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Ash: Hello and welcome to another episode of Beyond Bitewings. In today's episode, we will be talking with Monica Holder who is with Surety Billing and has been with them for over three years now. They basically help dental clients and other medical professionals with their dental billings and medical billings. And within the studio, of course, we also have Robert with us.

- I'm here again.

Ash: Hi, Robert. And hey Monica, how are you today?

Monica: Hi, I'm good. How are you?

Ash: Good. Good. Thank you. And thank you so much for being here with us today. So tell us a little bit about Surety Billing.

Monica: Okay, so Surety Billing is a company that we started, a couple of doctors and myself started, as we saw a need for medical insurance billing in the dental practices. We were doing it in our own practices and had gotten pretty successful at it and some of our sales reps and people that were in and out of our practice knew that we were doing that, started spreading the word and giving our names to other dentists across the state and having them call us to give them some advice or help them figure out how to do it in their own practices and several of those, I guess I would say not really successful at it, they were getting denials, even though we had given 'em the tips that we used and so one of them actually said, "Would you be interested in doing this for us?" and my doctor said, "You're already spending too much time "doing that and not doing our work, "so we're either going to have to cut that out "or maybe we can start a company that does that." So we talked about it and researched it and found out that there really was a need for that so we started Surety Dental, initially, to do medical insurance billing for dental practices and medical insurance billing is one thing, dental insurance billing is something else and medical insurance billing for dental practices is kind of a unicorn, it's a totally different animal and it takes a special skillset and mindset to be able to push through and get that done and we've just ended up with a great team of girls that have figured it out and have been very successful at doing that and so we were working with several practices doing that, and one of them said, "Oh, you're doing such a good job at this, "how about taking on my dental insurance billing, "would you be able to learn to do that?" So we hired additional employees to take on that task and that has grown, so now we have a team that does just dental insurance billing and another team that does medical insurance billing, all four dental practices, and we've been doing that since 2018.

Robert: Hey Monica, why are there so many dentists out there resistant to doing medical billing through their practices? For some reason, they think it's either too much trouble or it's wrong, or there's something wrong with the concept. How do you address that?

Monica: Right. So those are the two main issues, Robert. One is that they've either tried it and they weren't successful at it. And most of them, if you try it in your own practice, you're going to get denied the first few times. Well, to some people that's frustrating and they just think it's impossible and they throw their hands up and quit, and a unique thing about the girls that we have is they're not quitters and they don't take no for an answer very well. So they just dig in and figure out the way to do it, to get it taken care of and get it paid, and initially that took a whole lot of appeals and phone calls and correspondence back and forth with the insurance companies and one thing is, with dental insurance billing, we don't have to use diagnosis coding and you do with medical billing. So a lot of it, we found out, is in how you code the procedures and the diagnosis codes and the doctors just have to be very thorough in the notes that they write so that we can get the right coding and once we do that, then we get it paid and I think that's where some of the frustration comes in with the dental insurance billing, people in the dental, their insurance coordinators in their dental offices try to attempt to do it and they don't know anything about the diagnosis coding so they put down what they think might be the right answer and most of the time it's not so it gets denied and they get frustrated. And it really takes someone, it's kind of a full-time job, and takes someone that that's all they're devoted to, is doing medical billing. You can't just send out a claim or two here or there and expect to be successful at it, and so the doctors get really frustrated with that. And then some of them even think, kind of feel like it's on the verge of being illegal, maybe.

Robert: Or maybe, overly aggressive?

Monica: Yes, maybe so.

Robert: Is it correct to say that the reimbursement rates are higher for some of the medical billing than it is for the dental procedures?

Monica: They are, but the reason for that, at one time, you could not bill dental procedures to medical insurance and, which has always been kind of odd to me because it's kind of like they're saying your mouth is not part of your body, and there are so many things that they have discovered, in more recent years, like sleep apnea, TMJ, those things affect your overall body. They don't just affect your ability to chew or eat or not just your teeth, they do affect your overall body, and that's why the medical insurance companies have come on board and said, "You know what? "It does affect your overall body," so they started paying for those services.

Robert: Well, I think it's even proven now that, through a lot of the reports that I've read from some of the medical schools, that even heart disease is as a result of your oral health.

Monica: Right, oral health, heart disease, diabetes, there are many things that it can affect, and so, like I said, it's just in the last few years, I think we started billing maybe in 2014 and the practices that I started in as an office manager and it was around that time that the awareness was there, these studies started coming out and the insurance companies started paying for these medical procedures or dental procedures.

Robert: Okay, and what are some of the things that a dentist should take into account in considering whether or not to use an outside billing company?

Monica: If you had asked me a couple of years ago, for outsourcing billing, I would have told you the main reason is so that the doctors and the team members could devote more of their time to direct patient care, which is still very important and still probably number one, but a very close second, at this this day and time, is we all know how hard it is to find not just quality employees, but any employees.

Robert: Any employees.

Monica: Exactly, so outsourcing eliminates the frustration of having to hire and also the training and managing of those employees, so it becomes more cost-effective to outsource that so you don't have the expenses that go along with hiring, training, managing, payroll expenses, payroll taxes, and in return, you also save money because billing companies typically are comprised of specialists and that's all they do all day long is the insurance, so most of the time they're able to get claims paid a little faster, they have a lower rate of denials and eliminate those timely filing issues that a lot of offices run into when they have claims that aren't paid immediately, and for an office staff, a lot of times they're so busy checking patients in, checking patients out, doing new patient paperwork, they have so many other tasks that following up on unpaid insurance claims seems to get shoved to the back burner and then a lot of times, by the time they follow up on it, they've run into some timely filing and then the doctors are losin' a lot of money because they're not getting paid on those claims.

Robert: And that's one thing you alluded to, is the accounts receivable really ballooning up out of control because there's no follow-up and I think that's something else that Surety offers, isn't it? Is cleaning up a clients accounts receivable.

Monica: Absolutely and we can do a consult and right now we're kind of offering those free, if anyone wants to take advantage of that. We can just have you run a couple of reports and send them to us and we can let you know exactly how we can help, and in some situations, most of the time, it's because of the lack of staff and the hours that they have to devote. It's not anything that anyone's intentionally doing wrong, they just don't have enough time in the day to manage it all.

Roberth: Well, I think that's a bigger problem these days than it has been in the past, because we're all having trouble finding staff people and all the practices are the same way, right?

Monica: That's right. That's it. You hit the nail on the head. They just don't have the time. So we can run a report or have a couple of reports run and sent to us and can tell you, or tell the doctors in a matter of minutes, what it looks like their key problems are and in a lot of situations they just need a little help getting caught up. They have enough staff to manage it but for some reason they've gotten behind and we can go in and do a, like you said, a cleanup service, where we spend a couple of months, just depending on how large the problem is or the size of the practice, usually between three and six months, and get it cleaned up and get the insurance billing in a healthy area and then we can turn it back over to them, to the team.

Robert: Without getting into any specifics, I know you've done some work for a couple of our clients and with the one in Seattle, why don't you sort of describe what his situation was like and what you were able to accomplish for him when you went in and how bad it was, you can use numbers, don't use names.

Monica: Okay, so just standard rule of thumb, in a single doctor practice, we really don't want to see insurance over 90 days at all, anything outstanding over 90 days, we definitely want to keep it under about \$3,000 in a single doctor practice. There's just about always gonna be one or two things that you've had to appeal or just, for whatever reason, there's some things that linger out there in the 90-day column that just, like I said, to give you a rule of thumb, 3000 is kind of our maximum, and when we went into, we actually had a couple of your clients that we've gone into that have been, and that one, I want to say his, when we first ran the report, was like 168,000.

Robert: And that's just over 90 days, right?

Monica: That was just over 90-day insurance and he had absolutely no idea. And that's what we find most of the time, is the doctors, really, a lot of times, they're not running any reports or looking at any end of the day to make sure the insurance is filed, the money's going into the bank properly, the payments are getting posted like they should. So what we find out is, when we get into it, sometimes, most of the time, it's not that the whole amount of money that's just outstanding in insurance, sometimes they're not posting payments correctly and it's not getting closed out in the software. So sometimes it's just things need to be closed and they've been paid, it's just they left the claim open. But a lot of times, I guess, the main thing that we see is that they aren't following up on the claims once they file them, they don't have the time to go back and do the follow-up, so what happens at that point is the claims go into a timely filing status. The insurance companies only allow, when I first started, most of them allowed a year. Well now we've seen it back up to six months for the majority and even three months on some, that if you don't have it filed within three months, and if you have a problem and don't have the appeals taken care of, then they're not going to pay you. Insurance companies look for every reason they can not to pay.

Robert: Imagine that.

Monica: Yeah, so we go in and we find those problems and we get those claims, that's our main focus when we first start is to catch anything that might be nearing a timely filing date and get those taken care of so the doctor doesn't lose that money and then kind of work backwards to get things cleaned up. And once we get that 90-day below \$3,000, the doctors can either opt to stay with us for filing their claims or they can turn it back over to their staff.

Robert: And when you come in to do the work for a client, do you train the front desk person or is the client tied to you forever?

Monica: We do go over that with the doctors and show them how they can follow up in the future, and especially if they decide to take it back on once we've done the cleanup service, we want them to know how to monitor that and see, you know, before it becomes a problem in the future. So most of the clients that we work with, in that capacity, that do take it back on themselves, just about always, end up calling us back at some point and saying, "Look, can you review this report for me and make sure. "I feel like things are maybe getting out of control again." We've had some that have signed back on and just said, "Why don't you just file our claims "and I'm gonna let my team focus on patient care "and let you handle all of the billing," because when we do that, we do the billing, file all the claims, post all the payments, handle

any appeals. Most of the time we don't have, we cut down on the number of denials just because our team is so specialized and they know everything that needs to be sent with a claim to keep from having a denial.

Robert: Okay, I think Ash: has a question for ya' here. Let him jump in for just a second, go ahead, Ash:.

Ash: No, I mean, I was just listening, honestly, that shared billing can really be so helpful towards our dental clientele. One thing though that I was wondering, just placing myself in their shoes, is that for someone who's really been relying on their front desk people to handle a lot of this work and is seriously considering maybe moving to an outsource billing service, such as Surety Billing, if I'm thinking about the implementation part of it, how long does it usually take to implement something like this and are there other things that I need to consider, maybe download certain software, maybe upgrade my computer so it can handle a software like that? What does the whole implementation process look like if I'm considering using an outsource billing service company?

Monica: That's a great question, Ash.

Robert: That's what I have him here. It depends on, there are several things, but mainly what dental software they use. Some of them, a lot of them now, are using cloud-based software and if they have a cloud-based software, we're able to just log into their system over the internet. If they don't have a cloud-based software, such as Eaglesoft or Dentrix, which a lot of our clients have, we set up a remote desktop system, and it's not actually remote desktop, there's another software that we use, it doesn't take any time for them to download it on their side, we give 'em all the instructions and make that super easy for 'em. We can start in a matter of days. It doesn't take-

Ash: Oh wow.

Monica: Weeks, months, to get going and I think, typically when they come to us, a lot of times it's an emergency, to get in and get started as quickly as possible and we're able to do that. We're able to start, like I said, typically within a couple of days we can have everything set up. But at most, it's one software that we download, they have to download on their side so we can go in and access their system and we just log in to their system. We do need a computer that is set up somewhere in a back office or something that is strictly for our use, so we're not kicking people off, they're not booting us off throughout the day. And we have had some that we set up to use, one that someone else uses in the morning and we can use it in the afternoon, we try to be flexible when at all possible, where they don't have to go out and buy a computer just for us, but it's better if we can have one designated for us so we can log in and out.

Ash: And Monica, how much of your work is remote and how much of it is actually onsite?

Monica: It's all remote. Everything is remote.

Ash: Wow. That's amazing. And that's probably why you guys can accomplish what you guys do within as little as 48 hours.

Monica: Exactly, and as far as, you asked about onsite, I know with a couple of your clients, Robert, we have gone to their practice to work with their teams, that is an additional service that we offer. We do offer some consulting services to go out and help train team members to do any type of office management. We do some team building also, it's just evolved into a total dental office management.

Ash: So basically like an ala carte system, if the client needs something on top of what you guys are already offering in your base package, it can be done.

Monica: It can be done.

Robert: For some additional fees. Okay, so that's great. So it's actually pretty amazing, during COVID or before COVID, whether there's already the team available in the front desk department to do all this work, that if a company like Surety Billing steps in a huge chunk of their responsibilities can be alleviated where they can focus more on maybe relationship dentistry, or if you're operating a practice where you're finding it hard to find front desk people right now, with the current situation, even then, it's helpful to maybe consider an outsourced dental billing service company, like Surety Billing. So you know, that is pretty great, honestly, what you guys are doing and I think right now, this market is the perfect time for you guys to grow and that's amazing and honestly, this was something that a lot of our clients were asking us, and that was part of the reason why we wanted to have you guys on the episode. One thing though that they have always asked me, considering whether to use an outside dental billing service where it's just continuing to use their front desk people that they already have, is the price factor. So if you are okay or comfortable sharing your fee structure, maybe, with our listeners, I think that'll go a long way.

Monica: So, I'm not in the office right now.

Ash: Okay, that's fine.

Monica: I stepped out to do this so I don't have a brochure right in front of me, so I can't give you exact numbers, but I can give you close. We do it based on their monthly collections. So it's geared to each one individually, we do have a minimum of 1250 per month and I think that's for anyone that the collections are a hundred thousand or less per month, and then after that, the first level is 1.25% of whatever their monthly collections are. We bill on the back end so they get a month of work out of us without having to pay. They don't for our services until we complete them. So, and this is on the dental billing. And then after a certain dollar amount of collections, the percentage goes down. So we really, and Robert has kind of helped us fine tune this, in the beginning we kind of played around with it a lot. We've got to make money and be able to pay our employees, of course, but we want to make it as fair as possible for the dentist as well and so far, everyone that we've worked with has, even if they're a little skittish at the beginning, because that is a huge concern, always, they end up seeing the value and feel like it's a fair value and it's, like I said, less than what they can pay an employee.

Ash: Correct, and in today's market, with the raised salaries, it seems like, even with your fees, even with the additional service fees, I feel like it's still going to be much cheaper than hiring a front desk person who would be doing this full-time.

Monica: That's right.

Robert: And Monica, if people wanted to get in touch with you, why don't you tell them how to do that.

Monica: Okay, so you can call our office at 662-402-4021 and anyone there should be able to help you and if you're interested in, whether it be medical or dental, they can get you to the right person, and we would love to hear from you guys.

Ash: Awesome.

Robert: Super, thanks for being with us today, and Ash:, if people want to get in touch with us for more information, how would they do that?

Ash: Of course, yeah. So you guys can email us at info@eandassociates.com and the and is spelled out. And feel free to get in touch with us, regarding questions or feedback, or if there are some additional topics that you guys would like us to do our episodes on, we always look forward to hearing your questions and love to hear from you guys. So, until next time, take care.

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