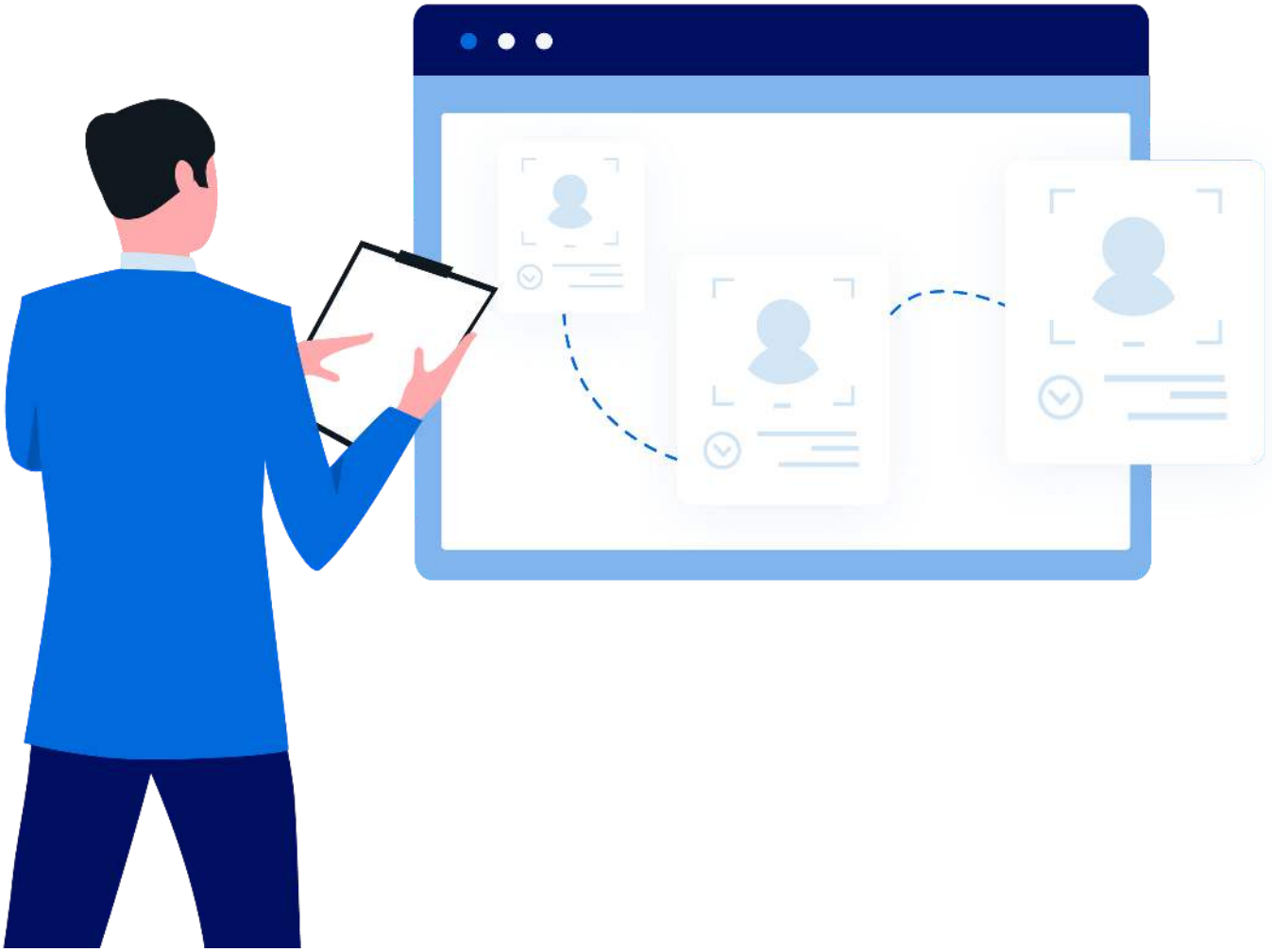
Help Articles

How do I setup an insurance fee schedule for D-HMO's?



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How do I setup an insurance fee schedule for D-HMO's?

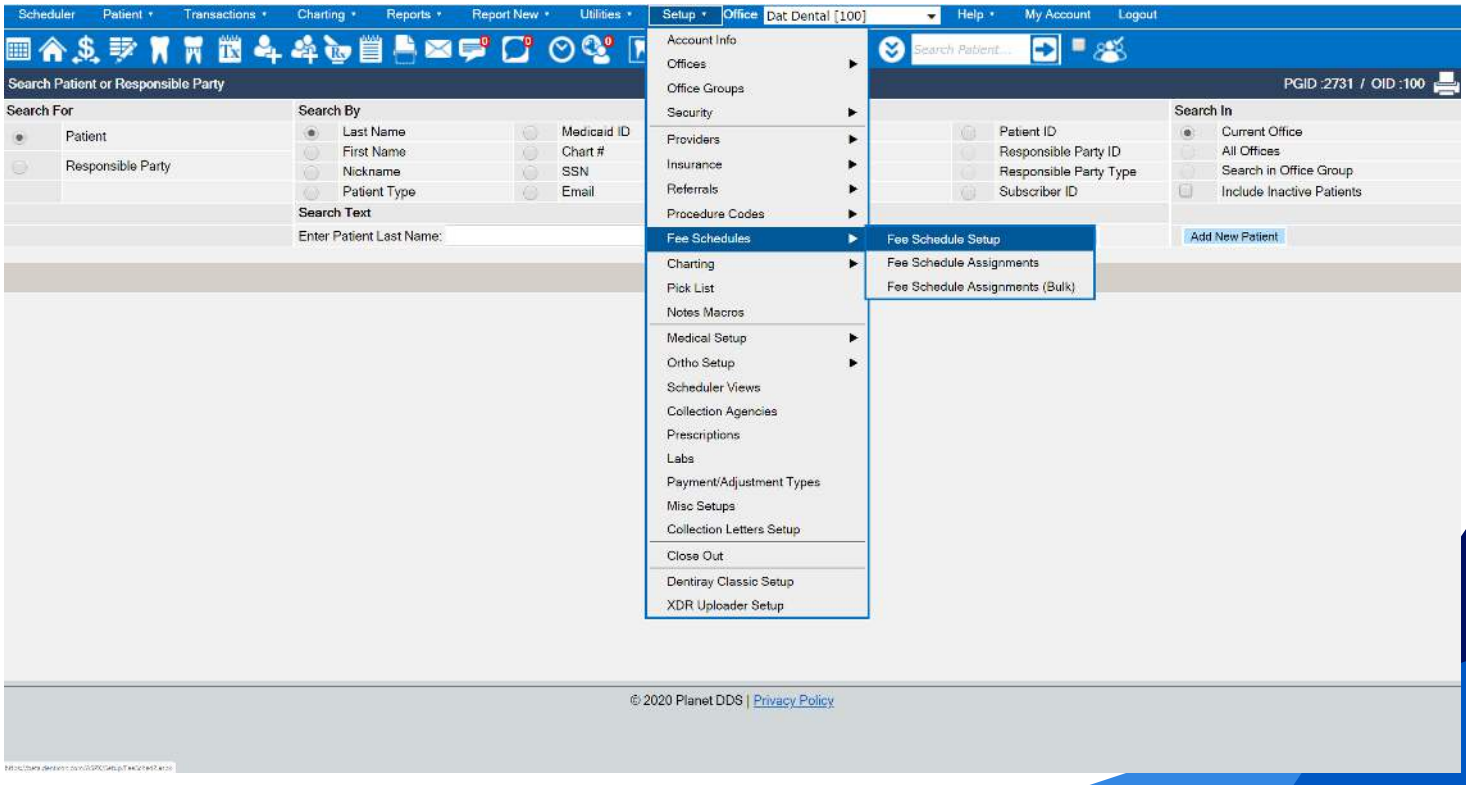
Click the word "Setup" and choose the "Fee Schedules" and "Fee Schedule Setup" options from the drop-down box.

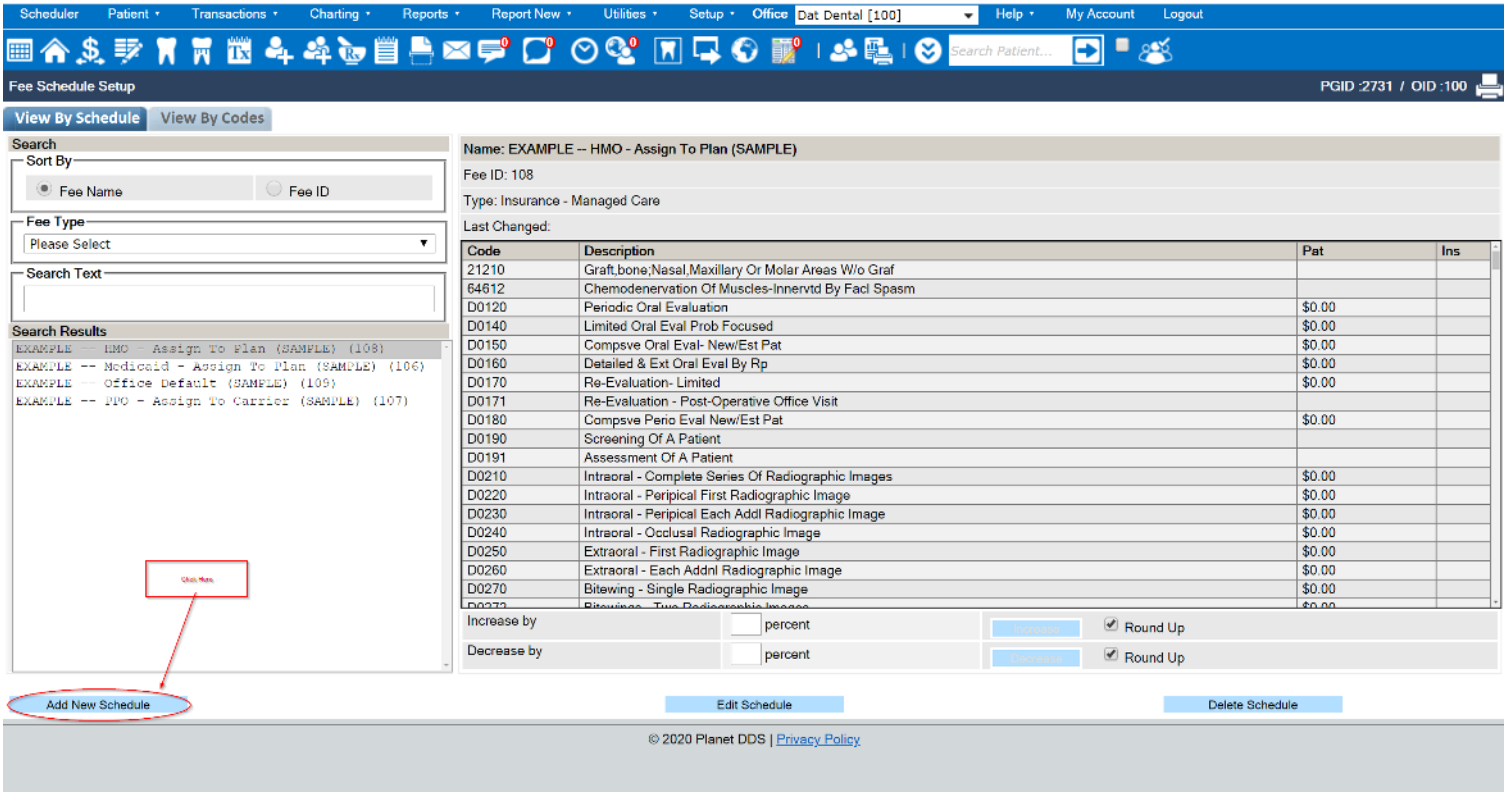
Click the Add New Schedule button, and confirm the addition.

Provide a meaningful name for the schedule. To easily identify and locate the proper schedule, it is advised to use the insurance carrier name and the fee schedule name that is provided by the carrier when naming the schedule in the Denticon program.

Ensure the "Fee Schedule Type" is selected as "Ins. – Managed Care". D-HMO fee schedules require the entry of two amounts – one for the patient responsibility amount and another for the insurance carrier amount.

Click the Save button.




Scheduler Patient Transactions Charting Reports Report New Utilities Setup Office Dat Dental [100] Help My Account Logout
Search Patient...
Fee Schedule Setup
PGID :2731 / OID :100
View By Schedule
View By Codes
Search
Sort By
Fee Name
Fee ID
Fee Type
Please Select
Search Text
Search Results
EXAMPLE -- HMO - Assign To Plan (SAMPLE) (108)
EXAMPLE -- Medicaid - Assign To Plan (SAMPLE) (106)
EXAMPLE -- Office Default (SAMPLE) (105)
EXAMPLE -- PPO - Assign To Carrier (SAMPLE) (107)
Name: EXAMPLE -- HMO - Assign To Plan (SAMPLE)
Fee ID: 108
Type: Insurance - Managed Care
Last Changed:
Code
Description
Pat
Ins
21210 Graft,bone;Nasal,Maxillary Or Molar Areas W/o Graf
64612 Chemodenervation Of Muscles-Innervtd By Facl Spasm
D0120 Periodic Oral Evaluation $0.00
D0140 Limited Oral Eval Prob Focused $0.00
D0150 Compsve Oral Eval- New/Est Pat $0.00
D0160 Detailed & Ext Oral Eval By Rp $0.00
D0170 Re-Evaluation- Limited $0.00
D0171 Re-Evaluation - Post-Operative Office Visit
D0180 Compsve Perio Eval New/Est Pat $0.00
D0190 Screening Of A Patient
D0191 Assessment Of A Patient
D0210 Intraoral - Complete Series Of Radiographic Images $0.00
D0220 Intraoral - Peripical First Radiographic Image $0.00
D0230 Intraoral - Peripical Each Addl Radiographic Image $0.00
D0240 Intraoral - Occlusal Radiographic Image $0.00
D0250 Extraoral - First Radiographic Image $0.00
D0260 Extraoral - Each Addnl Radiographic Image $0.00
D0270 Bitewing - Single Radiographic Image $0.00
Increase by percent Increase Round Up
Decrease by percent Decrease Round Up
Add New Schedule
Edit Schedule
Delete Schedule
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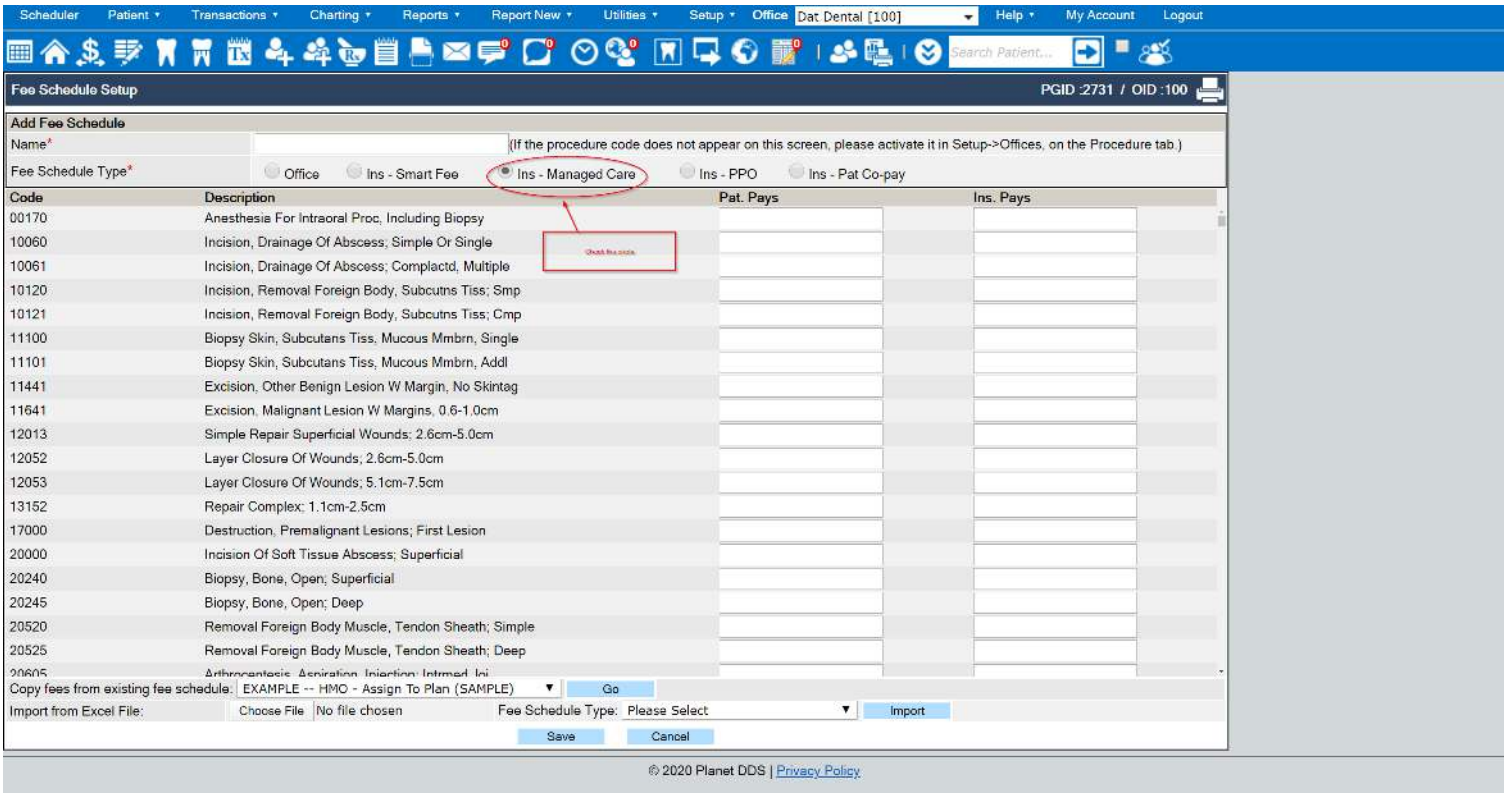
Scheduler Patient Transactions Charting Reports Report New Utilities Setup Office Dat Dental [100] Help My Account Logout
Search Patient...
Fee Schedule Setup
PGID :2731 / OID :100
Add Fee Schedule
Name*
(If the procedure code does not appear on this screen, please activate it in Setup->Offices, on the Procedure tab.)
Fee Schedule Type*
Office
Ins - Smart Fee
Ins - Managed Care
Ins - PPO
Ins - Pat Co-pay
Code
Description
Pat. Pays
Ins. Pays
00170 Anesthesia For Intraoral Proc, Including Biopsy
10060 Incision, Drainage Of Abscess; Simple Or Single
10061 Incision, Drainage Of Abscess; Complactd, Multiple
10120 Incision, Removal Foreign Body, Subcutns Tiss; Smp
10121 Incision, Removal Foreign Body, Subcutns Tiss; Cmp
11100 Biopsy Skin, Subcutans Tiss, Mucous Mmbrn, Single
11101 Biopsy Skin, Subcutans Tiss, Mucous Mmbrn, Addl
11441 Excision, Other Benign Lesion W Margin, No Skintag
11641 Excision, Malignant Lesion W Margins, 0.6-1.0cm
12013 Simple Repair Superficial Wounds; 2.6cm-5.0cm
12052 Layer Closure Of Wounds; 2.6cm-5.0cm
12053 Layer Closure Of Wounds; 5.1cm-7.5cm
13152 Repair Complex; 1.1cm-2.5cm
17000 Destruction, Premalignant Lesions; First Lesion
20000 Incision Of Soft Tissue Abscess; Superficial
20240 Biopsy, Bone, Open; Superficial
20245 Biopsy, Bone, Open; Deep
20520 Removal Foreign Body Muscle, Tendon Sheath; Simple
20525 Removal Foreign Body Muscle, Tendon Sheath; Deep
Copy fees from existing fee schedule: EXAMPLE -- HMO - Assign To Plan (SAMPLE)
Go
Import from Excel File:
Choose File
No file chosen
Fee Schedule Type: Please Select
Import
Save
Cancel
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