APEX

Insurance Verification & Dental Billing

SYNERGY DENTAL PARTNERS

Insurance Verification

Apex verification solution integrates advanced technology with the existing practice management system, streamlining the insurance verification process, eliminating common errors, and reducing phone calls and precious hours spent on hold by front office staff.

- Verify eligibility and benefit details specific to your needs, 3-5 days before patient appointment
- Detailed benefit breakdown directly to your PMS system
- Comprehensive integrated dashboard
- Daily reporting and communication with front office staff

Claim Submission

We ensure the correct claim form and coding is used, and patient data, provider information, necessary attachments, and clinical details have been checked to be free of errors, mistakes, or omissions. It's important to do everything possible to avoid denials in order to protect the financial health of your practice.

- Review claim details for accuracy
- Fix or add any incorrect or missing information
- Add attachments to claims, including images, charting, clinical narratives
- Submit claim to insurance payers daily

Claim Follow Up

Claim management is an important area of any practice, and when done effectively practices get paid faster and enjoy a healthy cash flow.

- Analyze and track insurance aging 30/60/90-day reports
- Follow up on all denied or outstanding insurance claims over 15 days old

- Detect denials early, resubmit claims for resolution
- Submit and manage timely appeals on denied services
- Notate all claim progress directly in PMS

Payment Posting

Payment posting accounts for the payment received from the insurance payer against the claims submitted for the dental services provided. The process includes identifying the patient account, procedure, billed amount, paid amount, allowed amount, write-off amount, and any other pertinent details given on the Explanation of Benefits (EOB).

- Gather and organize all EFT and paper check payments daily
- Post all payments and adjustments to outstanding claims
- Notate all claim related information, such as downgrades, frequency limitations, denied code, etc., to PMS at the time of posting

EFT Setup and Reconciliation

Most insurance plans offer ETFs for receiving claim payments; however, each payer has a different application process to set up EFT payments. Once an EFT payment is received in your bank account, it needs to be posted into the PMS. Apex will reconcile these payments to ensure all funds deposited to the bank have been posted accurately to the PMS.

- Bypass paper checks by enrolling doctors to receive electronic fund transfers for with all payers who offer EFT payments
- Manage ongoing enrollment for new doctors and locations
- Reconcile EFT payments between PMS and practice bank account

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