DocTalk

What is Dental Billing Fraud?

Dental billing fraud is described as an intentional act of deceiving, concealing, or misrepresenting information resulting in payment for non-rendered, under-rendered or over-rendered services. Dental fraud is a crime that costs honest American consumers and businesses billions of dollars per year. Fraud occurs when filing a false claim, inflating costs of services performed, or billing for services not actually delivered. Insurance fraud is a criminal activity that the industry is committed to pursuing and prosecuting. Dentists convicted of perpetrating dental fraud face jail sentences, fines, restitution and a revoked license.

Here are some examples of dental billing fraud:

- Billing for services not provided
- "Up coding" procedures seeking compensation for a higher level of service than what was actually performed
- Submitting "unbundled" procedure codes when an appropriate ADA code is available that includes all services
- Submitting a dental claim under one patient's name when services were actually provided to another person
- Changing the date of services on a claim form so it falls within a patient's benefit period
- Creating false documentation, including submitting supporting documentation that is from another patient's record
- Billing for a covered service, but performing a noncovered or cosmetic service
- Altering forms and dental records
- Billing for the same service multiple times
- Performing treatment while not a licensed dentist

A Friendly Reminder: some important features of our plan

Some of the features of our Plan:

- Our plans have no pre-existing condition
- Members are responsible for their copayment at the time of service, unless the office has made other arrangements
- For services that require more than one visit, the member is responsible for their copayment at the beginning of the service. The office can submit utilization to Dental Health Services on either the starting date of the service or the finish date.
- Dentists should be aware that they have an ethical and legal obligation to refund fees for services that are paid in advance but are not completed. (CDT 2007-2008 and CDT 2009-2010 page 134).

"Dental Health Services is our favorite plan to work with. You are an outstanding company—easy, friendly, and family-oriented. We never have any problems! You are on the ball, and pleasant to work with. We appreciate that everyone is always so happy!"

Tanya Davis-Nix, Cypress Dental



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QUESTIONS OR COMMENTS? CONTACT US!

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Ask the Doc:

A patient has the right:

- To have the dentist explain any condition or diagnosis in language you understand.
- To have the dentist explain all treatment options available to them in the language they understand whether they would be covered under the dentist's plan or not. This should include the risks and benefits.
- To participate fully in decisions about their dental care.
- To ask the dentist any questions they may have about the diagnosis or treatment plans.
- To have the dentist obtain their informed consent by explaining all of the above in enough detail, <u>including</u> <u>any financial obligation</u>, for them to make an informed decision. Sometimes oral consent is satisfactory; however many times this consent is obtained in writing.
- To confer with our member services department about their benefits before they consent to treatment.
- To speak with Dental Health Services in their preferred language.
- To refuse treatment.

Source: Dr. Stanley Ayers, Director of Dental Services and Compliance—Dental Health Services.

What You Have to Say...

"As an office manager, I work with all types of plans. Dental Health Services is one of my favorites; they are always there when I have a question, and their responses are very fast and thorough."

Jessica Banuelos—Office Manager Dr. Jeffrey Lee, Ambaum Family Dental

How can we help you?

Dental Health Services recommends that our Participating Dentists use our Participating Dentist Manual to administer our plans and benefits. In addition, questions which may come up can be directed to our Member Services Department or your Professional Services Specialist.

Dental Health Services has noticed that some third party dental benefit modules do not have correct copayments, Exclusions and Limitations and optional/upgrade policies.

Do you have questions regarding

Dental Health Services'

Quality Assurance Program

or any other services we provide?

Your Service Specialist is available to answer all of your questions!

CA: 800.223.4347 WA: 800.400.0347