

**DENTRIXASCEND**

Practice Success



## Getting the Right Numbers in the Dentrrix Ascend Treatment Planner



### Presenter Information

**Katie Nielsen**

- Certified Dentrrix trainer for 20 years. Dentrrix Ascend trainer for 7 years.
- Awarded Dentrrix Ascend Trainer of the Year (2016) and Dentrrix Ascend Spirit award (2018).
- An expert in helping offices create a predictable and profitable workflow.



**DENTRIXASCEND**

## In this course:



Understanding the estimated guarantor portion



Verifying your billing setup



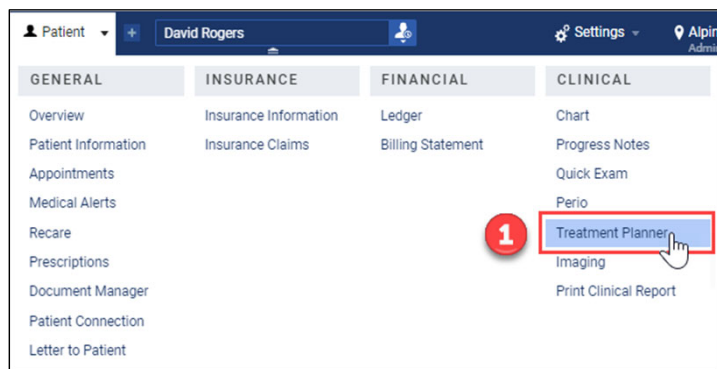
Verifying insurance eligibility



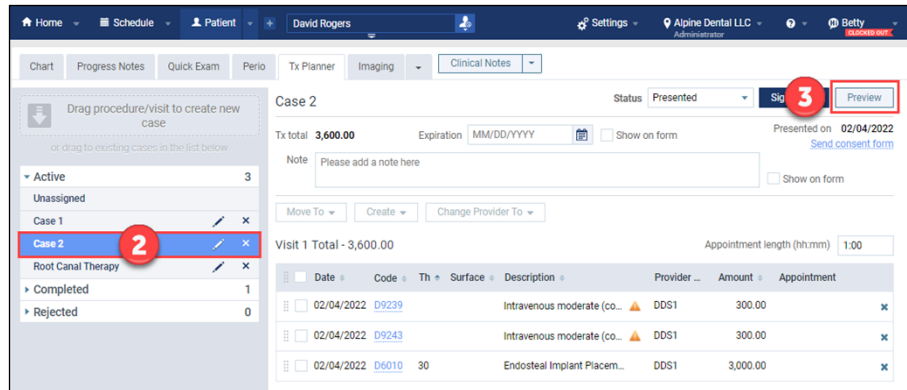
Attaching insurance fee schedules

## Introduction to the Treatment Planner

1. Open the **Patient** menu and select **Treatment Planner**.



2. Select the **Treatment Case** to open the treatment plan.
3. Click **Preview** to present the treatment plan to a patient.



## Treatment Plan Example

- A. Treatment plan case breakdown
- B. Insurance Benefits
- C. Planned Procedures

Treatment Plan for David Rogers

Case 2 Status: Presented

Treatment plan case total: 3,600.00  
 Estimated deductible applied: 0.00  
 Estimated write-off adjustments: 1,501.00  
 Estimated insurance payment: 882.00  
 Estimated guarantor portion: 1,217.00

Created on 02/04/2022  
Presented on 02/04/2022

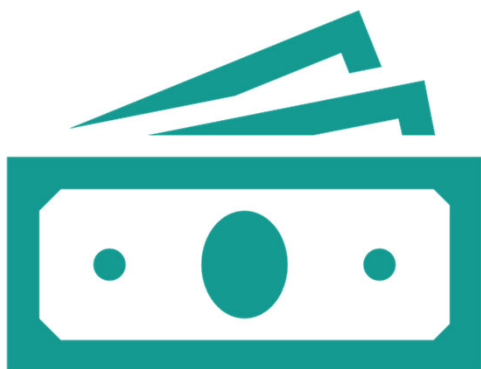
Insurance Benefits  
Primary insurance plan: Georgia-Pacific, CIGNA/ EQUICOR

	Benefits Expire	Annual Plan Benefits	Plan Deductibles		
			PREVENTIVE	BASIC	MAJOR
Patient Primary	12/31/2022	2,500.00	0.00	50.00	-
Family Primary	12/31/2022	5,000.00	0.00	75.00	-

Planned Procedures

Code	Th	Surfaces	Description	Provider	Amount	Pri Ins	Patient
D6010	30		Endosteal Implant Placement	Adam McDermott	3,000.00	882.00	882.00
D9239			Intravenous moderate (conscious) sedation/analgesia - first 15 minutes	Adam McDermott	300.00	0.00	192.00
D9243			Intravenous moderate (conscious) sedation/analgesia -- each add'l 15 minute...	Adam McDermott	300.00	0.00	143.00





## Understanding the Estimated Guarantor Portion

### Benefits of the Estimated Guarantor Portion

- Allows you to view details of the estimated guarantor portion.
- Keeps you from digging to find fee schedules, coverage tables, and benefit information.
- Provides insights to allow you to discuss patient benefits with confidence.



**Tip:** Click the Info icon to learn more about the estimated guarantor portion.

**Treatment Plan for David Rogers**

Case 2

Treatment plan case total:	3,600.00
Estimated deductible applied:	50.00
Estimated write-off adjustments:	1,501.00
Estimated insurance payment:	1,125.00
Estimated guarantor portion:	974.00

Insurance  
Primary  
Patient  
Family  
Planned  
Code

**Guarantor Portion**

This link allows you to view details of the estimated guarantor portion for the treatment-planned procedures. For more information, read [Viewing the details of an estimated guarantor portion for a treatment plan in the Resource Center.](#)

[Got it!](#)

## Using the Estimated Guarantor Portion Link

- Click the **Estimated guarantor portion** link to open the Guarantor Portion page and see the details of the treatment plan.



**Tip:** Review how all the numbers add up BEFORE you present a plan to a patient.

Treatment Plan for David Rogers

Case 2 Status: Presented

Treatment plan case total: 3,600.00  
 Estimated deductible applied: 50.00  
 Estimated write-off adjustments: 1,901.00  
 Estimated insurance payment: 1,125.00  
 Estimated guarantor portion: 974.00 (i)

Insurance Benefits  
 Primary insurance plan: Georgia-Pacific, CIGNA/ EQUICOR

	Benefits Expire	Annual Plan Benefits	Plan Deductibles		
			PREVENTIVE	BASIC	MAJOR
Patient Primary	12/31/2022	2,500.00	0.00	50.00	-
Family Primary	12/31/2022	5,000.00	0.00	75.00	-

Planned Procedures

Code	Th	Surfaces	Description	Provider	Amount	Pri Ins	Patient
D6010	30		Endosteal Implant Placement	Adam McDermott	3,000.00	857.00	907.00
D9239			Intravenous moderate (conscious) sedation/analgesia - first 15 minutes	Adam McDermott	300.00	153.60	38.40
D9243			Intravenous moderate (conscious) sedation/analgesia - each add'l 15 minute...	Adam McDermott	300.00	114.40	28.60

The Guarantor Portion page includes two views:

- Summary View
- Detailed View

Guarantor Portion

Summary View Detailed View

Charge Description	Patient Name	Charge Amount	Primary Allowable Amount	Primary Coverage, %	Primary Copayment, \$	Primary Deductibles Remaining	Primary Insurance Portion Remaining	Secondary Allowable Amount	Secondary Coverage, %
Ledger Items (Guarantor...)									
Tx Case - Case 2									
Visit 1									
D6010 - Endosteal Implant Placement 02/04/2022	David Rogers	3,000.00	1,764.00	50.000%		50.00	-857.00		
D9239 - Intravenous moderate (conscious)... 02/04/2022	David Rogers	300.00	192.00	80.000%		0.00	-153.60		
D9243 - Intravenous moderate (conscious)... 02/04/2022	David Rogers	300.00	143.00	80.000%		0.00	-114.40		

# The Summary View

The Summary View shows a simplified breakdown of the treatment plan.

Guarantor Portion							Summary View	Detailed View	?	← Back to Tx Case Preview	
Charge Description	Patient Name	Charge Amount	Insurance Portion Remaining	Credit Adjustment Amount	Payments Made	Guarantor Portion					
Ledger Items (Guarantor Account)							1	2	3	4	28
Tx Case - Case 2											3
Visit 1											
D6010 – Endosteal Implant Placement 02/04/2022	David Rogers	3,000.00	-882.00	-1,236.00		882.00					
D9239 – Intravenous moderate (conscious) sed... 02/04/2022	David Rogers	300.00	0.00	-108.00		192.00					
D9243 – Intravenous moderate (conscious) sed... 02/04/2022	David Rogers	300.00	0.00	-157.00		143.00					
						Guarantor portion in Ledger	\$4,140.00				
						Guarantor portion for this Tx Case	\$1,217.00				
						Total unappts	-\$28.40	Total guarantor portion	\$5,328.60		



# The Detailed View

The Detailed View is your home base for resolving your treatment plan issues.

Guarantor Portion															Summary View	Detailed View	?	← Back to Tx Case Preview						
Charge Description	Patient Name	Charge Amount	Primary Allowable Amount	Primary Coverage, %	Primary Copayment, \$	Primary Deductibles Remaining	Primary Insurance Portion Remaining	Secondary Allowable Amount	Secondary Coverage, %	Secondary Copayment, \$	Secondary Deductibles Remaining	Secondary Insurance Portion Remaining	Credit Adjustment Amount	Payments Made	Guarantor Portion									
Ledger Items (Guarantor...															1	2	3	4	5	6			20	
Tx Case - Case 2																								3
Visit 1																								
D6010 – Endosteal Implant Placement 02/04/2022	David Rogers	3,000.00	1,764.00	50.00%		50.00	-857.00					0.00	-1,236.00		907.00									
D9239 – Intravenous moderate (conscious)... 02/04/2022	David Rogers	300.00	192.00	80.00%		0.00	-153.60					0.00	-108.00		38.40									
D9243 – Intravenous moderate (conscious)... 02/04/2022	David Rogers	300.00	143.00	80.00%		0.00	-114.40					0.00	-157.00		28.60									
															Guarantor portion in Ledger	\$1,495.76								
															Guarantor portion for this Tx Case	\$974.00								
															Total unapplied credits	-\$28.40	Total guarantor portion	\$2,441.36						



## Links in the Detailed View

Click a link to obtain more information.

- Useful for troubleshooting estimates
- Indicates an exception such as a downgrade or age limitation

Guarantor Portion								
<span>Summary View</span> <span>Detailed View</span>								
Charge Description	Patient Name	Charge Amount	Primary Allowable Amount	Primary Coverage, %	Primary Copayment, \$	Primary Deductibles Remaining	Primary Insurance Portion Remaining	Secondary Allowable Amount
Ledger Items (Guarantor...)								
Tx Case - Case 1								
Visit 1								
D2720 - Resin/HNM Crown 09/07/2021	David Rogers	739.20	739.20	90.000%		50.00	-620.28	
D2392 - Posterior Resin Composite 2s 01/12/2022	David Rogers	250.00	234.00	80.000%		0.00	-187.20	
D7140 - Routine Extraction 11/16/2021	David Rogers	97.20	97.20	80.000%		0.00	0.00	



## Example #1

### Bill To Insurance Link

- If the Bill to Insurance switcher is off in the Edit Procedure box, the procedure amount will not be calculated in the Estimated insurance payment.
- Links in the Detailed View tell you when the **Bill to Insurance** switcher is Off.

Edit Procedure (+)

Transaction date: 02/04/2022

Provider: DDS1 - Adam McDermott

Status: Tx Plan

Procedure: D2750 - Porcelain/HNM Crown

Bill to Insurance:  Off

Amount: \$ 1,685.00

Tooth #: 14

Note: Enter a note here

Save Cancel

<span>Summary View</span> <span>Detailed View</span>		
Primary Deductibles Remaining	Primary Insurance Portion Remaining	Secondary Allowable Amount
0.00	0.00	
	<a href="#">Bill to Insurance</a> Bill to insurance is off.	



## Example #2

### Benefits Remaining Link

- Blue links under the Primary Insurance Portion Remaining show you the benefits remaining as of this procedure.

Primary Deductibles Remaining	Primary Insurance Portion Remaining	Secondary Allowable Amount
50.00	<a href="#">-620.28</a>	
0.00		
50.00	<a href="#">-37.76</a>	

**Benefits Remaining**  
\$1,879.72

## Example #3

### Coverage Exception Link

- This link indicates a coverage exception.
- The coverage has been downgraded to a 1 surface Amalgam. The insurance will cover 80% of this procedure and the patient will make up the difference.

Primary Allowable Amount	Primary Coverage, %	Primary Copayment, \$
739.20	<a href="#">Coverage Exception</a>	
	80.000%	

**Coverage Exception**  
Coverage downgraded to D2150





## Tip

### Two Ways to See Ledger Info

1. Click the dropdown in the Detailed View to view the ledger items for an entire household.
2. You can also click the Patient Portion link in the Ledger to open the same information for the patient.

The screenshot shows two parts of a software interface. The top part is titled 'Guarantor Portion' and contains a table with columns for 'Charge Description' and 'Patient Name'. A dropdown menu is open, showing 'Ledger Items (Guarantor...)' and 'x Case - Case 2'. Below this is another table with columns for 'Charge Description', 'Patient Name', and percentages. The bottom part of the screenshot is titled 'Ledger' and shows a summary table with columns for 'Unapplied Credits', 'Insurance Portion', 'Write-Off Adjustment', and 'Patient Portion'. The 'Patient Portion' value is highlighted in a red box.

Charge Description	Patient Name			
D6010 - Endo Implant Place 02/04/2022	Samantha J Rogers	936.00	0.00	50.000%
D2750 - Porcelain/HNM Crown 01/29/2020	Samantha J Rogers	182.00	104.00	80.000%
D4342 - Scaling & Root Planing (1-3) 09/02/2020	Samantha J Rogers	182.00	104.00	80.000%
D4342 - Scaling & Root Planing (1-3) 11/19/2020	Samantha J Rogers	182.00	104.00	80.000%
D2392 - Posterior Resin	Samantha J Rogers	234.00	234.00	80.000%

Unapplied Credits	0 - 30	31 - 60	61 - 90	91+	Balance	Insurance Portion	Write-Off Adjustment	Patient Portion
-28.40	+1.68k	+278.00	+0.00	+752.20	= 2.68k	28.16	- 0.00	= 2.65k



## RECAP: Understanding the Estimated Guarantor Portion

View the details of the estimated guarantor portion.

- deductibles
- coverage amounts
- exceptions
- discounts
- credit adjustment amounts

Review links when you want to get more information.

- coverage exception link
- bill to insurance link
- benefits remaining link



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

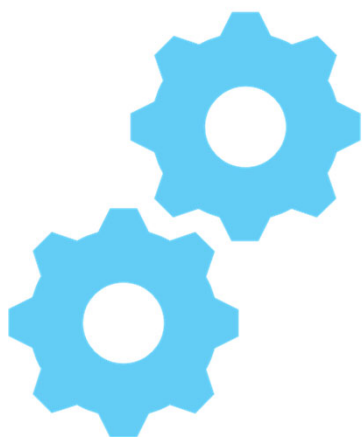
## Where to Get Help

### Videos

- [Explaining the Guarantor Portion](#)

### Articles

- [Adding exceptions in coverage tables](#)
- [Breaking Down Treatment Plan Costs](#)
- [Gaining Insight into the Patient Portion](#)



## Verifying Your Billing Setup

## How Billing Setup Affects Treatment Plans

### Billing setup really *does* matter!

When billing is not properly set up, it can result in:

- No write-off adjustments
- Inaccurate insurance payment estimates
- Inaccurate guarantor portion estimates

Treatment Plan for David Rogers	
Case 2	
Treatment plan case total:	3,600.00
Estimated deductible applied:	50.00
Estimated write-off adjustments:	0.00
Estimated insurance payment:	1,955.00
Estimated guarantor portion:	1,645.00 ⓘ

## Understanding the Billing Setup in Dentrix Ascend

There are three interconnected pages of the insurance billing process in Dentrix Ascend:

1. Insurance Defaults
2. Location Information
3. Provider User Accounts

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
Schedule Template		
Credit Card Options		
Appointment Colors		

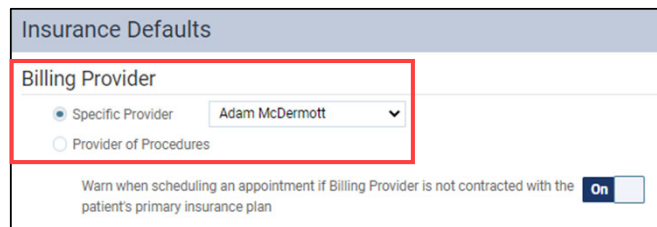
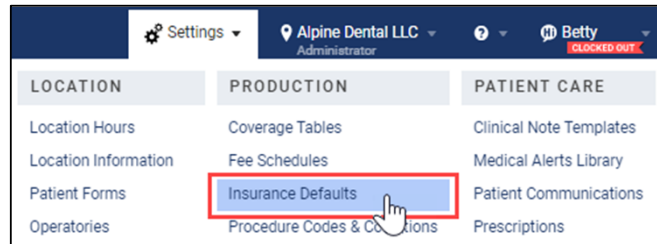


**Tip:** Verify your billing setup if you think treatment planner estimates are inaccurate.

## Verifying Your Billing Setup

Verify your setup on the Insurance Defaults page.

1. Open the **Settings** menu.
2. Click **Insurance Defaults**.  
**Note:** If your organization has multiple sites, each location has its own Insurance Defaults.
3. Verify your Billing Setup under Billing Provider.



## Which Billing Setup Do You Use?

**Bill by Location**

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

**Bill by Provider**

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

**Bill by Multiple Providers**

**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

- **Step 1:** Verify your setup on the Location Information page.
- **Step 2:** Verify that a fee schedule is NOT selected on the User Account page(s).

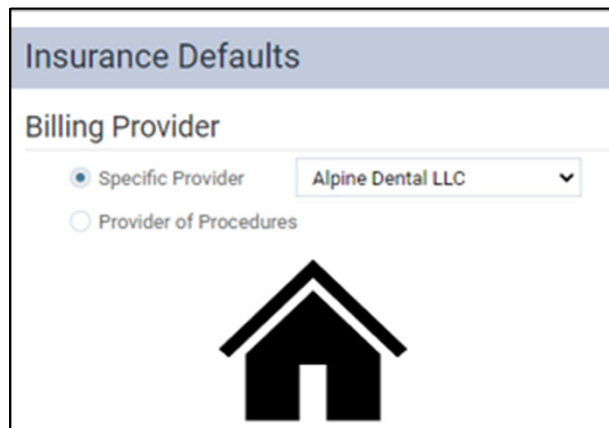
OR

### Bill by Provider

- Verify your setup on the User Account page.

### Bill by Location

Let's verify the billing setup for offices that **Bill by Location**.




Insurance Defaults

Billing Provider

Specific Provider Alpine Dental LLC ▼

Provider of Procedures

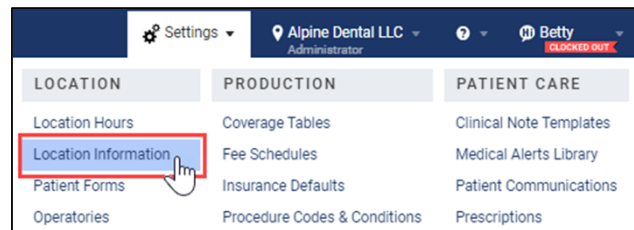


## Bill by Location

Step 1: Verify your setup on the Location Information page.

1. Open the **Settings** menu.
2. Click **Location information**.

\*You must have the Manage Location Information right to perform this task.



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## 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**.

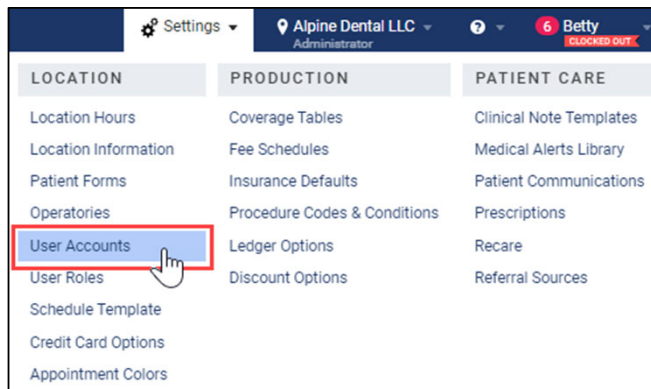


# DENTRIXASCEND

Bill by Location 

Step 2: Verify that a fee schedule is NOT selected on the User Account page(s).

1. Open **Settings** menu.
2. Click **User Accounts**.
3. Search for and select the provider.



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
<b>User Accounts</b>	Ledger Options	Recare
User Roles	Discount Options	Referral Sources
Schedule Template		
Credit Card Options		
Appointment Colors		



User Accounts

mc

Last Name	First Name	Username
McDermott	Adam	amcdaniel
McMillen	Jim	Jim
Chelman	Doris	Doris

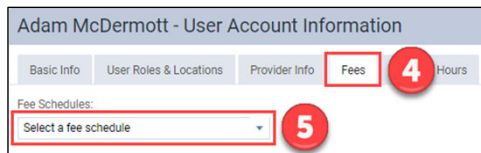


Bill by Location 

4. Select the **Fees** tab.
5. Verify that a fee schedule is **not selected** on the User Account page.

If you have a fee schedule selected for a user account, this fee schedule overrides the location fee schedule.

Repeat these steps for all your providers to ensure that a fee schedule is NOT selected on their User Account pages.

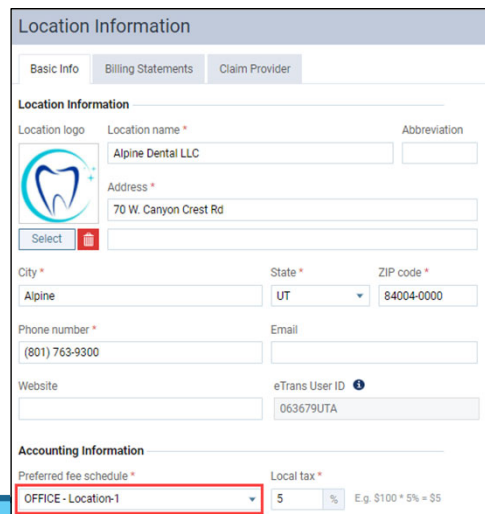


Adam McDermott - User Account Information

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

Fee Schedules:


Select a fee schedule



Location Information

Basic Info | Billing Statements | Claim Provider

Location Information

Location logo:  Location name: Alpine Dental LLC Abbreviation:

Address: 70 W. Canyon Crest Rd

City: Alpine State: UT ZIP code: 84004-0000

Phone number: (801) 763-9300 Email:

Website:  eTrans User ID: 063679UTA

Accounting Information

Preferred fee schedule: **OFFICE - Location-1** Local tax: 5%



Bill by Provider 


Now let's verify the billing setup for offices that **Bill by Provider**.

### Insurance Defaults

#### Billing Provider

Specific Provider Adam McDermott ▼

Provider of Procedures



Bill by Provider 

Verify your setup on the User Account page.

1. Open the **Settings** menu.
2. Click **User Accounts**.
3. Search for and select the provider.

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
<b>User Accounts</b>	Ledger Options	Recare
User Roles	Discount Options	Referral Sources

#### User Accounts

Last Name ◊	First Name ◊	Username ◊
McDermott	Adam	amcdaniel
McMillen	Jim	Jim
Chelman	Doris	Doris



## 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
▶ <b>C</b>	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



**DENTRIXASCEND**

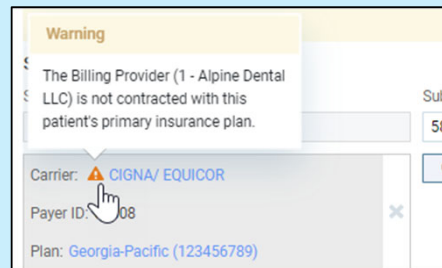


### Tip

#### Not Contracted With Warnings

- Ascend warns you when you aren't contracted with an insurance plan.

**Note:** To see these warnings, the **Billing Provider Contracted With** switcher on the Insurance Defaults page must be **On**.



Settings | Alpine Dental LLC - Administrator

LOCATION | PRODUCTION

Location Hours | Coverage Tables

Location Information | Fee Schedules

Patient Forms | **Insurance Defaults**

Operatories | Procedure Codes & Conditions

**Insurance Defaults**

Billing Provider

Specific Provider | Alpine Dental LLC

Provider of Procedures

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



## RECAP: Bill By Location

Verify:

1. The Billing Provider is a location.
2. The insurance carrier is selected on the Location Information page.
3. A Fee Schedule is **not** selected on the User Account page.

**Insurance Defaults**

**Billing Provider**

Specific Provider Alpine Dental LLC 1

Provider of Procedures

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

**Adam McDermott - User Account Information**

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

Fee Schedules:

Select a fee schedule 3

Contracted with

▶ A	2
▶ B	1

**Location Information**

Basic Info | Billing Statements | Claim Provider

Information. By completing the information below, this location may be used.

**Claim Provider Information**

Specialty: General Practice | State ID #

TIN # #: 12-3456788 | NPI # #: 1234567893

Medical ID # | Provider #

BCBS # | BlueShield #

Prov ID #: 0013

Contracted with

- ▶ A
- ▶ B
- ▶ C 2
  - 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
  - Clayton County Self Funded Dental Plan

Save | Cancel



## RECAP: Bill by Provider

Verify:

1. The Billing Provider is a person.
2. The Fee Schedule is selected on User Account page.
3. The insurance carrier is selected on the User Account page.

**Insurance Defaults**

**Billing Provider**

Specific Provider Adam McDermott 1

Provider of Procedures

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

**Adam McDermott - User Account Information**

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

Fee Schedules:

OFFICE - Location-1 2

Contracted with

▶ A	2
▶ B	1
<span style="border: 1px solid red; padding: 2px;">▶ C</span> <span style="color: red; font-weight: bold; border-radius: 50%; padding: 2px 5px;">3</span>	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

## Where to Get Help

### Articles

- [Setting up a location or an entity as a billing provider](#)
- [Setting up insurance defaults](#)
- [Resolving “Billing Provider Not Contracted” Warnings](#)
- [Finding Providers Attached to an Insurance Carrier](#)

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



**Verifying  
Insurance  
Eligibility**

## Why is Verifying Insurance Eligibility Important When Treatment Planning?

Verifying insurance eligibility helps you explain the patient's treatment plan with confidence.



**DENTRIXASCEND**

## Verifying Insurance Eligibility



Confirm the coverage amount



Confirm the primary deductible amount



Confirm the benefits remaining amount



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# Insurance Eligibility Page Overview

Appointments are organized:

- Chronologically
- By insurance carrier

Patient appointments appear on one of the three tabs:

- Unable to Verify
- Ineligible
- Eligible

Appointment	Patient Information	Subscriber Information	Insurance Plan	Verification Type
<b>Delta Dental of California</b>				
1:00 PM 60 min HYG2	Carter Nielsen 04/01/2004 (17)	Carter Nielsen 04/01/2004 (17) ID 1234325567	Universal Exports Phone (866) 669-1755	Auto verify Unable to Verify Ineligible Eligible
2:00 PM 60 min HYG3	Frank Herrera 06/10/1975 (46)	Frank Herrera 06/10/1975 (46) ID 123332455	Red Bull North America Phone (231) 512-1112	Manual (01/24/2022) Auto verify Unable to Verify Ineligible Eligible
<b>Delta Dental of Georgia</b>				
3:00 PM 60 min HYG4	Jennifer Goodwin 10/26/1964 (57)	Jennifer Goodwin 10/26/1964 (57) ID 258258901	Arcade Flower Shop Phone (800) 521-2651	Automatic (01/19/2022) Auto verify Unable to Verify Ineligible Eligible
<b>Delta Dental of Washington State</b>				
9:10 AM 60 min HYG3	Craig Simmons 01/05/1978 (44)	Craig Simmons 01/05/1978 (44) ID 123123123	Boeing- Salaried 100-80-50	Automatic (06/17/2020) Auto verify Unable to Verify Ineligible Eligible



Eligibility is automatically checked 4 days before the appointment

## Unable to Verify

- Insurance has not been verified.
- Insurance carrier does not accept automated eligibility.
- There is an error in patient or subscriber information.

## Ineligible

- The patient does not have insurance or has been found ineligible.

## Eligible

- Insurance eligibility has been verified.

Appointment	Patient Information	Subscriber Information	Insurance Plan	Verification Type
<b>Delta Dental of California</b>				
1:00 PM 60 min HYG2	Carter Nielsen 04/01/2004 (17)	Carter Nielsen 04/01/2004 (17) ID 1234325567	Universal Exports Phone (866) 669-1755	Auto verify Unable to Verify Ineligible Eligible

Appointment	Patient Information	Subscriber Information	Insurance Plan	Verification Type
<b>No Insurance Carrier</b>				
10:00 AM 60 min DDS1	L1 Wesley (Che) Carlson 03/15/1929 (92)			

Appointment	Patient Information	Subscriber Information	Insurance Plan	Verification Type
<b>Cigna Dental Health PPO</b>				
12:00 PM 60 min DDS1	Daren Bender 09/21/1966 (55)	Daren Bender 09/21/1966 (55) ID U6998595701	Henry Schein One	Automatic (02/20/22) Auto verify Unable to Verify Ineligible Eligible



- Click **Auto verify** to check insurance status on demand.
- Click the **paper clip icon** to see the carrier response.
- Blue text are links.



**DENTRIXASCEND**



## Tip

### View Menu Filter

You can view appointments for specific providers by selecting the desired providers from the View menu.

- Deselect **Show all providers**
- Select the provider(s)



[Click to view the Verifying Eligibility Demo.](#)



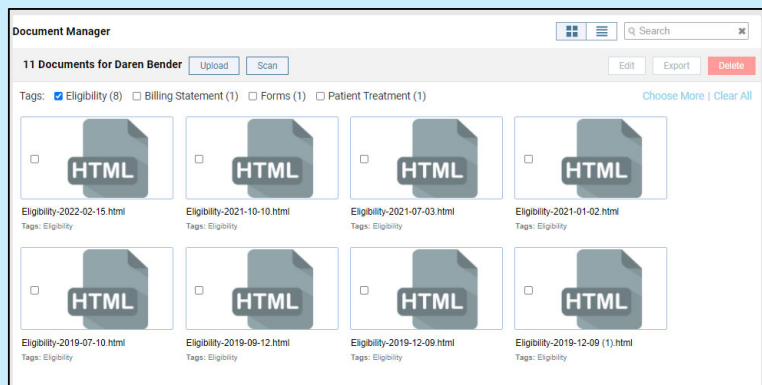
**DENTRIXASCEND**



## Tip

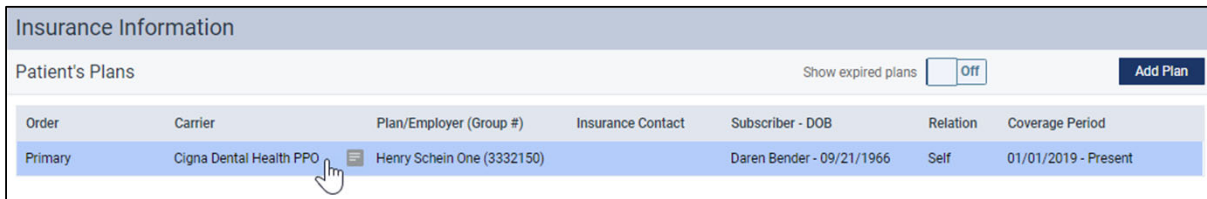
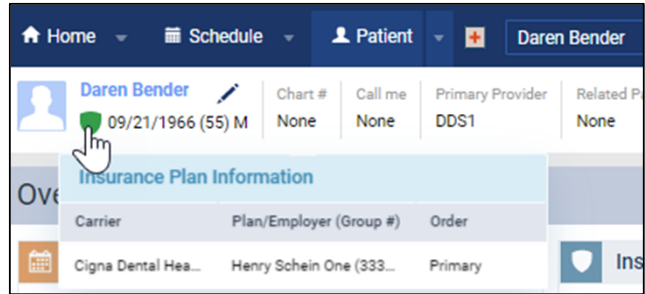
### Document Manager

When you auto verify the patient's insurance benefits, the carrier response automatically uploads to the patient's Document Manager.

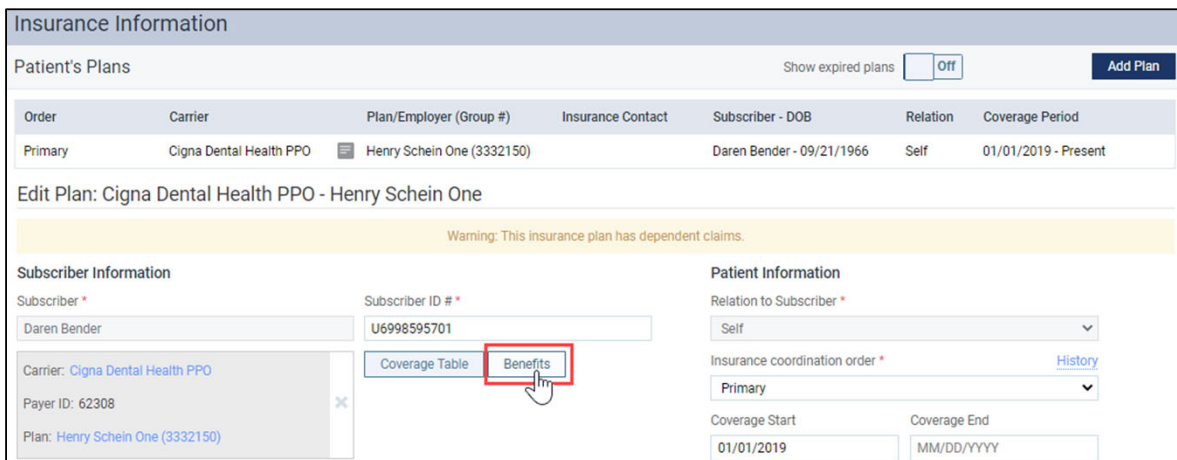


## Update the Patient Insurance Benefits

1. Click the **patient insurance badge**.
2. Open the insurance plan.



3. Click **Benefits**.





4. Update the Deductible Met amount.
5. Update the Benefits Used amount.
6. Click **Save**.

Deductibles and Benefits

Current Year Previous Year

Deductibles

	Annual Individual		Annual Family		Lifetime Individual	
	Required	Met	Required	Met	Required	Met
Preventive						
Basic	25.00	25.00				
Major						
Ortho						

Benefits

	Annual Individual	Annual Family	Lifetime Ortho
	Maximum	2,500.00	
Used	309.24		

Save Cancel



## RECAP: Verifying Insurance Eligibility

Verify a patient's insurance eligibility on the Insurance page.

- Coverage amount and the amount used.
- Annual deductible and the amount met.

Update the patient's benefits used in their insurance plan.

- Enter deductible amount met.
- Enter benefit amount used.



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

## Where to Get Help

### Videos

- [Checking Insurance Eligibility](#)

### Articles

- [Verifying eligibility statuses](#)
- [Eligibility FAQ](#)
- [Checking Insurance Eligibility](#)
- [Linking Dentrix Ascend to a Carrier Website](#)



**Attaching  
Insurance Plan  
Fee Schedules**

## Office Fee Schedules

**Location Information** **Bill by Location**

Basic Info Billing Statements Claim Provider

**Location Information**

Location logo Location name \* Abbreviation

Alpine Dental LLC

Address \*  
70 W. Canyon Crest Rd

Select

City \*  
Alpine

Phone number \*  
(801) 763-9300

Website

**Accounting Information**

Preferred fee schedule \*  
OFFICE - Location-1

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

**Adam McDermott - User Account Information**

Basic Info User Roles & Locations Provider Info Fees Work

Fee Schedules:  
OFFICE - Location-1

Contracted with  
A

**Bill by Provider**

## Insurance Carrier Fee Schedules

**Insurance Information**

Patient's Plans

Order	Carrier	Plan/Employer (Group #)
Primary	CIGNA/ EQUICOR	Georgia-Pacific (123456789)

Edit Plan: CIGNA/ EQUICOR - Georgia-Pacific

Warning: This insurance plan is not active.

**Subscriber Information**

Subscriber \*  
David Rogers

Subscriber ID # \*  
589539968

Carrier: CIGNA/ EQUICOR

Payer ID: 62308

Plan: Georgia-Pacific (123456789)

Max allowable amount fee schedule  
CIGNA - Location-1

Coverage Table Benefits

Coordination of Benefits

Predeterminations

Release of Information

## What Happens When Insurance Fee Schedules are Not Attached to the Insurance Plan?

- The estimated write-off adjustments amount will not be accurate.
- In this example, the estimated write-off adjustment amount for this treatment plan is \$0.

**Treatment Plan for David Rogers**

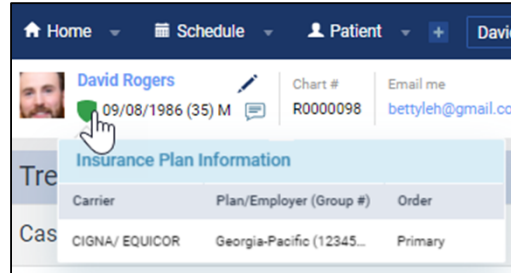
Case 2

Treatment plan case total:	3,335.00
Estimated deductible applied:	50.00
Estimated write-off adjustments:	0.00
Estimated insurance payment:	1,743.00
Estimated guarantor portion:	1,592.00 ⓘ

# Attaching the In-Network Fee Schedule to the Insurance Plan

To calculate the write-off adjustment, you must have your in-network fee schedule attached to the insurance plan.

1. Click the **Green Shield** to access the Insurance Information page.
2. Click the **insurance plan** to open the insurance plan information.



Insurance Information						
Patient's Plans						
Order	Carrier	Plan/Employer (Group #)	Insurance Contact	Subscriber - DOB	Relation	Coverage Period
Primary	CIGNA/ EQUICOR	Georgia-Pacific (123456789)	(555) 555-5555	David Rogers - 09/08/1986	Self	11/18/2018 - Present

3. Click the **insurance plan name** to be taken to the insurance plan record.

### Insurance Information

Patient's Plans

Order	Carrier	Plan/Employer (Group #)
Primary	CIGNA/ EQUICOR	Georgia-Pacific (123456789)

Edit Plan: CIGNA/ EQUICOR - Georgia-Pacific

Warning: This insurance plan is not active.

#### Subscriber Information

Subscriber \*  Subscriber ID # \*

Carrier: CIGNA/ EQUICOR

Payer ID: 62308

Plan: Georgia-Pacific (123456789)

Release of Information

Assignment of Benefits

4. Check the fee schedule selected for the insurance carrier.
5. Click the dropdown and select the plan **Fee schedule** from the list.
6. Click **Save**.

### Insurance Carriers

Edit Plan: CIGNA/ EQUICOR - Georgia-Pacific

<p>Plan/Employer name * <input type="text" value="Georgia-Pacific"/></p> <p>Group # <input type="text" value="123456789"/></p> <p>Claim mailing address * <input type="text" value="P.O. Box 12345"/></p> <p>City * <input type="text" value="Atlanta"/> State * <input type="text" value="GA"/> ZIP code * <input type="text" value="55555-5555"/></p> <p>Phone number <input type="text" value="(555) 555-5555"/> Ext <input type="text"/> Fax number <input type="text" value="(xxx) xxx-xxxx"/></p> <p>Contact <input type="text"/> Email <input type="text" value="user@mydomain.com"/></p>	<p>Benefit renewal month * <input type="text" value="January"/></p> <p>Source of payment <input type="text" value="Commercial Insurance"/></p> <p>Type <input type="text" value="Dental"/></p> <p>Max allowable amount fee schedule ⓘ</p> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> <p>Select a Fee Schedule</p> <ul style="list-style-type: none"> <li>ADP - Location-1</li> <li>AETNA</li> <li>Ameritas - Location 1</li> <li>BC/BS - Location-1</li> <li>Blue Cross/Blue Shield</li> <li>Cash</li> <li>Cash Sliding</li> <li style="background-color: #e0e0e0;">CIGNA - Location-1</li> <li>CIGNA HMO - Location-1</li> <li>CONCORD - Location-1</li> <li>Conn De - Location-1</li> </ul> </div>
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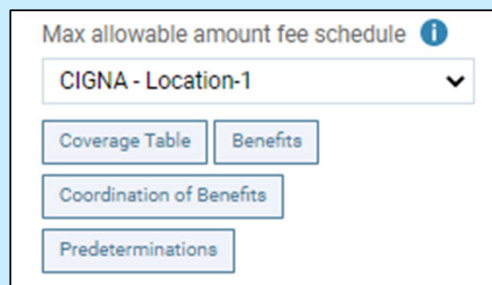
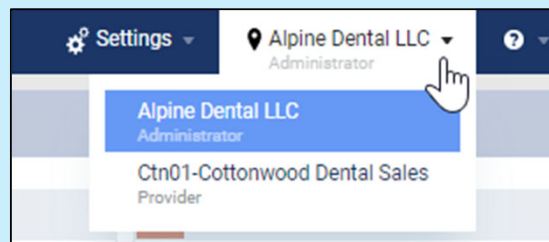
Save
Cancel



## Tip

### Insurance Fee Schedules

The insurance fee schedule is **location specific**.



## Viewing Treatment Planner Updates

Now that the fee schedule has been attached to the plan and the location has been marked in-network, we can see in this example that the write-off adjustment has changed from \$0 to \$1236.

### BEFORE

Treatment Plan for David Rogers	
Case 2	
Treatment plan case total:	3,335.00
Estimated deductible applied:	50.00
Estimated write-off adjustments:	0.00
Estimated insurance payment:	1,743.00
Estimated guarantor portion:	1,592.00 ⓘ

### AFTER

Treatment Plan for David Rogers	
Case 2	
Treatment plan case total:	3,335.00
Estimated deductible applied:	50.00
Estimated write-off adjustments:	1,236.00
Estimated insurance payment:	1,125.00
Estimated guarantor portion:	974.0 ⓘ



## RECAP: Attaching Insurance Fee Schedules

- When the insurance plan is not attached to the insurance fee schedule, the estimated write-off adjustments will not be accurate.
- Open the insurance plan and attach the insurance fee schedule to the insurance plan.



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

**Insurance Information**

Patient's Plans

Order	Carrier	Plan/Employer (Group #)
Primary	CIGNA/ EQUICOR	Georgia-Pacific (123456789)

Edit Plan: CIGNA/ EQUICOR - Georgia-Pacific

Warning: This insura

**Subscriber Information**

Subscriber \* Subscriber ID # \*

David Rogers 589539968

Carrier: CIGNA/ EQUICOR Coverage Table Benefits

Payer ID: 62308

Plan: Georgia-Pacific (123456789)

Release of Information ⓘ

**Max allowable amount fee schedule ⓘ**

CIGNA - Location-1

Coverage Table Benefits

Coordination of Benefits

Predeterminations

## Where to Get Help

### Videos

- [Attaching Fee Schedules to In-Network Insurance Plans](#)
- [Adding Insurance Carriers and Plans](#)
- [Setting Up HMO Insurance Plans](#)
- [Updating Fee Schedules from File](#)

### Articles

- [Creating fee schedules](#)
- [Setting Up RCM Rights in Dentrix Ascend](#)



## RECAP: Getting the Right Numbers in the Tx Planner

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Understanding the estimated guarantor portion



Verifying your billing setup



Verifying insurance eligibility



Attaching insurance fee schedules