

## "Do You Accept My Insurance?"

by Lorraine Hollett and Patrick Wahl, DMD, MBA

The question that most every prospective patient asks when calling your office is, "**Do you accept my insurance?**" Before you answer the question, remember that patients have *no clue* what type of insurance they actually have. Compounding the confusion, patients posing this seemingly straightforward question usually have one of three entirely different questions in mind:

- "*Are you a participating provider?*"
- "*Will you accept whatever my insurance company pays as full payment, and not charge me the difference?*" or
- "*I think I have a certain plan, but who knows what it really is?*"

The answer that you give to one of the most frequently-asked-questions on your phone can make or break your fee-for-service practice. You must never answer "Yes" or "No" to such a loaded question. Neither should you launch into an explanation of how you handle insurance in your office. Your first response should always be,

**"That's a great question. Let me see how I can help you."**

In order to help the patient properly, you must call the insurance company to determine the plan benefits. Then you can return the patient's call and explain to the patient about how her plan actually works, and separately, how she can use the plan in your office. You determine how the plan can be used; perhaps you will accept assignment of benefit for this plan, or perhaps you will not.

Explain whatever you will do in a positive way in terms of the benefit to the patient. For example, instead of saying "We will not accept your insurance," say something like, "We will gladly process your claim (or provide the necessary paperwork) so that you can be reimbursed directly." Then go on to explain the convenient payment options available in your office to help the patient.

Do not assume that patients know what kind of insurance they have; they don't. Patients who *may* know their carrier *do not* know which specific plan they selected. *Do not assume* that their plan cannot be used in your office. Many patients can go out of their network, be your patient, *and still receive some benefits.*

If the patient cannot go out of her network, the patient may *still choose* to be seen in your office because of the great service you provide! Let's say the closest HMO dentist turns out to be 60 miles away, and he's completely scheduled for six weeks in advance. When the patient chooses to see a more convenient dentist, it will be you. Yours will be the only office that didn't answer the patient's question abruptly or defensively. Beyond providing good service, you showed a genuine interest in helping the patient, you offered the help, and you followed through. The patient will now choose your office because you were "so nice."

No matter what kind of insurance a patient has, every caller can be *your* patient. Give such good service that patients can't help but tell others about you. You can't make people call you on the phone, but when they do call you, you can help make them want to be your patient. It's just as important that your practice not get trapped by answering "Yes" or "No" to an unclear and ambiguous question.

*Lorraine Hollett was the Office Manager of Wahl Family Dentistry for four years. She is the co-developer with Dr. Wahl of "Magical Customer Service and the Statementless Professional Practice," a complete system of eight audiocassettes and six manuals designed to eliminate billing from your practice. The tapes and manuals are loaded with actual scripts that show you how to work with insurance without getting eaten alive, and to collect every penny you produce without dropping a single bill in the mail! The System sells regularly for \$477 plus \$10 shipping and handling, but **Richards Report** subscribers get \$50 off, because **Richards Report** subscribers are special!! To order, call Office Magic Productions at (800 -750-8779), fax (302) 654-0054, or e-mail billnomore@aol.com*

\* \* \* \* \*

In last month's issue, a great product was mentioned that I want to tell you a little more about. In the sea of confusion (that's right near the Gulf of Mexico) that we call bonding agents, there really is no product that is head and shoulders above the rest. And while each has their own plusses and minuses, it doesn't make much sense to keep six or seven different bonding systems on your shelf unless you have a severe dust problem in your office and need something to collect it.

So... versatility and ease of use would seem to be the big things to look for when selecting a bonding system. Let's face it... all of the current generation systems bond pretty well these days. (I still like to have Parkell's Amalgam-Bond around for those impossible situations like when a patient comes in with all of their teeth in their hand and says "Doc... I'm getting married tonight and I don't want my teeth to fall out when I bite on that Cheez-Whiz!")

Anyway, if I had to recommend one all-purpose bonding system it would be Liner Bond 2V by J. Morita. It has a lot of things going for it. You can use it for direct or indirect restorations, core bonding, repairs, etc..

It's a dual cure system with the option of just light cure, chemical cure, or both. It's very well laid out, and the bottles and dispensers have a cool kinda retro look to them. But the things that set it apart are:

- ♦ Sensitivity. Not only is post-op sensitivity extremely rare with this product, you can actually use Liner Bond to desensitize cervical abrasion and other sensitive areas.
- ♦ Not Stanky!! Replacing the old "dental office smell" of eugenol is the brand new not improved "dental office smell" of a chemical spill at a plastics factory.