

## Dental Office Billing and Statement Policy

### Reason for Policy:

To improve the efficiency of our billing process, enhance cash flow, and increase patient satisfaction by ensuring timely and accurate billing. This approach also aims to bring in regular payments throughout the month, eliminate the bottleneck of calls coming in all at once for billing inquiries, and distribute the workload for the person responsible for sending out statements.

### Objective:

To outline the procedures for sending out statements, especially after insurance payments have been posted, in a manner that is both timely and organized.

### Policy:

#### **Roles and Responsibilities:**

- Office Manager (OM): Responsible for sending out statements.
- Insurance Coordinator: Handles all insurance claims, payments, and related paperwork.

#### **Initial Statement Timing:**

- Statements should be sent out immediately after the Insurance Coordinator posts insurance payments and the OM has the EFT papers.

#### **Subsequent Statement Timing:**

- If a second statement needs to be sent, it should be sent the following month either on the 15th or the 30th, depending on the patient's last name.
  - Patients with last names starting with A-M will receive their statements on the 15th.
  - Patients with last names starting with N-Z will receive their statements on the 30th.

#### **End-of-Month Statements:**

- At the end of each month, past due and final notice statements should be sent out.

**Rationale for Staggered Statements:**

- Sending statements on the 15th and the 30th helps to avoid being inundated with calls all at once and allows checks to trickle in throughout the month.

**Special Cases:**

- For patients who initially receive a statement immediately after an insurance payment is posted, their next statement should be sent in the appropriate group (either on the 15th or the 30th) the following month.