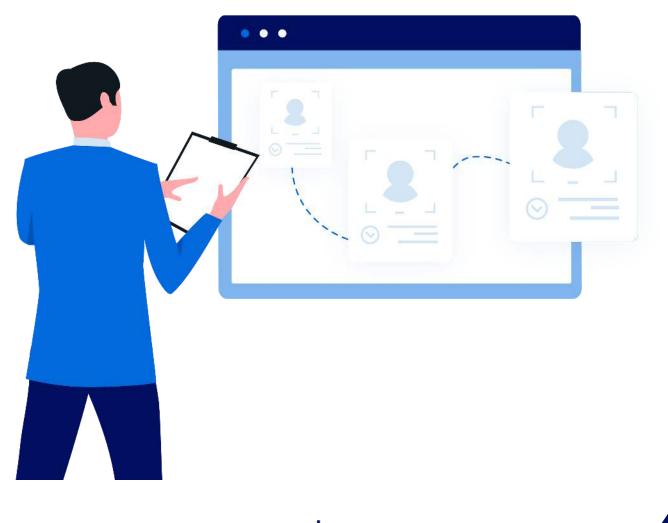
Help Articles

How does the program calculate the insurance estimation and patient estimation portions?



III planet denticon

How does the program calculate the insurance estimation and patient estimation portions?

To understand what fees are charged the patient, the user should refer to the question "hierarchy of fee schedule calculation."

The order of importance or priority of how the program calculates a fee for a procedure is listed below, with the item having the highest importance listed LAST:

1. Insurance Plan Coverage Percentage:

The insurance estimation is based on the procedure code's "Insurance Category" and the "% Coverage" for that Insurance Category of the insurance plan.

2. Alternate Minimum Benefit Code:

If an AMB Code exists within a Fee Schedule and a fee exists for that AMB code within the same fee schedule, the insurance estimation is based on the AMB fee and the coverage percentage of that AMB code. NOTE: The fee schedule type must be indicated as PPO- or Office-type.

Example: D2750P is for posterior crowns, and there is an AMB code of D2140. The fee for D2750 is normally \$1000. The fee for D2140 is \$200. The coverage percentage for D2140 is 80%. In this scenario, the insurance estimation for D2750P would be 80% of \$200 (\$160). The patient portion would be \$1000 -\$160 (\$840).

3. Patient Co-Pay Fee Schedule:

If the Insurance Plan Type is "Indemnity" and there is a fee schedule attached to a plan that is of the type "Insurance-Patient Co-Pay," the insurance estimation is the fee less the patient co-pay amount.

4. Insurance Fee Schedule:

Regardless of the Insurance Plan Type, if there is a fee schedule for that insurance plan, the insurance estimation is the insurance fee amount in the fee schedule.

NOTE: A fee schedule that is attached to a provider for an insurance plan takes preference over a fee schedule that is attached to an insurance plan.

5. Smart Fee:

If the insurance plan is attached to a Smart Fee schedule, the amount on the schedule is the insurance estimation.

**Note: If the patient information is indicated to "Assign Benefits to Patient," the insurance estimation will always be calculated as \$0.

