

PRACTICAL CLINICAL COURSES

A Service of the Gordon J. Christensen
Career Development Program

V4784

Avoiding Common Administrative Errors

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Materials Included

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PROCEDURE FOR RECEIVING
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AND STATE CREDIT
FOR CE VIDEOS

1. Complete the enclosed Post-Test. For each **CE Video Purchased**, one test is included. If additional tests are needed, the following fees will apply: \$25 per test per dentist (limit 1 additional dentist per video purchased); \$10 per test per auxiliary (dental assistants, hygienists, lab technicians - no limit on auxiliary tests). Fees can be paid either by check or credit card when tests are submitted to Practical Clinical Courses.
2. Complete the demographic information located at the end of the test.
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info@pccdental.com

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Sources of Products Discussed in
V4784 Avoiding Common Administrative Errors

Presented by: Charles Blair, DDS & Gordon J. Christensen, DDS, MSD, PhD

1. **Administration with Confidence: The "Go To" Guide for Insurance Administration (Book)**
Practical Clinical Courses
3707 N. Canyon Rd, Ste 3D
Provo, UT 84604
(800)223-6569
(801)226-6569
www.pccdental.com/products/insurance-coding-manuals/

2. **CDT Coding Companion: Help Guide for the Dental Team (Book)**
American Dental Association
211 East Chicago Avenue
Chicago, IL 60611-2678
(312)440-2500
www.ada.org

3. **Coding with Confidence: The "Go To" Dental Coding Guide (Book)**
Practical Clinical Courses
3707 N. Canyon Rd, Ste 3D
Provo, UT 84604
(800)223-6569
(801)226-6569
www.pccdental.com/products/insurance-coding-manuals/

4. **Medical Dental Cross Coding with Confidence (Book)**
Practical Clinical Courses
3707 N. Canyon Rd, Ste 3D
Provo, UT 84604
(800)223-6569
(801)226-6569
www.pccdental.com/products/insurance-coding-manuals/

Product names, the products themselves, and company names change rapidly. Please contact the companies shown to confirm current information.

Gordon J. Christensen Practical Clinical Courses, 3707 North Canyon Road, Suite 3D, Provo, UT 84604
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PROGRAM

V4784 Avoiding Common Administrative Errors

CLINICIANS RESPONSIBLE:

Charles Blair, DDS

CEO, Dr. Charles Blair & Associates, Inc.
Dentistry's Leading Authority on Insurance Coding
Author of Several Publications on Coding

Gordon J. Christensen, DDS, MSD, PhD

CEO, Practical Clinical Courses
CEO, CR Foundation
Practicing Prosthodontist, Provo, Utah

GOALS & OBJECTIVES

At the completion of this video presentation, participants should be able to accomplish the following:

1. Discuss PPO contracts and the incurred liability date of the dental plan.
2. Discuss providing patient discounts and their relationship to PPO plans.
3. Define co-pay.
4. Discuss not charging co-pay.
5. Identify the actions that may stimulate an audit by a PPO.
6. Identify the actions that may stimulate an audit by your professional organization.
7. Describe the difference between the methods of in-network and out-of-network audits.
8. Discuss charging different patient fees for the same procedure.
9. Differentiate insured plans and self-funded plans.
10. Discuss what is overbilling.
11. Define unbundling.
12. Discuss the legal implications of unbundling.
13. Define upcoding and its significance.
14. Differentiate primary and secondary insurance.
15. Define consumer fraud.
16. Define a professional provider organization (PPO).
17. Define fee capping.
18. Discuss how fee capping can influence your practice.
19. Discuss patient gifts to stimulate referral of patients to your practice.
20. Discuss unclaimed property laws and implications to you and your practice.

OVERVIEW

V4784 Avoiding Common Administrative Errors

On careful study of PPO contracts, most dentists find that they are committing some form of administrative errors that could be serious. There are many reasons why this is the case. This presentation educates dentists and staff personnel on the potential areas that are prone to making administrative errors. It includes:

- PPO contracts and the incurred liability date of dental plans.
- Providing patient discounts and their relationship to PPO plans.
- Co-pay
- Not charging co-pay.
- Actions that may stimulate an audit by a PPO.
- Actions that may stimulate an audit by your professional organization.
- Differences between the methods of in-network and out-of-network audits.
- Charging different patient fees for the same procedure.
- Differences between insured plans and self-funded plans.
- What is overbilling?
- What is unbundling?
- The legal implications of unbundling.
- Upcoding and its significance.
- How to handle primary and secondary insurance.
- What is consumer fraud?
- Characteristics of a professional provider organization (PPO).
- How to deal with fee capping.
- How fee capping can influence your practice.
- Patient gifts to stimulate referral of patients to your practice.
- Unclaimed property laws and implications to you and your practice.

REFERENCES

V4784 Avoiding Common Administrative Errors

2. Blair, Charles. *CODING WITH CONFIDENCE: THE "GO TO" DENTAL CODING GUIDE*. Belmont: Dr. Charles Blair & Associates, Inc., 2016.
3. Blair, Charles. *ADMINISTRATION WITH CONFIDENCE: THE "GO TO" GUIDE FOR INSURANCE ADMINISTRATION*. Belmont: American Dental Support, LLC, 2016.
4. Blair, Charles. *MEDICAL DENTAL CROSS CODING WITH CONFIDENCE*. Belmont: American Dental Support, LLC, 2016.
5. Bulnes, Christopher; Gordon, Douglas; Hill, Steven; Mihalo, Mark; Pak, Sammy; Riggins, Ronald; Rives, Robert; and Snyder, Steven. *CDT 2017 Coding Companion: Help Guide for the Dental Team*. Chicago: American Dental Association, 2016.
6. *Top Insurance Coding Strategies (V4783)*, 2017. [DVD] Gordon J. Christensen, DDS, MSD, PhD & Charles Blair, DDS, United States: JTV Productions.

POST-TEST

V4784 Avoiding Common Administrative Errors

1. Which of the following is true in regards to co-pay forgiveness?
 - a. All states prohibit co-pay forgiveness whether by law or general insurance statutes.
 - b. Government plans (FEDVIP, Medicare, Military Dependents, etc.) prohibit co-pay forgiveness.
 - c. Virtually all PPOs prohibit co-pay forgiveness by contract.
 - d. All of the above.

2. Audits would confirm all but one of the following, which is illegal:
 - a. that the procedure was performed.
 - b. that the fee charged was not the same fee charged to non-insurance patients in similar circumstances.
 - c. that the procedure was "medically necessary."
 - d. that the procedure was not cosmetic.

3. Insurance overbilling is:
 - a. billing insurance more than cash patients under similar circumstances.
 - b. billing insurance, then writing off, if they don't pay.
 - c. billing insurance, but forgiving the co-pay/ deductible.
 - d. all of the above.

4. Coding a class II composite with several codes such as - MOD composite, base, pulp cap - and then billing for each procedure individually is:
 - a. unbundling.
 - b. upcoding.
 - c. legal.
 - d. none of the above.

5. Reporting a surgical extraction when accomplishing a routine extraction is:
 - a. unbundling.
 - b. upcoding.
 - c. legal.
 - d. none of the above.

6. The PPO plan document is:
 - a. not comprehensive.
 - b. a short summary of the plan.
 - c. provided to the employee, not the doctor.
 - d. none of the above.

POST-TEST (CONT'D)

V4784 Avoiding Common Administrative Errors

7. The summary plan description is:
 - a. comprehensive.
 - b. a short summary of the plan.
 - c. provided to the employee, not the doctor.
 - d. none of the above.

8. Patient gifts for referrals:
 - a. can be drawings, gift cards, dinner for two, etc.
 - b. are prohibited by many state's law.
 - c. are prohibited by Medicaid, Medicare, federal employees, military dependents, government-funded programs.
 - d. all of the above.

9. Which of the following is true in regards to primary-secondary insurance?
 - a. It only determines the sequence of insurance billing.
 - b. You should not make any adjustment to the patient's account until after the secondary insurance has paid.
 - c. Primary-secondary status does not determine the patient's responsibility. The patient's financial responsibility is determined by the lower of the contracted fee schedules.
 - d. All of the above.

10. Billing an insurance company for a crown on the prep date, but not placing the crown is:
 - a. insurance overbilling.
 - b. unbundling.
 - c. upcoding.
 - d. legal.

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