ELECTRONIC CLAIM MANAGEMENT WITH DENTRIX

Time Savings By the Numbers

Committing now to submit all insurance claims electronically will save a dental practice valuable hours in the future, hours that were previously spent printing and mailing claims as well as calling payers to check on claim statuses, additional requirements, and payments. This document details some of the real and tangible time-saving numbers that a dental practice can expect from processing 100 percent of their insurance claims electronically.

ELIGIBILITY AND BENEFIT VERIFICATION

Electronic benefit verification time savings (per transaction): 10 Minutes

For dentists, eligibility and benefit verification was the second most time-consuming transaction when performed manually according to the 2019 CAQH Index. On average, dental practices spent 14 minutes conducting this transaction manually compared to four minutes electronically. Transitioning to an automated process for eligibility and benefit verification can facilitate the reimbursement process for dentists by reducing costs and collection time, while dental plans can spend less time responding to inquiries from dental practices and patients.

Not all payers provide the information needed to eliminate time-consuming phone calls or portal inquiries but adopting electronic eligibility and benefit verification will help dental practices decrease much of their time spent conducting and chasing down verifications. For Henry Schein One dental practices, eligibility verifications are automatically updated inside

the practice management software so they will know the eligibility status of their patients prior to their appointments.

With a Henry Schein One practice management system, practices do not have to keep track of every dental plan in their head or a thick three-ring binder because they can verify insurance eligibility in real-time. They will also be able to see which patients have PPO, HMO, EPO or out-of-network dental plans, which gives the entire staff a better idea of how to discuss treatment plan options.

CLAIM SUBMISSION

Electronic claim submission time savings (per transaction): 4 Minutes

According to the CAQH Index, dentists spent an average of seven minutes to submit a claim manually, which is the lowest manual time reported across all transactions. Dentists could save, on average, four minutes by submitting a claim electronically.

Dental practices can submit a claim directly to a dental

Everything needed to complete a claim, including digital radiograph, perio charts and photographs, can be easily attached right from within the practice management software.

ATTACHMENTS

Electronic attachment submission time savings (per transaction): 6 Minutes

The term "attachment" refers to the exchange of patient-specific information or supplemental documentation needed to support administrative transactions and clinical decisions. On average, healthcare providers take 11 minutes to submit an attachment manually compared to five minutes using an electronic method according to the CAQH Index. Some providers reported that manual attachments can take up to 30 minutes to print and duplicate radiographs and copy clinical notes.

For Henry Schein One practices, eClaims is actually part of the software; this means no bridges, no third-party patches and no hassles. With a click of the mouse, all insurance claims and attachments are sent directly to the payers together.

eClaims will reduce the number of rejected claims by verifying that all the necessary components are included with the claims. Everything needed to complete a claim, including digital radiograph, perio charts and photographs, can be easily attached right from within the practice management software. Plus, many claims can be adjudicated in real-time, reducing the reimbursement time even further and allowing practices to collect patient portions at the time of service.

Since eClaims is connected to one of the largest list of payers for electronic claims and attachments in

plan, or a claim may be routed through intermediary billers and clearinghouses. When a paper claim is sent to a payer, the payer either internally or through an outsourced workforce, performs a paper to electronic data interchange (EDI) conversion. The paper claim is scanned, indexed and imported into the payer's claim adjudication system for review, adding a lot of time to the review process. Information on the claim includes patient demographics, diagnosis, services provided and the cost of treatment.

For Henry Schein One practices with eClaims, claims are submitted electronically with only a few clicks of the mouse. Insurance claims are created in the practice management software, validated, and electronically sent directly to their payers. The entire process only takes a few minutes but can reduce the reimbursement time from weeks to days.

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the dental industry, practices can send nearly all their claims and attachments electronically. If a payer does not accept electronic claims, the Henry Schein One practice management solution will print and mail claims for the practice at no additional cost.

CLAIM STATUS INQUIRY

Electronic claim status inquiry time savings (per transaction): 13 Minutes

Claim status inquiries are used by dental practices to inquire about the status of a claim with a dental plan after it has been submitted. This transaction identifies where a claim is in the processing cycle (paid, denied, pending) and allows for tracking to occur.

While electronic solutions exist to support the transaction and dentists have indicated that conducting the transaction via phone and fax is burdensome, manual volume increased for dentists in 2019. In some cases, such as when dentists do not receive an acknowledgement of a submitted claim or when a problem arises, dentists resort to calling the

plan to determine the status of the claim. This results in burden for both the dental practice and dental plan.

Dental practices spent 17 minutes on average to conduct a manual claim status inquiry and four minutes on an electronic inquiry according to the CAQH Index. Dentists reported that staff spent a maximum of 50 minutes to conduct a manual claim status inquiry, the highest maximum time reported for any dental transaction. The average time that could be saved by switching from manual to electronic claim status inquiries is 13 minutes per claim.

With eClaims from Henry Schein One, practices will receive a notification when an insurance claim carrier accepts the claim. Practices can also check claim status at any time without calling insurance carriers which speeds up payments and accelerates the patient payment collections. The seamless workflow in eClaims delivers an electronic remittance advice (ERA) directly into the practice management software and suggests next steps, such as sending a secondary claim or billing statements to patients with an outstanding balance.

AVERAGE, MINIMUM AND MAXIMUM TIME SPENT BY PRACTICES CONDUCTING MANUAL AND ELECTRONIC TRANSACTIONS, DENTAL, 2019 CAQH INDEX

Transaction	Method	Average Time Practices Spend per Transaction (minutes)	Min Time Practices Spend per Transaction (minutes)	Max Time Practices Spend per Transaction (minutes)	Potential Average Time Savings (minutes)
Eligibility and Benefit Verification	Manual	14	1	34	10
	Electronic	4	1	10	
Claim Submission	Manual	7	1	19	4
	Electronic	3	1	10	
Claims Attachment	Manual	11	1	30	6
	Electronic	5	1	10	
Claim Status Inquiry	Manual	17	3	50	13
	Electronic	4	1	10	
Claim Payment	Manual	8	1	20	4
	Electronic	4	1	11	
Remittance Advice	Manual	11	1	27	7
	Electronic	4	1	8	
Potential Time Savings Per Claim					**44**

CLAIM PAYMENT

Electronic payment processing time savings (per transaction): 4 Minutes

After a claim is processed, payment can be made via paper check, virtual credit card or electronic funds transfer (EFT). While the healthcare industry overall has seen an increase in the number of EFTs, mainly due to the speed and ease associated with their use, the dental industry still relies heavily on paper checks.

Dental practices that participated in the 2019 CAQH Index cited difficulty in tracking and reconciling EFTs as reasons for not adopting these transactions, as well as the comfort of "having a check in hand." The American Dental Association (ADA), in response to a Request for Information CMS-6082-NC on Reducing Administrative Burden to Put Patients over Paperwork, indicated that, while they strongly encourage dentists to implement the HIPAA standard in order to lower administrative time, they recognize that some dentists prefer the use of paper checks.

On average, dental practices spend eight minutes conducting a manual payment transaction versus four minutes electronically according to the CAQH Index. Dentists could save four minutes of processing time by switching from paper checks to electronic claim payments.

ELECTRONIC REMITTANCE ADVICE (ERA)

Electronic benefits review time savings (per transaction): 7 Minutes

ERA is a communication from a plan to a provider about a claim payment. ERA is the digital equivalent of an explanation of benefits (EOB). The transaction contains information about services rendered, adjustments and payment method, such as a check or EFT.

On average, dental practices reported that they spent an average of four minutes on an ERA compared to 11 minutes on a manual remittance advice.

Henry Schein One practices have a convenient ERA tool in eClaims that reduces paper dependency

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and manual data entry. eClaims ERA will eliminate delays created by mailing documents and the hassle of managing paper. Instead of sorting through mail or searching patient files to find insurance payment details, that information is only clicks away.

With detailed claim payment information delivered automatically into the patient ledger, practices can submit secondary claims faster and manage claim reconciliation and patient billing more efficiently. Plus, when combined with EFT, which is available separately from some individual carriers, payments can be deposited directly into a designated account for an even more streamlined collection process. This process even allows billing statements to be generated for outstanding patient balances as part of the same workflow.

CONCLUSION

Moving to a fully electronic claim submission process is a no brainer — the real and tangible time-saving benefits are detailed in this document. The table below shows how a practice can save on average 44 minutes per claim when processed electronically versus manual.

There are many dental insurance point solutions and tools today that can aid dental practices in that process. However, with a Henry Schein One practice management solution, combined with eClaims, practices have the ability to automate their entire electronic claims process from beginning to end, enabling them to:

- Check eligibility status of patients prior to their appointments to avoid delays
- Identify claim issues and provide online claim resolution before submitting to a payer
- Submit claims and attachments to payers individually or in batches for increased efficiency
- Reduce postage, supplies and mailing expenditures
- Track a claim's progress between intermediaries (billing service or clearinghouse) and a payer through an electronic audit trail
- Confirm a payer's receipt of a claim and attachment through electronic reports
- Expedite a payer's claims processing turnaround and payment time frame
- Improve the practice's accounts receivable accuracy via ERA

In summary, a fully automated and electronic claim submission process like the one built into eClaims, dramatically reduces the amount of time and resources practices devote to manual administrative functions – time that can be better spent with patients or focused on other practice efficiencies.

APPENDIX: Data for this paper was provided by CAQH, a non-profit alliance and the leader in creating shared initiatives to streamline the business of healthcare. Through collaboration and innovation, CAQH accelerates the transformation of business processes, delivering value to providers, patients and health plans. Data submitted to the CAQH Index was through a voluntary, survey based process.

Surveys were fielded to dental providers from June to September 2019. CAQH managed the survey data collection process. The potential time savings per transaction was estimated by the CAQH Index using the average time required by dental providers to conduct electronic versus manual transactions.

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