs its own fee schedule.
- You can import fee schedules from CSV file.
- UCR fees live in the **Location Information** page; Carrier fees live in each **Insurance Plan** page.
- You can see the UCR fee decision in the **Insurance Defaults** page.



If you have questions, submit them in the question box.

Where to Get Help

Videos

- [Updating Fee Schedules from File](#)
- [Attaching Fee Schedules to In-Network Insurance Plans](#)
- [Importing Copayment Coverage Tables](#)

Articles

- [Creating fee schedules](#)
- [How to Set up a New Patient Discount](#)





Setting Up Coverage Exceptions

Adding a New Insurance Carrier

Adding a New Insurance Plan

Building & Applying Fee Schedules

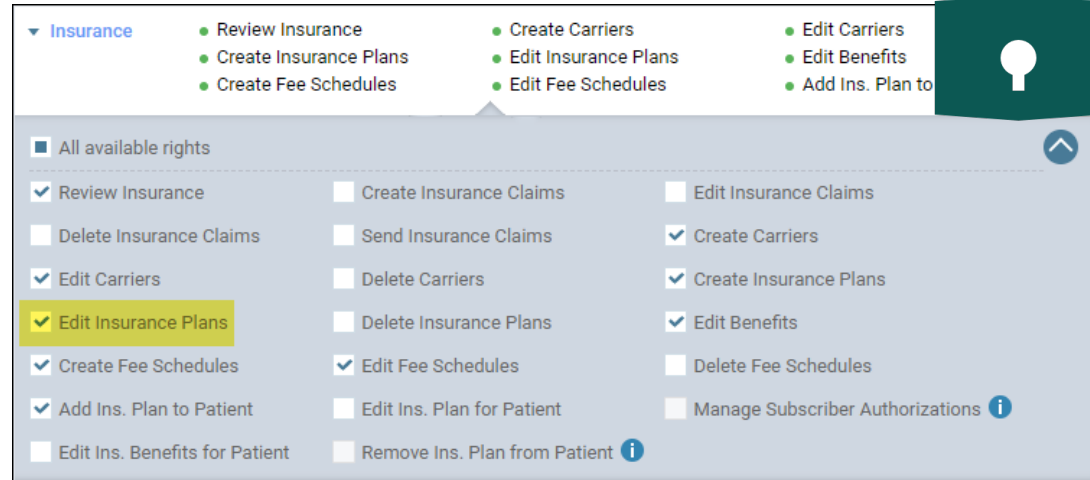
Setting Up Coverage Exceptions

Setting Up Predetermination Alerts

User Rights

The team members tasked with creating and maintaining coverage tables will need the following rights:

- Edit Insurance Plans
- Manage coverage tables (for templates)

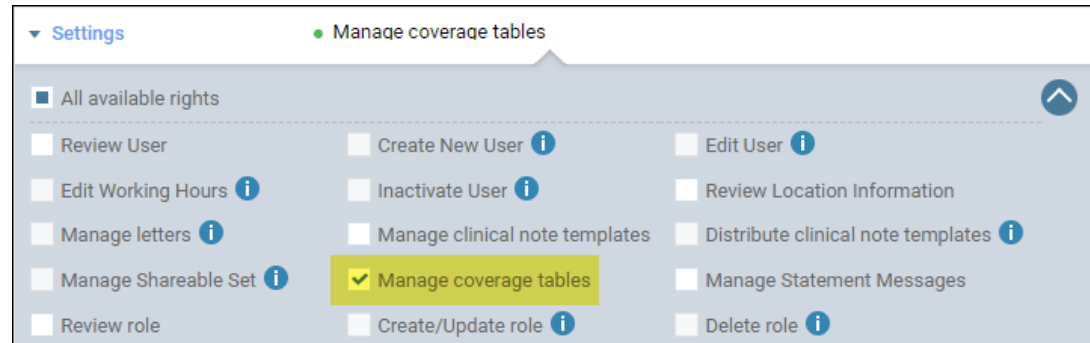


Insurance

- Review Insurance
- Create Insurance Plans
- Create Fee Schedules
- Create Carriers
- Edit Insurance Plans
- Edit Fee Schedules
- Edit Carriers
- Edit Benefits
- Add Ins. Plan to Patient

All available rights

<input checked="" type="checkbox"/> Review Insurance	<input type="checkbox"/> Create Insurance Claims	<input type="checkbox"/> Edit Insurance Claims
<input type="checkbox"/> Delete Insurance Claims	<input type="checkbox"/> Send Insurance Claims	<input checked="" type="checkbox"/> Create Carriers
<input checked="" type="checkbox"/> Edit Carriers	<input type="checkbox"/> Delete Carriers	<input checked="" type="checkbox"/> Create Insurance Plans
<input checked="" type="checkbox"/> Edit Insurance Plans	<input type="checkbox"/> Delete Insurance Plans	<input checked="" type="checkbox"/> Edit Benefits
<input checked="" type="checkbox"/> Create Fee Schedules	<input checked="" type="checkbox"/> Edit Fee Schedules	<input type="checkbox"/> Delete Fee Schedules
<input checked="" type="checkbox"/> Add Ins. Plan to Patient	<input type="checkbox"/> Edit Ins. Plan for Patient	<input type="checkbox"/> Manage Subscriber Authorizations <i>i</i>
<input type="checkbox"/> Edit Ins. Benefits for Patient	<input type="checkbox"/> Remove Ins. Plan from Patient <i>i</i>	



Settings

- Manage coverage tables

All available rights

<input type="checkbox"/> Review User	<input type="checkbox"/> Create New User <i>i</i>	<input type="checkbox"/> Edit User <i>i</i>
<input type="checkbox"/> Edit Working Hours <i>i</i>	<input type="checkbox"/> Inactivate User <i>i</i>	<input type="checkbox"/> Review Location Information
<input type="checkbox"/> Manage letters <i>i</i>	<input type="checkbox"/> Manage clinical note templates	<input type="checkbox"/> Distribute clinical note templates <i>i</i>
<input type="checkbox"/> Manage Shareable Set <i>i</i>	<input checked="" type="checkbox"/> Manage coverage tables	<input type="checkbox"/> Manage Statement Messages
<input type="checkbox"/> Review role	<input type="checkbox"/> Create/Update role <i>i</i>	<input type="checkbox"/> Delete role <i>i</i>

Coverage Tables

- A coverage table references:
 - covered procedures
 - either the percentage covered or the patient copayment
- Here you can add exceptions like not covered, downgrades, and age limitations.
- In conjunction with deductibles and benefits, a coverage table allows for accurate insurance estimates.

Coverage Table for Washakie County School District

Type: Insurance Coverage, % Replace with

Code ranges * (to edit, please click a table row) Select coverage table template Manage Exceptions Add Range

Code Range	Category	Deductible Type	Coverage %	EXC
D0100 - D1999	Diagnostic & Preventive	Preventive	100	0
D2000 - D2699	Basic Restorative	Basic	80	0
D2700 - D2999	Crowns & Major Restorative	Basic	50	0
D3000 - D3999	Endodontics	Basic	80	0
D4000 - D4999	Periodontics	Basic	80	0
D5000 - D5899	Removable Prosthodontics	Basic	50	0
D5900 - D5999	Maxillofacial Prosthodontics	Basic	50	0
D6000 - D6199	Implants	Basic	50	0
D6200 - D6999	Fixed Prosthodontics	Basic	50	0
D7000 - D7999	Oral Surgery	Basic	80	0

Save Save As New Template Cancel Clear Coverage Table

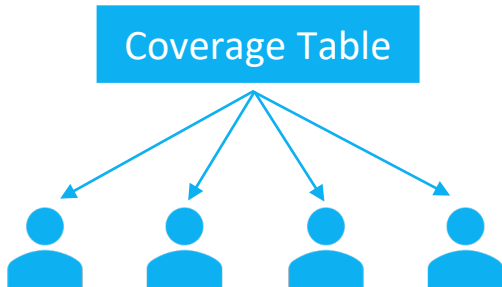
DENTRIXASCEND

Importing a Coverage Table from Template

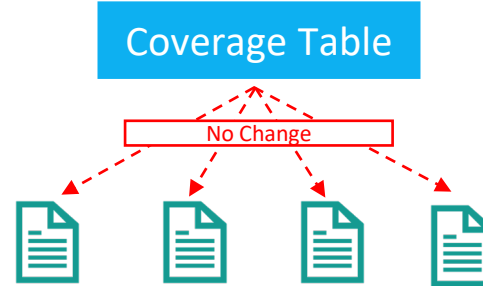
Click here to watch [Importing a Coverage Table from Template](#)

Important

- Changing a plan's coverage table affects **all** the patients covered by that insurance plan.



- Changing a plan's coverage table **does not** update the fees associated with treatment-planned procedures.





Tip

Naming Ideas for Coverage Table Templates

- Some default tables come with Ascend.
- Let the name reflect the coverage customization.
- Commonly the name reflects the coverage and exceptions in each area or region.

Coverage Table Setup	
Templates	
▼ Insurance Coverage, %	13
All Procedures	
Aetna 100/60/40	
Delta Premier	
Medicare 100	
100/90/60 PerioMaint 100%	
100/75/40	
100/80/50 Fl18 PR100 Dwn CRN60	
Standard	
Standard with Exceptions	
100/80/50 Fl>14 DwnComp XNiteG	
Cigna w/downgrades	
100/80/50 dwngde composite	
100/80/50 Fl>18 X IV Sed	
► Patient Copayment, \$	4



Tip

Change all the deductible types to Basic

- Most carriers have only one deductible type.
- If a patient comes in for multiple procedure types, they will only be charged one deductible.

Coverage Table for Washakie County School District

Type: Insurance Coverage, % Replace with Search for an existing plan

Code ranges * (to edit, please click a table row) Select coverage table template Manage Exceptions Add Range

Code Range	Category	Deductible Type	Coverage %	EXC
D0100 - D1205	Diagnostic/Preventive	Basic	100	0
D1206 - D1208	Fluoride	Basic	0	2
D1209 - D1999	Diagnostic/Preventive	Basic	100	0
D2000 - D2699	Basic Restorative	Basic	80	4
D2700 - D2999	Major Restorative/Crowns	Basic	50	0

Deductibles and Benefits

Deductibles

	Annual Individual	Annual Family	Lifetime Individual
Preventive	Required	Required	Required
Basic	50.00	100.00	
Major			
Ortho			

Managing Exceptions

Common Exceptions:

- Procedures not covered
- Downgraded procedures
- Procedure age limits

New Exception for Procedure(s) in Washakie County School District ✕

Steps **Exception Type** Select Procedure(s) Specify Options Reason for Exception

Exception Types

Not covered

Downgrade

Age limitation

[← Back](#) [Next →](#) [Cancel](#)

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Adding Coverage Exceptions

Click here to watch [Adding Coverage Exceptions](#)

HMO fixed copay plans

- Change the type to **Patient Copayment, \$**.
- Procedure code ranges change to individual procedure codes.
- Specify the patient copay for each procedure code.
- You can import copayments from a CSV file.

Coverage Table for Washakie County School District

Type: Patient Copayment, \$ Replace with Search for an existing plan

Procedures * (to edit, please click a table row) Select coverage table template Manage Exceptions Add Procedure

Code	Description	Deductible Type	Copayment \$	EXC
D0270	Bitewing Single Image	None	10.00	0
D0272	Bitewing Two Images	None	10.00	0
D0273	Bitewing Three Images	None	10.00	0
D0274	Bitewing Four Images	None	10.00	0

Save Save As New Template Import from File Cancel Clear Coverage Table

Medicaid

- Set coverage percentages to 100% to **not** charge the patient.
- Add custom ranges with 0% coverage to charge for procedures not covered.

Coverage Table for Medicaid under 21

Type: Insurance Coverage, % Replace with Search for an existing plan

Code ranges * (to edit, please click a table row) Select coverage table template Manage Exceptions Add Range

Code Range <i>i</i>	Category	Deductible Type	Coverage %	EXC
D0100 - D4999	Basic	Basic	100	0 <i>x</i>
D5000 - D7999	Major	Basic	100	0 <i>x</i>
D8000 - D8999	Orthodontic	Orthodontic	0	0 <i>x</i>
D9000 - D9999	Adjunctive General Services	Basic	100	0 <i>x</i>

Save Save As New Template Cancel Clear Coverage Table



RECAP

Setting Up Coverage Exceptions

- Coverage tables allow you to account for carrier limitations and restrictions.
- Coverage templates are shared by the entire organization.
- Coverage tables can be customized for each specific insurance plan.
- Coverage tables are key to implementing HMO fixed copay plans.



If you have questions, submit them in the question box.

Where to Get Help

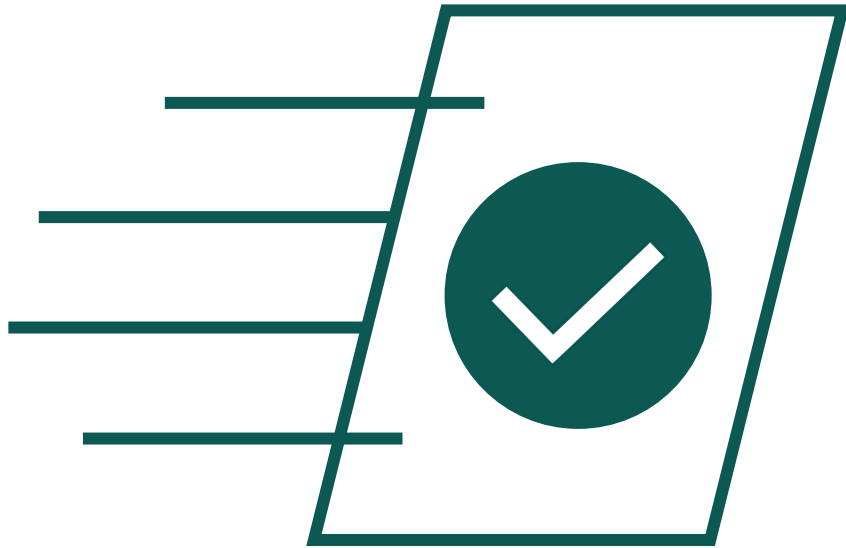
Videos

- [Creating a Percentage-based Insurance Coverage Table Template](#)

Articles

- [Understanding how insurance estimates are calculated](#)
- [Adding exceptions in coverage tables](#)
- [How to Use an In-House Benefits Plan with Dentrrix Ascend](#)





Setting Up Predetermination Alerts

Adding a New
Insurance Carrier

Adding a New
Insurance Plan

Building & Applying
Fee Schedules

Setting Up Coverage
Exceptions

Setting Up
Predetermination Alerts

Introduction

A predetermination:

- Is a written estimate from an insurance carrier
- Ensures the proposed service is covered by the dental plan
- Allows the patient to understand their financial responsibility
- Expedites claim payment

Isaac Chiltepin
02/24/1993 (29) M

Chart # None | Text me M (307) 555-7603 | Primary Provider DDS1 | Related Patients None | Chart Progress Notes | Ledger Imaging

Chart | Progress Notes | Quick Exam | Perio | Tx Planner | Imaging | Clinical Notes

Drag procedure/visit to create new case
or drag to existing cases in the list below

Active 2
Unassigned
Case 5
Case 6
Completed 2
Rejected 2

Predeterminations: 2

Predetermination Requests

Date Sent	Type	Subscriber	Carrier	Status	Amount	Att.
04/27/2022	Primary	Isaac Chiltepin	Blue Cross Blue S...	Printed	\$1,935.00	
03/29/2022	Primary	Isaac Chiltepin	Blue Cross Blue S...	Queu...	\$1,935.00	

Status message:
ADA 2012 claim form printed and status updated

Predetermination Detail - Isaac Chiltepin (Primary) \$1,935.00

Procedures | General | PreDet Info | Attachments | Status/Notes

Add Procedure | Remove Selected

Service Date	Th	Surfaces	Code	Description	Provider	Amount
05/04/2022	27		2750.e	Del of Crown or Bridge	DDS1	0.00
05/04/2022	27		D2740	Full Porcelain/Ceramic Crown	DDS1	1,683.00
05/04/2022	27		D2950	Core Buildup w/ Any Pins	DDS1	252.00

Associated conditions: No associated conditions available | Claim diagnosis codes (max. 4): S02.5XXX | Total claim charges: \$1,935.00

Save | Resubmit | Print | Cancel | Delete

User Rights



The team members tasked with setting up predetermination alerts will need the following right:

- Edit Insurance Plans

The screenshot shows the 'Insurance' user rights configuration page. At the top, there are three columns of rights: 'Review Insurance', 'Create Insurance Plans', and 'Create Fee Schedules' (all checked); 'Create Carriers', 'Edit Insurance Plans', and 'Edit Fee Schedules' (all checked); and 'Edit Carriers', 'Edit Benefits', and 'Add Ins. Plan to Patient' (all checked). Below this is a section titled 'All available rights' with a scrollable list of 15 rights. The 'Edit Insurance Plans' right is highlighted in yellow. Other rights include 'Review Insurance', 'Delete Insurance Claims', 'Edit Carriers', 'Create Fee Schedules', 'Add Ins. Plan to Patient', 'Edit Ins. Benefits for Patient', 'Create Insurance Claims', 'Send Insurance Claims', 'Delete Carriers', 'Delete Insurance Plans', 'Edit Fee Schedules', 'Edit Ins. Plan for Patient', 'Remove Ins. Plan from Patient', 'Edit Insurance Claims', 'Create Carriers', 'Create Insurance Plans', 'Edit Benefits', 'Delete Fee Schedules', and 'Manage Subscriber Authorizations'.

Insurance		
<input checked="" type="checkbox"/> Review Insurance	<input checked="" type="checkbox"/> Create Carriers	<input checked="" type="checkbox"/> Edit Carriers
<input checked="" type="checkbox"/> Create Insurance Plans	<input checked="" type="checkbox"/> Edit Insurance Plans	<input checked="" type="checkbox"/> Edit Benefits
<input checked="" type="checkbox"/> Create Fee Schedules	<input checked="" type="checkbox"/> Edit Fee Schedules	<input checked="" type="checkbox"/> Add Ins. Plan to Patient
All available rights		
<input checked="" type="checkbox"/> Review Insurance	<input type="checkbox"/> Create Insurance Claims	<input type="checkbox"/> Edit Insurance Claims
<input type="checkbox"/> Delete Insurance Claims	<input type="checkbox"/> Send Insurance Claims	<input checked="" type="checkbox"/> Create Carriers
<input checked="" type="checkbox"/> Edit Carriers	<input type="checkbox"/> Delete Carriers	<input checked="" type="checkbox"/> Create Insurance Plans
<input checked="" type="checkbox"/> Edit Insurance Plans	<input type="checkbox"/> Delete Insurance Plans	<input checked="" type="checkbox"/> Edit Benefits
<input checked="" type="checkbox"/> Create Fee Schedules	<input checked="" type="checkbox"/> Edit Fee Schedules	<input type="checkbox"/> Delete Fee Schedules
<input checked="" type="checkbox"/> Add Ins. Plan to Patient	<input type="checkbox"/> Edit Ins. Plan for Patient	<input type="checkbox"/> Manage Subscriber Authorizations <i>i</i>
<input type="checkbox"/> Edit Ins. Benefits for Patient	<input type="checkbox"/> Remove Ins. Plan from Patient <i>i</i>	

Manage Predeterminations

- For each insurance plan, select which procedures need a predetermination claim created.
- Predetermination reminders appear in the Treatment Planner.

Insurance Carriers

Edit Plan: Blue Cross Blue Shield of Wyoming

Plan/Employer name * Group #

Claim mailing address *

City * State * ZIP code

Phone number Ext Fax number

Contact Email

[Coverage Table](#) [Benefits](#)
[Coordination of Benefits](#)
[Predeterminations](#)

Manage Predeterminations

Information. By checking procedures in this list, users will be prompted to create a predetermination claim and send it to the payer when they are arranging the patient's treatment plan in the Treatment Planner. You may also search for another plan that has already been configured with predetermination settings, to replace the settings for this plan.

Search for procedure Replace with Search for an existing plan or

<input type="checkbox"/>	Required	Code	Description	Treatment Area
<input type="checkbox"/>		D0210	Intraoral Full Mouth Images	Mouth
<input type="checkbox"/>		D0220	Intraoral Periapical Images	Mouth
<input type="checkbox"/>		D0230	Intraoral Periapical Add'l	Mouth
<input type="checkbox"/>		D0240	Intraoral Occlusal Image	Mouth
<input type="checkbox"/>		D0250	Extraoral 2D projection image	Mouth
<input type="checkbox"/>		D0251	Extra-oral posterior dental radiographic image	Mouth
<input type="checkbox"/>		D0260	Extraoral Add'l	Mouth
<input type="checkbox"/>		D0270	Bitewing Single Image	Mouth

Require predetermination for procedures over * \$

Selection Tools

Ascend provides tools to make procedure selection quicker.

- A. Load Defaults
- B. Required predetermination for procedures over \$ amount
- C. Replace with existing plan
- D. Distribute Settings to other plans belonging to this carrier

Information. By checking procedures in this list, users will be prompted to create a predetermination claim and send it to the payer when they are arranging the patient's treatment plan in the Treatment Planner. You may also search for a plan that has already been configured with predetermination settings.

Search for procedure

Replace with or

<input type="checkbox"/> Required	Code	Description	Treatment Area
<input type="checkbox"/>	D0210	Intraoral Full Mouth Images	Mouth
<input type="checkbox"/>	D0220	Intraoral Periapical Images	Mouth
<input type="checkbox"/>	D0230	Intraoral Periapical Add'l	Mouth
<input type="checkbox"/>	D0240	Intraoral Occlusal Image	Mouth
<input type="checkbox"/>	D0250	Extraoral 2D projection image	Mouth
<input type="checkbox"/>	D0251	Extra-oral posterior dental radiographic image	Mouth
<input type="checkbox"/>	D0260	Extraoral Add'l	Mouth
<input type="checkbox"/>	D0270	Bitewing Single Image	Mouth

Require predetermination for procedures over * \$ 250.00

DENTRIXASCEND

Viewing Predetermination Reminders

Click here to watch [Viewing Predetermination Reminders](#)



Tip

Including Predeterminations on the Insurance Claims Page

- Toggle the **Include predeterminations** switcher to **On**.
- “PreDet” appears in the **Claim Type** column.

Home Schedule Patient + Isaac Chiltepin Settings Alpine De... Administra... Kayla

Isaac Chiltepin 02/24/1993 (29) M Chart # None Text me M (307) 555-7603 Primary Provider DDS1 Related Patients None Chart Progress Notes Ledger Imaging

Insurance Claims Include predeterminations **On**

Patient	Service Date	Created On	Amount	Claim Type	Subscriber	Carrier	Att.	Status
Isaac Chiltepin	05/04/2022	03/29/2022	\$1,935.00	PreDet (Pri...	Isaac Chiltepin	Blue Cross Blue Shiel...		Queued
03/29/2022 11:00 AM jbdwln Claim submitted								
Isaac Chiltepin	08/24/2021	08/24/2021	\$1,000.00	Primary	Isaac Chiltepin	Blue Cross Blue Shiel...		Queued
08/24/2021 11:23 AM kbowman Claim submitted								



RECAP

Setting Up Predetermination Alerts

- Predetermination management is specific to each insurance plan.
- Management tools let you import or distribute configurations among insurance plans.
- Predetermination reminders appear in the Treatment Planner.



If you have questions, submit them in the question box.

Where to Get Help

Video

- [Setting Up Predetermination Reminders](#)

Article

- [Creating predeterminations](#)



RECAP



Adding a New
Insurance Carrier



Adding a New
Insurance Plan



Building & Applying Fee
Schedules



Setting Up Coverage
Exceptions



Setting Up
Predetermination Alerts