

# How to Evaluate Dental Benefits for Your Clients



**I**t's the dental plan's responsibility to develop a network of dentists who render plan benefits professionally and consistently. While most dental offices fall into this category, there are occasional disputes over costs, benefit provisions, and treatment plans.

It is of great importance to educate members on the coverage that matches their needs and budget and to ensure that your clients understand the risks, benefits, and costs of each procedure. It is imperative that your clients know the specifics of their coverage since some dental procedures are elective, such as a cosmetic procedure, for example.

A good dental plan monitors the quality of care and service provided to members. A dental plan's top goal should be to ensure the best member experience and treatment – from individual office audits to member surveys and a commitment to helpful customer service.

This is why it is important to look beyond a basic comparison of costs, benefits, and the size of the dental network. Cost is one thing, but with qualitative assessments, you can identify the most value when helping your clients choose dental benefits.

Brokers need to feel confident in the quality of the dental plan they recommend and they need to know that any questions they have about appropriate treatment, quality of care or quality of service will be addressed even before these issues arise. Knowing how a dental plan will prevent issues from arising and manage issues when they occur is

essential when recommending dental coverage. It is vitally important that your dental plan is committed to these things.

## Understanding Dental Coverage and Networks

One of the more common issues is a misunderstanding of what a dental plan covers. This is where the broker can help educate the client on the basics their coverage. Whether your clients have a PPO, discount plan, or prepaid plan, they should know what they should expect to pay for common procedures, what procedures are covered, and the reimbursement levels for different types of procedures.

It should be a top priority to help your client understand their dental network, benefit coverage, and any plan maximums, deductibles, limitations, exclusions and exceptions. This will help prevent any surprises when your client is receiving dental care.

## Common Issues Between Patients And Dentists

We have identified some common issues that patients and dental plans may encounter in their dental treatment.

## Up-selling

Up-selling is the practice of selling additional or cosmetic services to a patient when it's not what they necessarily need or want. At times, a particular procedure may be what the member requests, but if it is presented as the only option, your client could be getting implants when they would have been fine with a bridge. Every dentist's goal should be to present all treatment options, including no treatment at all. A cause for concern is when the more extravagant procedure is presented as the only option. The dental health plan should respond to any inquiries about potential up selling.

## Reluctance to Provide Plan Benefits Graciously

The dental health plan needs to know if a participating dental office does not understand plan benefits or does not present them appropriately, so that immediate action will occur to counsel the office. If your client is well educated on their benefits, they will be better prepared to identify this type of issue and inform

the dental plan of their experience.

### **Lack of Respect For the Patient (Perceived Rudeness)**

It is vitally important to create a good doctor-patient relationship, which can have a lot to do with personality. At times, an office manager, dental assistant, or dentist may not realize that they are being perceived as rude. It will not be a good fit for some patients if the dentist or office employee has a more brash personality. That said, a dental plan should respond actively to reports of rudeness or disrespect since it is responsible for ensuring the satisfaction of its members.

### **Appropriateness of Treatment (Over or Under Treatment)**

Most dentists provide proper care. But, occasionally, some dentists want to treat more aggressively while others want to hold off until treatment is mandatory. The difference can be due to the dentist's training or philosophy.

Your client should keep a few questions in mind when considering which treatment to have. Ask about alternatives, the potential pluses and minuses of a particular treatment, and what the dentist would choose if they were you. Find out if your dental plan supports you seeking a second opinion.

### **Delayed Access (Long Appointment Delays)**

Delayed access is a question for the dental plan. If a decision on coverage is yet to be made, consider calling a few of the network offices in your area and ask how long it would take to get an appointment. Dental health plans should have guidelines and expectations and they should monitor accessibility (how far away are network dentists from clients), and availability (how far in advance must appointments be made).

### **Delays or Non-Response to Questions or Complaints**

Ask if there are guidelines for when a dentist should return a call or respond to an inquiry. Additionally, the broker should ask about company guidelines for responding to requests, average length of hold time, where customer service staff is located, and what type of training or experience is required of customer service

staff. A dental plan will have a grievance procedure in place; ask how grievances are received, the frequency of grievances, and how grievances are resolved.

### **How to Evaluate a Dental Plan For Quality**

Evaluating a dental plan for your clients is much more than comparing premiums, dental benefits, and networks. There are other important things to consider in order to ensure quality, appropriate care, and timely treatment.

### **Quality Assurance**

Ask the dental plan about its procedure to the quality of dental services. What training does the plan provide to a dental office that is administering dental benefits? How does the plan qualify dentists for its network? Are dentists monitored regularly for quality compliance? Are there measures in place to detect fraud?

Dental plans should assess patient utilization regularly to identify offices that lie far outside the norm for treatments. For example, if one dental office is delivering three times the number of crowns than all of the other offices in the area, that's cause for investigation. By doing this evaluation, the dental plan can help monitor and detect fraud and improper billing.

### **Plan Design Balance**

As mentioned previously, the vast majority of dentists treat patients properly and wisely. However, the dental plan can and should provide additional incentives through its payment structure and should provide adequate compensation to the dentist without offering enticement to treat outside of the norm. A dental plan that provides too much incentive for aggressive treatment only encourages over treatment of its members. On the other hand, a dental plan that gives the dentist an incentive not to treat will delay treatment and encourage under treatment of its members.

### **Commitment to Preventive Care and the Connection Between Oral and Systemic Health**

Another important issue is the dental plan's commitment to emphasizing preventive care and building awareness about the link between oral and systemic health. It's important for a dental plan to

emphasize completed treatment plans and preventive care. This helps enrollees get healthy and stay that way. It also helps the plan save money in the long run, which it can pass on to its members.

Oral cancer can often be caught earlier by a dentist than by a doctor. Many dental offices are beginning to offer oral cancer screenings by using a laser to identify oral abnormalities.

Research has revealed connections between periodontal disease and conditions including diabetes, premature birth, and low birth weight. Also, the mouth can display signs of eating disorders, HIV, and osteoporosis. Make sure that the dental health plan that you are considering is active in educating its members about the potential connections between a healthy mouth and a healthy body.

### **In Conclusion**

The dental plan's ultimate responsibility is to its enrollees. A member should view their dental plan as their advocate and should contact the plan with any concerns or questions about how their dental benefits are applied and the treatment that is recommended to them. □

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