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Ash: Hello, and welcome to another episode of Beyond Bitewings. In today's episode, we have a very special guest, Karen Newton from Insurance Answers Plus. She'll be addressing a lot of the questions that we get from our clients regarding front office management and dealing with the insurance companies. And of course, you know, we have our regulars, Robert

Robert: Hey there,

Ash: And myself, Ash. So Karen, how are you?

Karen: I'm doing good. Thanks for inviting me.

Robert: Oh, you're very welcome, Karen. And you know, we're always looking for things to help our clients, and run their offices more efficiently, and especially, for a couple of different reasons, on the front desk. I mean, it's always good to make the office more efficient, but these days it's even more difficult to find people to run your front office. So anything that can cut down on the time it takes to do their job is helpful. So tell us a little bit about your company, and what you guys bring to the table, and how that can help a dental office perform their function at the front desk more efficiently.

Karen: The goal was always to have answers at their fingertips when the patient comes in and when the treatment plan is presented. You know, if they're, you know, most offices have a form they fill out of questions they asked the carrier, and that can be a really time-consuming process. Depending on who the carrier is, Your whole time could be 10-15 minutes, but it could be an hour and 40 minutes. So rather than calling carriers, or surfing websites, or waiting on a fax, we've already gone out there and researched out the employers in this state and the detailed information about their dental plans. And then we track and keep up with it, you know, on a continual daily basis. So the answers are really just at their fingertips and the staff's not having to jump through the hoops, you know, jump through hoops to get it their self.

Robert: So you find that the staff spends significantly less time on the phone with the PBOs and the carriers then, when they're using your product?

Karen: Oh, absolutely. There's too many details and fine print things that the practices need that they're not going to find from, you know, other sources like websites and fax backs. Obviously MetLife gives a lot, and people are familiar with that carrier, but nobody else is really lik that. And so, you know, if you need to know, "Does the buildup have to be a different day" "than the crown?" or "How many quads of root planing you can do the same day" "without being penalized?" These are things that you really, you're not going to get from those other sources. And so we're providing 123 codes and answers, no matter who the carrier is.

Robert: Well, that's tremendous. That's great. And how often then is your software updated?

Karen: They're cycled through and we continually provide updates every day. So the whole point is, so the staff is not having to ask the patient, if their employers may change as, you know, we're keeping up with all that for them. Patients typically don't know a lot about their plans. They may not even know who the carrier is, but they know where they work. And that makes our program really simple 'cause that's the first foot in the door is you just type up the patient's employer, and then we do research out each plan that the company might offer employees, and they'll all be listed there.

Robert: And so the software is going to tell the front desk person what the patient's responsibility is?

Karen: Yes. But more than that, you know, it's kind of given all the little ifs, ands, and buts to it being covered. You know, it's not enough to know, you know, deductible maximum percentages, you know, that's pretty easy to get. It's really a lot of that fine print nitty-gritty processing guidelines and things that really could produce a claim problem. You know, in today's world, if you ever tell a patient something's going to get paid at 80 and it gets paid at 50, you can lose the whole family over something I'm like that.

Robert: Yeah.

Karen: So it just has to be right.

Robert: Yeah. So what is your guarantee that you guys are right with the information you provide?

Karen: Well, we actually have less than a 1% error rate, which is pretty unheard of in the industry. We do have a good reputation and we're endorsed by a couple of the different state dental associations, but it's really how we get the information. We never are gonna trust one confirmation, you know, most offices are just having to call the carrier, and cross their fingers, and hope for the best. But we learned a long time ago, not to trust one confirmation. So it's kind of crazy, but we call and get all the benefits, and hang up and call back, and, you know, get a different person to re-ask every single question again. And then we compare the answers when we're off that second phone call, and any discrepancies, and there's always going to be discrepancies when you ask 120 questions, we're going to call back a third time, and get a processor or team leader, and have to get to the bottom of, "Why did Joe say this and Mary say this?" We also get copies of the dental handbook from the employer, copies of the plan document from the sales agent. If the carrier has fax backs and websites, we don't really trust that stuff, but we will get it. And we'll compare the fax back, the website, the hand book, the plan document, against the three and four verbal confirmations. So when they see an answer in our system, we got that same answer like six and seven times. So if something's processed or paid different than what we show it's going to be, we will fight to appeal the claim.

Robert: Okay.

Karen: And it's really kind of, to me, what makes us stand out from everybody else that's, you know, trying to do this type of thing.

Robert: Well, and it sounds, I mean, obviously your research is extensive, and I guess that's your full-time job for the people at your company is to do the research, to get the accuracy. So how expensive is the product?

Karen: It varies a little bit, depending on how many offices that the practice has, or how many doctors are there. If it's a practice with one office and one doctor, it's 160 a month. It does go up \$22 for each additional doctor. So basically a one doctor, two office is 182 a month. This whole thing is really just kind of a month-to-month. Like people don't have to sign a contract or anything like that. It's just a copyright agreement, not a timeframe commitment.

Robert: Well, I'm kind of amazed, in this day and age that, one, that you don't have them sign a 12 month contract, And, and number two, I'm amazed at the cost. I mean, that's negligible really.

Karen: It's honestly like having an extra insurance coordinator in the office. I mean, a lot of practices are spread thin, and staff are wearing, you know, multiple hats, and the person that's doing insurance verification may also be doing the scheduling, and the treatment planning and, you know, confirming appointments. I mean, there's lots of different things they're doing, but we always believed that most doctors are gonna want their staff to do something that actually increases production to bring money in their practice. They don't want them stuck on the phone with, you know, Blue Cross for an hour or whatever. They would rather have the staff follow up on claims and, "Where's our money?" Or follow up on treatment plans that you presented and the patient hasn't scheduled yet, you know, or help with recall. Those are things that really take the practice to the next level and being tied up with insurance all day, you know, is a very frustrating, and time-consuming part of the job that can be streamlined.

Robert: And it's a very common complaint that I hear is, you know, "My front desk people" "are spending way too much time on the phone" "trying to verify insurance?"

Karen: Right.

Robert: What about implementing the product? Is it difficult to implement and to get trained on it?

Karen: Well, we do trainings, you know, every day, Monday through Friday. They're one hour webinars with a live rep, and, you know, people can ask questions and things, but typically once people order it, they're up and going in like one to two days, it's pretty fast. And we just put a shortcut on everybody's desktop and provide them login details. It's really pretty simple. I think it's an easy program. Probably the most challenging thing about it is our search bar. When you look for employer plans, our search bar is not a Google search engine, and that's what folks are used to. And so if you misspell a word, it's not going to find it. This is a true story. I had someone that was looking for waste management, and she called to say, "I can't believe you don't have waste management." I'm like, "Yes we do." But she was typing "waist", like the waist around your middle, instead of "waste." You know, so it can be really simple, things like that. You know, they get in a hurry, if they put an "e" in and it's an "o", they won't find it. If they put an "i" and it's an "a", you know, they won't find it. But that's really, probably, to me, the most challenging thing, they have to know how to spell, you know, and it's not

going to interpret what they put. So if they do it wrong, I mean, you know, your phone, if you go to look up a company and you butcher the name or the spelling of it, it's still going to find it anyway. But ours isn't like that.

Robert: Well, and when you say...

Karen: You just have to know where the patient works.

Robert: Okay. And when you say that you have the webinars daily to train the people, does anyone come to the office and help them download the software? Or do they just download it? To set up the shortcut, do you walk them through that or do they do that on their own or...?

- Well, it's not a software program, so there's really nothing to install. We don't like remote in, and look at their computers, or anything like that. We just, it is a web version. So we're just going to put a shortcut on the desktop because we don't want folks to have to remember to go to a website every day. And I usually just tell them, you know, "Just like you open" "your practice management program every day," "you want to click on Insurance Answers Plus," "and just run it on the task bar." So it's a pretty quick process of just, you know, helping them put that shortcut on there. Like I said, they do have a log-in, but they only have to enter the login information every seven days. So basically when they enter it Monday morning, they're logged on all week long, you know, and they just have to re-enter it every Monday.

Robert: So even if the software runs updates daily or a couple of times a week, they wouldn't have to log in again the next morning?

Karen: No, no. It's basically everything we key today, the clients, I think it's, it's kind of crazy, I think it's updated like, you know, four o'clock in the morning or something like that, but you know, everything we key today, they'll have it four in the morning. Now, if some huge thing happened, like maybe, you know, an AT&T, or American Airlines, or a really big company did something, we can always immediately push an update out. But typically it's just what we get today, they get, you know, before they get to work in the morning.

Robert: Okay. And then you said something earlier, when I asked about the...some comment made, and you use the word state, so is this applicable to the United States, or Texas, or what areas does this product work in?

Karen: Well, the companies are local, statewide, and national plans. So, you know, all the nationwide companies are going to be there, but also the mom and pop companies down the street and around the corner, you know, it's not enough to have like big companies. You need, you know, the other ones too. So the only requirement that we have to researching out a plan and adding it is that there's 50 people that work there. So we always tell them, even if you think it's small, you know, we want them to look it up. And if it's not there we'd want them to request it because, you know, they may be small where they are, but, you know, there could be a branch in Tulsa, or a division in Shreveport, Louisiana, or sister company in Atlanta, or something like that. So they may think it's small, but that doesn't necessarily mean that it is.

Robert: Okay.

Karen: Now, all the individual plans are automatically added. So if the family doesn't have insurance through their job and they just went out on their own and bought a plan, we have all those too.

Robert: Okay. And then what about some doctors have in-house plans? Does that information coordinate with your product at all?

Karen: No. So, like if they have an internal office membership plan?

Robert: Yes.

Karen: No, uh-huh. We wouldn't know, you know, who has that, and there's so many companies out there and, you know, different plans and things, but you know, some of the people that don't have insurance, you know, they might've got an Affordable Care Act plan, or, you know, just went out on their own and bought a plan. So, like I said, the individual policies are there, but if it's an in-office plan, no, it doesn't have that. I mean, it does have Medicaid, and CHIP, and stuff like that, but not if it's an in-office discount plan.

Robert: Okay. And what if one of our listeners is in say, California, or Ohio, Florida, are they going to be able to use your product effectively?

Karen: There's other services that we have for the other states. Insurance Answers Plus is primarily in Texas, Oklahoma, Louisiana, and Georgia. We do have other insurance verification services that vary quite a bit, but, you know, we can help other offices in other states, but we're really focused on these four states.

Robert: Okay. That's good to know. What else haven't I asked that you would like to tell people about the product?

Karen: There's a lot out there, you know, in today's world, and they, and there's a lot of companies that do what we do. You know, people just kinda need to do their homework, you know. I think our fees are very reasonable, \$160 a month for one doctor, one office. But you know, if they use a company in another country, they're going to get it cheaper. I mean, you know, I'm just going to be honest. So there are a lot of companies in other countries that are doing this, and they just want to really do their homework. There's some disadvantages to that. And I think the scariest thing for me, if I was a practice, is if there's a problem, like contract disputes, or the information's inaccurate, and we got stuck with this huge, you know, claim problem, or there's a HIPAA violation, or something like that, the legalities of trying to do something about it in the court system, when you're dealing with somebody in another country is just, it wouldn't almost be worth it, you know? And so that's, you know, to me, that's kind of a drawback to using someone in another country. Yes, you might, could get it cheaper there. They're not paying people what we pay people, you know.

Robert: Right.

Karen: They're paying people \$4 and \$5 an hour, so of course you're going to get it cheaper, but I think you just have to really look at the reputation, you know, get a lot of demos and, you know, really kind of judge them side by side. You know, one thing I think that really does make

us stand out is everyone that works here has sat in that front office insurance coordinator's shoes. We all know dental. We've been in the industry for, most of us, you know, more than 20 years. And there's fears that sometimes the company that you're talking to, you just really want to make sure that those folks do know dental. Cause I know a lot of the third parties that are in other countries, they haven't even worked in dentistry. They don't even know how to pronounce this stuff.

Robert: Well, I think...

Karen: You know? And it's hard if you've got to either trust someone to get the information for you, they need to be as good as you! And there's that, that to me would be the biggest fear, is how can I know, you know, how am I going to know what's right? You know, these people don't even know dentistry.

Robert: Well, and not only that, but I think third-party outsourcing is a concern with a lot of people, just in the amount of personal information that you have to give the people...

Karen: Absolutely.

Robert: ...That are actually overseas. And I'm really surprised that in my industry, for instance, I'm really surprised that they allow outsourcing of tax returns to third-party overseas companies. That just seems crazy to me.

Karen: I know. But you know...

Robert: But they didn't... they didn't ask me my opinion.

Karen: You know...Right, I mean, money is an issue in today's world. Of course. People want to make sure they're getting the best service for the best price. I mean, that makes sense. But sometimes you get what you pay for, and if it's real cheap, I'd be leery I mean, I think ours is very reasonable when you compare the cost to the employee, but people that are paying employees \$3 an hour, that's very different. We're paying them more than 20.

Robert: Well, it's hard to compete with that.

Karen: There's a big difference there.

Robert: Yeah, it's hard to compete with that. Yeah.

Karen: Yeah, absolutely.

Robert: Well, if someone wanted to, say, get your product and implement it, then how would they become aware of it? If they're not aware of it and we tell them about it, if they want to do some research, what do they do? They go to your website?

Karen: They can. They can go to iaplus.com. That's I A P L U S .com. We're going to be at all the conventions. We are endorsed by the Texas Dental Association, so there's a link from the TDA website to ours, you know, because they put their stamp of approval over this, and feel

good about recommending it or whatever. Or they can just give us a call. We, a lot of times, can do a demo for the staff and just share our screen, and kind of walk them through it, so they can kind of see all the codes, and nitty gritty details we research out, and what it looks like, because now they have to make sure that all the codes and the procedures that they do in their office, and what they need information on, that it's in our program.

Robert: Well, yeah. And I've had, I guess one of my doctors had said that his front desk asks him questions about the plan, he doesn't know the answers, and so they quit using it. And I hear that from him periodically because he's used it off and on for, in his estimation, probably 10 years. So how would you address that? What should they do instead of asking the doctor a question, what should they do?

Karen: Well, the answers are going to be in Insurance Answers Plus, but our phone number's at the bottom of every screen. So if there's a question, and maybe they're looking at something, and they don't understand the way we worded it, what we mean, we want them calling us not the carrier. With their service, they have, you know, unlimited support. So it doesn't matter how many times they reach out for help or assistance, we don't track that kind of stuff. We want to make sure it's being used, and we do what we call "care calls", but you know, once they're set up, we call them two weeks after they're set up, just to see if there's any questions we can address. And we call them two months after they're set up, six months after, and 11 months after, and every year thereafter.

Robert: Wow.

Karen: So we're checking because there's a big turnover in this industry. And our fear was always, hey, if a new person comes on board, especially if they know the industry, and they've done this before, there's always a possibility they could say, "Oh, I know how to call carriers" and, "We don't need this" or whatever. So we really want to make sure that there's no length of time that it's sitting there. Nobody knows what it is. Nobody's taken advantage of it. We don't want to just, you know, people will be paying for this and it not changing their life at work. So we are periodically touching base with them. But the offices, we count on them to let us know if there's staff changes so we can take initiative, and go in there, and make sure the folks are comfortable with the program, and, you know, letting it change their life. People do have to get rid of and let go of the old habits of calling carriers and surfing websites.

Robert: It's what they're comfortable with.

Karen: Yeah.

Robert: And you're right. I mean, change is uncomfortable, but change is necessary to create results. Right?

Robert: And I think I actually had a question for you. Ash?

Ash: I mean, not so much a question. I mean, I've been listening to her, and you talk to her, and you know, one big thing that I was able to gauge into from this conversation was that convenience. The big thing that our clients would be getting by using this software would be

convenience because one other thing that Karen pointed out was that it's not so much a program, it's you log in through a browser.

Karen: Perfect.

Ash: So you don't even need to update your operating system. So it doesn't matter whether you're using Windows or Mac, it's accessible from anywhere, really from any computer, as long as you have a login information.

Karen: That's right.

Ash: Good. Okay.

Karen: It's very convenient. I mean, that was what we wanted was that when that treatment plan's presented and the doctor says, you know, "We need to replace this crown." If you have to tell a patient, you know, "Oh, let me follow up your treatment and I'll get back with you in a few weeks." I mean, that's like, that's crazy. Every dental consultant is going to say, "No, you've got to have an answer for them" "when you present that treatment plan." You're going to have a lot better chance of getting them to schedule.

Ash: Right, right.

Karen: So offices can go to our program and they'll see if the replacement rule is five years, or seven years, or eight years, or 10 years, or whatever. You know, the answer's there. We're telling them if they downgrade on posterior composites, if they downgrade on porcelain posterior crowns, about night guards, and inlays, and onlays, and bone grafts, and tissue grafts, and TMJ, and tons of perio, and ortho, and waiting periods, and coordination of benefits. You know, just all kinds of details. Literally 123 procedure codes and answers.

Robert: And as far as hygiene, it'll tell them if they can do how many quads that day without penalty?

Karen: Mh-hm.

Robert: Good.

Karen: Yep. Absolutely.

- We're giving them answers on root planing, full mouth debridement, scaling with gingival inflammation, Arrestin, perioprophylaxis, perio exam. There's actually four exams we give them, initial, periodic, perio, and problem focused exam. So they're getting four exams. We'll tell them how many PAs they can do in a year. The frequency for bite wings, vertical bite wings, full mouth Panorex. There's tons about sealants. It's a lot of information, way more than most offices have on their form, you know, that little internal form they use.

Robert: So how many offices would you say have implemented your system? Do you have any idea?

Karen: I would guess about maybe 4600.

Robert: Okay.

Karen: 4700? Something like that

Robert: Okay. Well, that's great. I'm surprised.

Karen: I'd need to look.

Robert: I'm surprised there's not a lot larger number. It just seems to me like a no-brainer.

Karen: Well, a lot of the dental consultants, you know, refer us because, I mean, they're out to increase that efficiency of the front office and streamline that. And so really most all the dental consultants tell their practices about it because it's going to save them time, and time is money time.

Robert: Super.

Karen: It's time you can be doing something more productive.

Robert: Right. Well, I appreciate you being with us today and the information that you have available. Why don't you tell people, one more time, how to get in touch with you or your company?

Karen: Okay. The company is called Dental Systems. The product is Insurance Answers Plus, or IAPlus, and our website is iaplus.com, and the number is 800-683-2501.

Robert: And it's I, A, plus, P L U S, right? Not just the plus sign?

Karen: That's right.

Robert: Okay, great.

Karen: That's right iaplus.com.

Robert: Well, thank you very much for being with us today. We appreciate the information, and we'll follow up and see what else we can send your way. I think the clients owe it to themselves to try the product. Ash, do you want to close for us today?

Ash: Yeah, sure. Well, again, the listeners, if you guys have any questions, and if you guys want to reach out to us, feel free to send us an email at info@eandssociates.com. And of course, we'll do our best to answer those questions. Thank you again.

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