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MAGAZINE

Help Your New Hires Get Off the Ground Faster

Dentrix Essentials online learning is the perfect resource for training new team members.

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CAN'T GET AHEAD OF YOUR SCHEDULE?
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Introducing Simplifeye. Smart, wearable technology that connects to Dentrix to help your entire team streamline patient workflow—from the waiting room to the dental chair and beyond. See patient details such as procedure, last visit and medical alerts, all at a glance. It's the smarter way to stay on schedule.

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Meet with a Dentrix Profitability Coach for a free 30-minute assessment. See what your data says about your practice's strengths and weaknesses, and key areas to improve to help boost profits. Act now.

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Own Dentrix?
It's time to get to know the Essentials.

Dentrix Mastery Tracks™ Essentials online training will help your team members get up to speed on your software in hours instead of days!

Mastery Tracks Essentials training will help your team members better prepare to use Dentrix on the job—in just a matter of hours. Team members can learn the essential components of Dentrix, allowing them be more effective right away. Even long-time employees can benefit from a great refresher. And, for team members ready to expand and deepen their skills, Dentrix Mastery training is also available.

Mastery Tracks online training is included with your Dentrix Customer Service Plan. So what are you waiting for?

Take advantage of all that Dentrix Mastery Tracks has to offer.

Log in at Dentrix.com/resource-center and select "Get Your Training."

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SPOTLIGHT

Dentrix Mastery Tracks™ allows dental professionals to test how well they understand and can use Dentrix. Read on to find out about Monica Robinett, a financial coordinator who has completed all eight Mastery Tracks tests and earned all four specialist certificates.

MONICA ROBINETT | SENIOR FINANCIAL COORDINATOR

Where do you work?
I work for a family dental group practice named Moore & Pascarella Dental Group in Red Bluff and Redding, CA.

What is your title?
I am the Senior Financial Coordinator.

What are some of the duties you're responsible for within your practice?
I am responsible for treatment planning, A/R management, provider credentialing, insurance contracts, and training new team members.

How long have you been with this practice?
I have worked with the practice for 12 years.

How long have you worked with Dentrix?
My first experience with Dentrix was 12 years ago when I first joined the practice. I came from a medical billing background, and the difference in software is amazing to me. Dentrix is powerful; it has numerous capabilities to complete our daily tasks efficiently, it is customizable to fit any office's needs, and it is very user friendly.

Which certificates have you earned?
I have earned all four of the Dentrix Specialist Certificates: Dentrix Clinical Specialist, Dentrix Financial Specialist, Dentrix Front Office Specialist, Dentrix Practice Analysis Specialist.

How has participating in Mastery Tracks helped you use Dentrix?
Participating in Mastery Tracks has helped me use Dentrix more efficiently and to the software's full potential.

How has becoming a Dentrix specialist improved your career?
Not only has it boosted my confidence attaining the Dentrix specialist title, it has helped me become a better trainer for our new team members.

What is your favorite Dentrix tip or trick?
Just one favorite tip or trick? That's tough. Treatment plans can be very complicated when the doctor offers more than one option to a patient. Being able to link the recommended case to alternate treatment plan is such an efficient way to present treatment and generate an accurate estimate to the patient; this is definitely one of my favorite tricks.

Is your team ready for your success? Visit Dentrix.com/Mastery and start using Dentrix Mastery Tracks to give your team the tools they need to measure and improve their Dentrix skills.

▼ Announcing New Insurance Payor Connections

DENTRIX eClaims

Dentrix has eClaims connections with several new payors. For patients using the following insurance carriers, you can reduce paper claims by submitting electronic claims through Dentrix instead.

Payor ID	Payor Name
38219	AmeraPlan
EMBDQ	DQ/Emblem (Emblem Health Medicaid)
46278	ENVD AR Ambetter
46278	ENVD AZ Bridgeway Advantage
46278	ENVD AZ Bridgeway Health Solutions Adult
46278	ENVD AZ Bridgeway Health Solutions Child
46278	ENVD AZ Cenpatico Integrated Care
46278	ENVD AZ Health Net Access Medicaid Adult
46278	ENVD AZ Health Net Access Medicaid Chip
46278	ENVD AZ Health Net Medicare Advantage
46278	ENVD GA Peach State Ambetter
46278	ENVD GA Peach State Medicaid Adult
46278	ENVD GA Peach State Medicaid CHIP
46278	ENVD GA Peach State Medicare Advantage
46278	ENVD IL Illinicare Health Ambetter
46278	ENVD IL Illinicare Health MMA (Dual)
46278	ENVD IL Illinicare Health Medicaid
46278	ENVD IN MHS Ambetter
46278	ENVD IN MHS Hoosier Care Connect
46278	ENVD IN MHS HIP Basic, Plus, Pregnancy
46278	ENVD IN MHS HP Plus
46278	ENVD IN MHS HP Basic (19-20 yrs old)
46278	ENVD IN MHS Hoosier Healthwise Package A
46278	ENVD IN MHS Hoosier Healthwise Package C
46278	ENVD MS Magnolia Medicare Advantage
46278	ENVD OH Child and Adult CFC/ABD All Ages
46278	ENVD OH HIM (Ambetter)
46278	ENVD OH Medicare Advantage
46278	ENVD OH MyCare MMP Medicare Opt In
46278	ENVD OH MyCare MMP Children 18+
46278	ENVD TX Superior Healthplan Medicare Adv
46278	ENVD WI MHS BadgerCare Plus Standard SSI
34150	Hometown Health Network (Saint Clairsville, OH)
37264	Mercy Benefit Administrators
NDB01	Nevada Dental Benefits
PCA01	PrimeCare Administrators (PPO)
34150	The Health Plan of the Upper Ohio Valley
25348	Travis County Map-Mediview

For more information about Dentrix eClaims, visit www.dentrix.com/products/eservices/eclaims.

DENTRIX Attachments

The following payors now accept electronic claim attachments. With electronic attachments, you can add digital X-rays, EOBs, photos and perio charts to the electronic claims you send.

Payor ID	Payor Name
46278	ENVD AR Ambetter
46278	ENVD AZ Bridgeway Advantage
46278	ENVD AZ Bridgeway Health Solutions Adult
46278	ENVD AZ Bridgeway Health Solutions Child
46278	ENVD AZ Cenpatico Integrated Care
46278	ENVD AZ Health Net Access Medicaid Adult
46278	ENVD AZ Health Net Access Medicaid Chip
46278	ENVD AZ Health Net Medicare Advantage
46278	ENVD GA Peach State Ambetter
46278	ENVD GA Peach State Medicaid Adult
46278	ENVD GA Peach State Medicaid CHIP
46278	ENVD GA Peach State Medicare Advantage
46278	ENVD IL Illinicare Health Ambetter
46278	ENVD IL Illinicare Health MMA (Dual)
46278	ENVD IL Illinicare Health Medicaid
46278	ENVD IN MHS Ambetter
46278	ENVD IN MHS HIP Basic, Plus, Pregnancy
46278	ENVD IN MHS HP Basic (19-20 yrs old)
46278	ENVD IN MHS HP Plus
46278	ENVD IN MHS Hoosier Care Connect
46278	ENVD IN MHS Hoosier Healthwise Package A
46278	ENVD IN MHS Hoosier Healthwise Package C
46278	ENVD MS Magnolia Medicare Advantage
46278	ENVD OH Child and Adult CFC/ABD All Ages
46278	ENVD OH HIM (Ambetter)
46278	ENVD OH Medicare Advantage
46278	ENVD OH MyCare MMP Children 18+
46278	ENVD OH MyCare MMP Medicare Opt In
46278	ENVD TX Superior Healthplan Medicare Adv
46278	ENVD WI MHS BadgerCare Plus Standard SSI

For more information about electronic insurance claim attachments, visit www.dentrix.com/products/eservices/eclaims/attachments.

DENTRIX eEOB

After you have sent claims and attachments to payors electronically, complete the electronic claim round trip by accepting electronic explanation of benefit statements (eEOBs) that the insurance carrier sends back to you. The following payors now send eEOBs.

Payor ID	Payor Name
CKMA1	Health Safety Net (HSN)
CKMA1	Medicaid of Massachusetts (DentaQuest)

GP133	OH Dental/ UHC Dental Government Programs
38242	Southern Benefit Administration Inc.

For more information about eEOBs or to register, visit www.dentrix.com/products/eservices/eclaims/eeob.

View the entire list of electronic payor connections using the Payer Search Tool at www.dentrix.com/products/eservices/eclaims/payor-search. You can search for specific payors or download the complete payor list. Call 800-734-5561 for help setting up any of these services.

▼ Dentrix G6.3 Is Here

We are happy to announce that the latest release, Dentrix G6.3, is now available to all customers running G6.2 or higher. As with previous updates, we continue to incorporate feedback from you, our customers. Here are just a few of the new or enhanced features you can expect from this release:

Appointment Book Schedule Production Option
If you would prefer to see the net production (production +/- adjustments) in the Scheduled Production Calendar rather than the gross amount, a new option has been added to calculate with production adjustments. You can then further decide if you want those to be calculated based on entry date or procedure date.

Override Dental Insurance Estimate
Based on your feedback, we have changed the Edit or Delete Procedure dialog box to allow you to always update or edit the Override Dental Insurance Estimate field. This means you can now change that estimate even after the procedure has been attached to a claim or the procedure has moved to history.

Practice Advisor Treatment Plan Calculations
To further enhance the way you calculate revenue for treatment planned procedures, we've made a change so that the revenue is counted when the treatment is accepted, not when it is completed.

These are just a few of the improvements you can expect in this update. To see if you can install this or any other update for Dentrix, open any Dentrix module, click on Help > About Dentrix > Check for Updates. Before running any update, please be sure everybody has signed out of the Dentrix software and you have a current backup.

▼ Vantiv Acquires Moneris USA

In December 2016, Vantiv acquired Moneris USA. Vantiv, based in Ohio, is a leading provider of payment processing services for merchants of all sizes, from local coffee shops to the largest national retailers.

Moneris has been the payment solutions partner for Henry Schein for many years. You are using the Moneris Payment Gateway if you are processing credit card transactions with any of our PowerPay products.

As a PowerPay or PowerPayLE EMV customer, you will continue to get a high level of service from Henry Schein and Vantiv. In the future, you will see new product features and functionality, deeper integration with Dentrix on the Vantiv payment platform, and faster processing times.

Henry Schein and Vantiv are jointly committed to ensure that our payment solutions are the best in the dental industry beginning with our current offering, PowerPayLE EMV. We look forward to keeping you abreast of all the positive changes as they occur.

Working to Improve Dental Billing

Learn how you can voice your input on new insurance features in Dentrix.

While reviewing responses to a recent survey we conducted, I was once again reminded of how critical dental billing and insurance management is for a successful dental practice. As we continue to hear this message from our customers and from the industry at large, we constantly look for ways to help Dentrix practices find success in this rapidly evolving landscape. For example, over the past year we have sponsored webinars and worked closely with industry experts to provide content and tools to assist in this area of your business.

In fact, you can find an incredible eBook authored by Teresa Duncan, MS, FADIA, FAADOM, entitled "Effective Insurance Management for Dentists" on our website www.dentrix. com/solved. In the article, Teresa describes the insurance process in three parts—patient eligibility verification before the patient arrives, claim submission while the patient is in the office, and final claim payment after the patient leaves. Dentrix has the insurance management services and tools to help you be successful with all of these task at each of these three stages. In fact, we have bundled service plans that include these tools at discounted pricing. For more information, visit www.dentrix.com/suites/comparison.

However, even with all of this, we know that there are new insurance wrinkles that are being introduced every year. Whether these issues arise with new frequency stipulations or downgrade requirements, each change can cause delays or affect the expected payment portion from the patient. As we look at ways we can continue to assist our practices to be more efficient in managing insurance, we would like to get your feedback on the top items affecting you in this space.

We recently created a comparison tool on Dentrix MyVoice that includes the top insurance requests. This tool will help us to know how each of these dental software requests rank against each other so that the most important items rise to the top. By going to the site and spending a few minutes comparing ideas, you will be helping to drive the roadmap for new insurance features in Dentrix. You can find the comparison tool by going to www.dentrix.uservoice.com/smartvotes/130655?eid=5854. We truly appreciate your partnership as we continue to build upon the successful tools Dentrix has for managing insurance in your practice. **DM**

BRAD ROYER
Dentrix Product Manager

DENTRIX Connected

PlanScan

We've Made Digital Scanning the Right FIT for Your Practice

Now PlanScan is Dentrix® Connected!

Planscan® is Dentrix® Connected!

Dentrix automatically imports images into patient records, where you would expect them to be. But, more than that...the integration of Planscan means a smoother, more productive workflow with benefits no other system can replicate.

Maximize the power and productivity of the Planmeca PlanScan Intraoral Scanner and Planmeca FIT CAD/CAM systems with Your Dentrix Patient Management system.

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- View Planscan - 3D scans on any PC in your network
- Access and manipulate CAD within Dentrix chart
- Easy collaboration with your laboratories
- Manage and order block inventory right from Dentrix

FOR MORE INFORMATION CONTACT YOUR HENRY SCHEIN CONSULTANT AT 855.801.1121
or visit www.henryscheindental.com/planmecaplanscan

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STEP UP
& STAKE YOUR CLAIM

If you're a Dentrix Essentials customer, it's time to step up your game. Right now you can claim deep discounts when you upgrade your service bundle to Momentum or Optimum.

Both bundles include eClaims so you can submit and track insurance claims electronically, directly from Dentrix. Upgrade now to add:

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- Integrated billing and collection tools
- Automated appointment reminders
- Up to 20% transaction discount on eClaims, reminder postcards and QuickBill statements

Call **1-800-734-5561, option 2** to determine the best bundle for your practice.

DENTRIX
Service Bundles

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You deserve more.
Dentrix.com/ServiceBundles

Tips & Tricks

The tips in this section describe valuable but easily overlooked Dentrix features that simplify workflow and increase efficiency. Find the tips that correspond to your role in the practice and try them out today. Start making your job easier and your practice more profitable.

Front Office

Financial

Practice Analysis

Clinical

Drag and Drop from Appointment Book Lists

In the Appointment Book, you have access to a group of lists that help you keep your schedule full including the ASAP List, Open List, and Unscheduled List. You can access these lists from the Appointment Book toolbar by clicking **Appt Lists**.

- The **ASAP List** consists of scheduled appointments that have been flagged as ASAP. You can use this list of patients to fill holes in an otherwise full schedule.

- The **Open List** consists of patients whose appointment type has been set to OPEN, and are known to have flexible schedules, and can be moved around.

- The **Unscheduled List** consists of patients with broken appointments or appointments that have been marked as Wait/Will Call.

While viewing any of these lists, you can select an appointment and drag it to an open slot in the Appointment Book. Once you confirm the movement of the appointment, it no longer appears on the list.
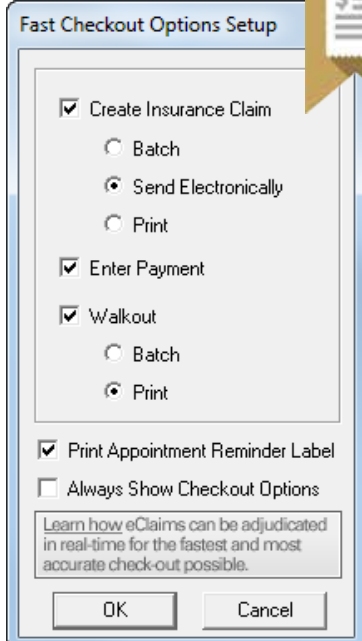
By dragging and dropping appointments in this way, you won't have to spend time recreating appointments because all the details from the **Appointment Information** dialog box (appointment reasons, providers, etc.) are kept intact and move with the appointment. Dragging and dropping from these lists also helps you to quickly clean up your lists and get patients back on the schedule.

Setting Up Fast Checkout Options in the Ledger

After every appointment, patients come to the front desk to check out and pay their bill. Many of these patients want you to print them a receipt, and you want to make sure you create an insurance claim for that appointment so that you don't forget when the next patient comes to check out. Use the Fast Checkout button to complete all three of these tasks with a single click.

1. From the Ledger, click **File > Fast Checkout Options Setup**.
2. Select the tasks you want to perform when the Fast Checkout button is click in the Ledger:
   - **Create Insurance Claim** – Check this box to create an insurance claim for today's procedures. Then select whether to send the claim to the Batch Processor, send it electronically, or print it.
   - **Enter Payment** – Check this box to post a payment on the patient's Ledger.
   - **Walkout** – Check this box to create a walkout statement or receipt. Then select to either send the statement to the Batch Processor or print it.
3. Click **OK** to save your settings.

Bonus Tip: If the tasks you perform at checkout vary, check **Always Show Checkout Options** to allow you to select which checkout options are completed for individual patients.

Fast Checkout Options Setup

☑ Create Insurance Claim
  ○ Batch
  ● Send Electronically
  ○ Print
☑ Enter Payment
☑ Walkout
  ○ Batch
  ● Print

☑ Print Appointment Reminder Label
☐ Always Show Checkout Options

Learn how eClaims can be adjudicated in real-time for the fastest and most accurate check-out possible.
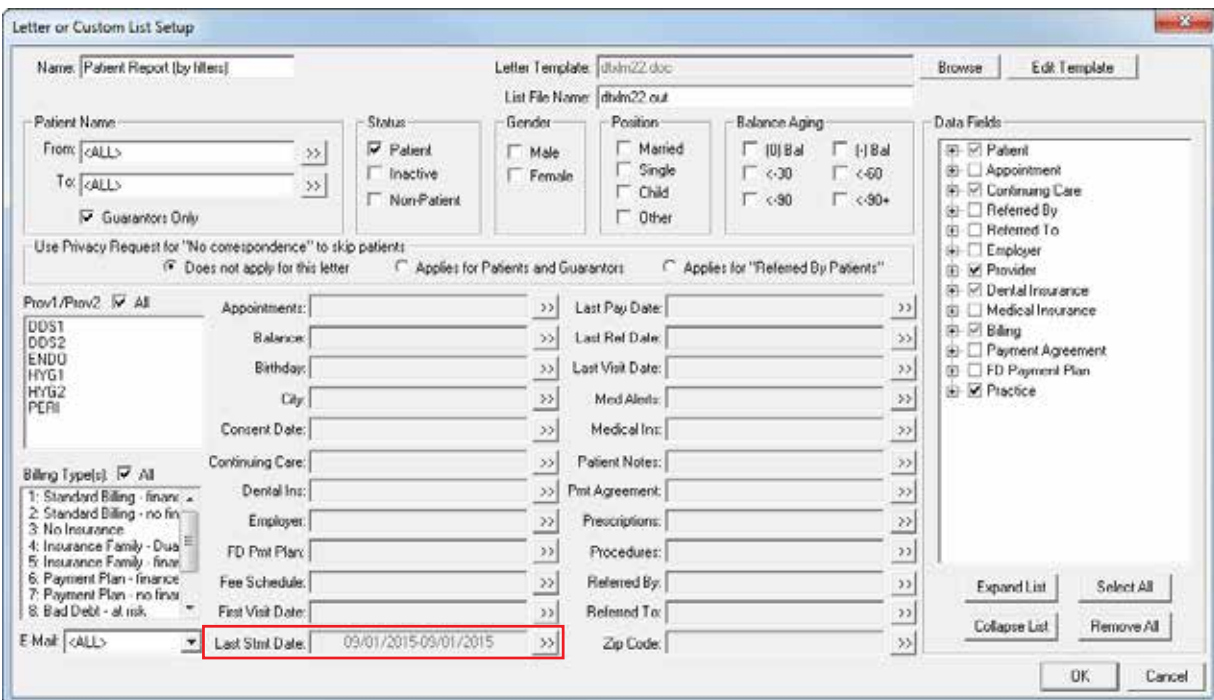
[OK]   [Cancel]

Finding Patients Who Received Billing Statements on a Specific Day

You recently printed billing statements for a special group of patients who are on your office payment plan and have missed at least one payment, and now you want to follow up with these patients. Since there is no report in Dentrix that will find these patients, you can create a custom list using the Patient Report by Filters option.

To generate a list of patients who received statements on a certain date:

1. From the Office Manager, click **Letters & Custom Lists**, and then select the **Misc.** category.
2. Select **Patient Report (by filters)** and click **Edit**.
3. Click the **Last Stmt Date** search button. Enter the date you generated the statements and click **OK**.
4. Make sure all other filters are blank and click **OK**.
5. Click **Open List Manager**. All patients who received a statement on that day will be listed.

Avoid Claim Denials by Including Remarks for Unusual Services

By including a brief narrative on insurance claims that describes unusual procedures or services that you have performed or provides clarification about the necessity of certain procedures, you can avoid costly claim denials or delays.

For example, insurance companies often deny crown buildups. When you complete a crown and crown buildup, you can add the following clarifying remarks to a patient's claim so that the insurance company is less likely to deny the buildup: "Previous endo on #21. Insufficient tooth strength and retention for crown."

To enter a claim remark:

1. From the claim, select **Remarks** from the menu bar or double-click the **Remarks for Unusual Services** block.
2. Enter a claim remark.
   - Type the claim remark in the text box. Click the **Check Spelling** button to perform a spell check, and click **OK**.
   - If you have previously set up custom claim remarks, insert the custom remark template by clicking the **Claim Remarks** button, clicking the appropriate remark description, and clicking **OK**. Make changes to the template to fit the situation as needed.
   - Click **Notes from Procedures** to copy the text from the procedure notes into the claim remark. Delete the unnecessary portions of the procedure note text as needed.
3. Click **OK** to save the remark.

Bonus Tip: When entering Remarks for Unusual Services, be aware that only 101 characters will print on the insurance claim, and only 125 characters will be sent on an electronic claim.

For additional information on creating custom claim remark templates, see the "Adding Insurance Claim Remarks" topic in the Dentrix Help.

Invalidating Completed Procedures from the Chart

Completed procedures are moved into history when the month is closed in Dentrix. This protects them from being changed, because when a completed procedure has been moved into history, it cannot be edited or deleted. This does not mean, however, that an error in history cannot be corrected. To provide a correction, the incorrect procedure must be invalidated and then replaced with a corrected version.

Note that when a procedure is invalidated, the paint colors in the Patient Chart associated with the invalidated procedure are removed and the related progress notes entry for the procedure are also removed so the patient's record is accurate.

To invalidate a procedure from the Chart:

1. In the Progress Notes panel in the Chart, double-click the completed procedure to be invalidated.
2. Make note of the specific information about the procedure (such as date, tooth, surfaces, etc.) if you will be re-posting a corrected procedure.
3. In the **Validate/Invalidate Procedure** group box, mark **Invalidate Procedure**.
4. Click **OK** to return to the Chart.
5. If needed, re-post the corrected procedure in the Chart, making sure to edit the procedure date to reflect the date the procedure was originally completed so your clinical records are accurate.

Note: This tip focuses on how to invalidate a procedure and re-post a corrected, backdated procedure so the clinical record is accurate. For information on how to invalidate a procedure so your financial records are accurate, see the "Invalidating a Procedure in History" topic in the Dentrix Help.

The Patient Balance Report

If you want a really quick and easy-to-understand report that can give you a list of outstanding patient balances, consider the Patient Balance Report.

This report is easy to generate, and doesn't have a lot of filters to manipulate. Quite simply, you set a range of patients, providers, and/or billing types, and that's it.

To generate the Patient Balance Report:

1. From the Office Manager, click **Reports > Ledger > Patient Balance Report**.
2. Type the **Report Date** you want to print on the report.
3. Do the following:
   - In the **Select Patient** group box, set the range of patients to include on the report.
   - In the **Select Provider** group box, set the range of providers to include on the report.
   - In the **Select Billing Type** group box, set the range of billing types to include on the report.
4. Click **OK** to send the report to the Batch Processor.

Once generated, the Patient Balance Report is easy to interpret, and contains the following important information:

A. **Patient Details** – The patient's name, chart number, home phone, work phone, and billing type.
   Note: An asterisk to the left of the patient name indicates a guarantor.
B. **Last Patient Pmt** – The date of the patient's last payment.
C. **Last Visit Date** – The date a procedure was last posted for the patient.
D. **Pend. Claims** – Indicates whether the patient has pending insurance claims.
E. **Family Balance** – The patient's family balance.
F. **Patient Balance** – The patient's individual balance.

PATIENT BALANCE REPORT

Date: 11/07/2016   Page: 1

PATIENT NAME	CHART #	HOME PH #	WORK PH #	EXT.	BT	LAST PATIENT PMT	LAST VISIT DATE	PEND. CLAIMS	FAMILY BALANCE	PATIENT BALANCE
*Cackowski, Melinda	CA0004	(555)798-2106	( )		1	04/08/2016	07/16/2012		489.89	489.89
*Cackowski, Monica Anne	CA0005	(555)489-7451	( )		3	08/01/2011	09/08/2016	YES	462.00	462.00
*Caruthers, Stephen	BE0007	(879)555-1174	( )		1	06/29/2016	05/16/2013		0.00	0.00
*Chary, Sudharani W	CH0002	(489)555-2032	( )		1	09/20/2016	10/06/2014	YES	475.16	475.16
*Chavez, Lupe	CH0004	(807)555-3258	( )		1	10/14/2016	10/18/2012		111.59	111.59
*Chen, Amy	CH0006	(801)555-2317	( )		1	02/05/2015	02/05/2015		56.00	0.00
Chen, Sunny	CH0007	(801)555-2317	( )		1		02/18/2016		56.00	56.00
*Chiba, Mariko	CH0013	(555)555-3981	( )		1				0.00	0.00
*Cho, Peter	CH0005	(801)555-2317	( )		1	05/22/2015	02/05/2015		194.00	194.00
Clawson, Antoine	JA0017	(432)555-1156	( )		1				712.92	0.00
Clawson, Carla	LA0005	(432)555-1156	( )		1		09/13/2014	YES	712.92	275.40
*Clawson, Edwin	LA0004	(432)555-1156	( )		1	05/31/2012	10/11/2012	YES	712.92	437.52
*Clemente, Harvey	WA0003	(489)555-4156	( )		11	03/19/2016	10/02/2014		1031.21	1031.21
Collette, Jenna	HA0012	(223)555-9192	( )		1				374.50	0.00
*Collette, Scott	HA0011	(223)555-9192	(555)555-0029		1		05/31/2012		374.50	374.50
*Comoletti, Darren	CO0003	(489)555-2356	( )		1		09/30/2014		849.55	849.55
Cooper, Muriel	QU0004	(469)555-4454	( )		1	01/21/2016	01/27/2016	YES	196.65	192.00
*Cooper, Stanley	QU0003	(469)555-4454	( )		1	01/21/2016	10/15/2014	YES	196.65	4.65
*Crawford, Marina	CR0005	(555)555-7985	( )		1		03/09/2016		140.00	140.00
*Crisp, Jack	CR0006	(801)555-9034	( )		1				0.00	0.00
*Crosby, Brent L	CR0001	(797)555-5969	(979)555-1311		1	11/07/2016	08/29/2016	YES	1681.16	262.96
Crosby, Shirley H	CR0002	[PRIVATE]	( )		1	06/10/2015	09/19/2014	YES	1681.16	1418.20
*Cruz, Dina	CR0004	(555)555-7985	( )		1				0.00	0.00

*Head of Household

(A) (B) (C) (D) (E) (F)

Help Your
NEW HIRES
Get Off the Ground
FASTER

DENTRIX ESSENTIALS ONLINE LEARNING IS THE PERFECT RESOURCE FOR TRAINING NEW TEAM MEMBERS.

ERIN BRISK | SENIOR EDITOR

Figure 1 When your team members pass a test, they will receive a certificate.

Have you ever dealt with staff turnover in your office? Of course you have. Staff turnover is one of the most common problems in dental offices, and it causes reduced efficiency and decreased production in every office because you can't cancel appointments and shut the office down while you hire and train new team members.

So what can you do to minimize disruption in your office during this stressful process? How do you get new team members up to speed and ensure they have the Dentrix knowledge and skills they need to succeed? Dentrix Essentials online learning is the answer. It's your new-hire Dentrix training program.

You have new team members. We have their Dentrix training.
Instead of having one of your more experienced team members take time away from their responsibilities to train your new team members on Dentrix (which will cause you to lose even more efficiency and productivity), use the Dentrix Essentials courses.

Dentrix Essentials is the newest level of the Dentrix Mastery Tracks program. It's designed to help your new team members learn to use key features in Dentrix and then check their understanding. Since the courses are online and on-demand, your team members can study whenever it's convenient for them (and for you), and they'll be able to start working sooner because they don't have to wait for another team member to have free time to train them.

Take a course. Take a test. Earn a certificate.
The process is simple. Your team members take a course and then take the test that goes along with the course. When they pass the test, they earn a certificate (Figure 1).

There are four Dentrix Essentials courses: Clinical Essentials, Financial Essentials, Patient Information Essentials, and Scheduling Essentials (Figure 2). These

courses are designed to give learners the information they need to perform essential tasks in Dentrix, focusing on core activities that happen within key job functions in the office. Your team members can focus their study on just the skills and knowledge they need for their jobs, which means they can be ready to go to work faster.

Figure 2 New team members can study the areas of Dentrix that align with their job responsibilities.

Each Dentrix Essentials course contains two or three lessons, and each lesson is made up of several topics. Each topic includes an introduction that describes a Dentrix task and when to use it, a short video that shows how to perform the task, three to five additional tips that give extra insights about the task, and a practice exercise that helps reinforce understanding.

When your new team members have completed a course, they can take a short test to check their understanding. If they pass the test, they'll earn a certificate to show their achievement. When combined with the rest of your new-hire onboarding training, Dentrix Essentials can help you feel more confident that new team members are ready to go to work.

Don't worry! It won't take too much time.
We know your office is busy and new team members may need to spend time learning other office processes while they study Dentrix. We have designed Dentrix Essentials with flexibility in mind so that you can fit it into your time instead of adjusting your time to fit the training.

Your new team members don't have to go through an entire course or lesson at once. Each lesson has 10-15 topics, and each topic is short and will only take three to five minutes to complete. Plus, the courses are set up in a system that allows team members to mark off what they have completed as they study. That means they can study a few topics at a time when they can fit in a little training with the other things they are doing in the office. Then, when they return to the training, they'll know exactly where they left off.

The Dentrix Essentials tests each include approximately 15 questions and may take up to 30 minutes to complete. Learners can pause a test or save what they have done and come back to the test at a more convenient time.

The program works just as well for cross-training.
Current staff members will benefit from Dentrix Essentials training too. When you have a chairside assistant who wants to work in the front office or an office manager who needs to learn how to create treatment plans, Dentrix Essentials can help prepare them for those additional responsibilities.

Even though those team members are not new to the office, they are new to that type of work and will need to learn to use Dentrix in a new way. You can use Dentrix Essentials to invest in these team members as they expand their skills and prepare for success in new roles.

Put your wallet away! There's no additional cost to you.
All four Dentrix Essentials courses and the corresponding tests are included in your Dentrix Customer Service Plan. You can rely on Dentrix Essentials as your go-to Dentrix resource for training new hires and cross-training existing team members. Since there's no additional cost to you, there's no reason not to have every member of your team take courses and tests.

Get started today! Make Dentrix Essentials training part of your office's new-hire onboarding process and team development program. Visit www.Dentrix.com/Mastery to learn more about the program and see the courses that are available. **DM**

How do I access Dentrix Essentials courses and tests?
It's easy to get started!

1. Log in to the Dentrix Resource Center at www.Dentrix.com/Resource-Center.

2. In the Get Your Training section, click Enter.

3. Click Register to create your learner account, or log in if you already have one. You will be required to create a personal username and password so you can track your learning progress.

4. Under Learn the Essentials, click Courses and select the course you want to take, and then click the lesson you want to start with.

DENTRIX

This excerpt from the Clinical Charting workshop will teach you how to use medical alerts more effectively in your practice. By adding notes to medical alerts to specify alert details, you can track all of the medical details you need and stay within the number of medical alerts you are able to create in Dentrix.

A BETTER WAY TO USE MEDICAL ALERTS IN DENTRIX

Because there is a limit to how many medical alert types you can set up in Dentrix, many offices reach the limit of allowed medical alert types. This often happens because they create new alerts for similar conditions. If you are creating a new medical alert for each new condition or illness patients may have, you can quickly run out of medical alerts in Dentrix.

! THE PROBLEM

Your office has several individual medical alert types for allergies: one for Penicillin, one for Sulfa drugs, one for latex, and so on. You have met the limit of 64 unique medical alert types, and now you don't have room to add new types of medical alerts to Dentrix. You need to free up some space so you can add new medical alert types.

THE SOLUTION

Create a single, generic medical alert type for allergies and use the Note field within the Medical Alerts dialog box (available in Dentrix G6) to describe the type of allergy the patient has and additional information you need to further explain the medical alert. Then delete any existing medical alerts that are now unnecessary or redundant (like "Allergy – Latex" and "Allergy – Codeine") to create open slots for new medical alert types.

Note: This article will focus on consolidating multiple allergy medical alert types. However, the same principles in the solution will apply to other medical alerts for which you have duplicates or multiple alerts describing specific details about the same condition, such as pre-medications, heart conditions, or other diseases.

FOLLOW
A L O N G

Open your Dentrix system and use the following steps to delete duplicate and redundant medical alert types, replace them with a single alert type, and use medical alert notes to describe specific details about the alert.

STEP/1

GENERATE A LIST OF PATIENTS ATTACHED TO THE MEDICAL ALERT YOU WANT TO ELIMINATE

Look at your existing medical alerts and find one that you can rename to act as the generic medical alert type that will replace the individual allergy medical alerts currently in Dentrix. For example, rename the "Allergy – Aspirin" medical alert to "Allergy" and use medical alert notes to give additional information about the specific allergy. Then generate a list of the patients that are currently assigned to the Allergy – Aspirin medical alert.

To generate a list of patients assigned the medical alert you want to eliminate, from the Office Manager, click **Letters & Custom Lists** and click the **Misc.** button. Select **Patient Report (by filters)** and click **Edit**.

In the **Status** group box, check the options to include the **Patient, Inactive**, and **Non-Patient**. Ensure that the **All** option is checked for both the **Prov1/Prov2** and **Billing Type(s)** filtering options (Figure 1).

Click the search arrow next to **Med Alerts**. From the list of medical alerts that appears, select the Allergy – Aspirin medical alert, and click **OK**. Then click **OK** again to return to the **Miscellaneous Letters & Custom Lists** dialog box. Click **Open List Manager** to view a list of the individual patients assigned to the medical alert.
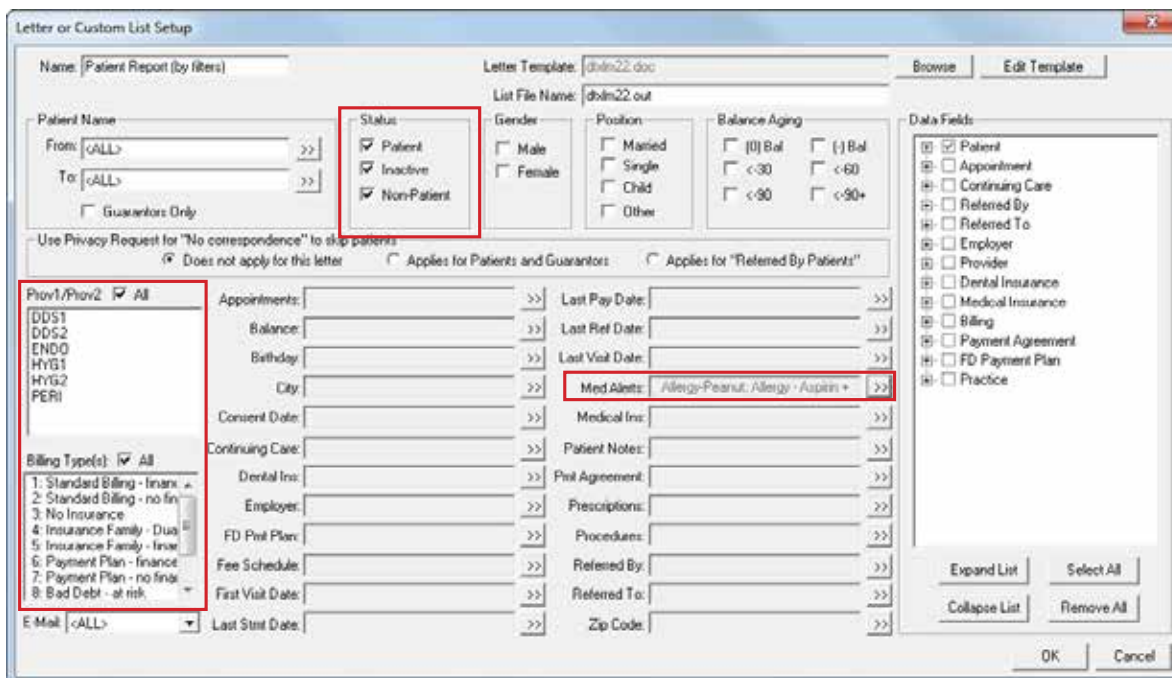

Figure 1 Use the Patient Report (by filters) to create a custom list of patients assigned to specific medical alerts.

STEP / 2

ADD MEDICAL ALERT NOTES TO PATIENT ACCOUNTS AND RENAME THE MEDICAL ALERT

Once you have a list of all patients assigned to the Allergy – Aspirin medical alert, you can add a medical alert note to each patient's account giving the details of that specific allergy and eliminate the need for a specific allergy-based alert.

Figure 2 Assigned medical alerts are highlighted in the list. Add details or additional information about the condition in the Notes field.

From the List Manager, select the first patient on the list and click the Family File button. Double-click the Medical Alert block. The right side of the dialog box lists the Medical Alert(s) currently assigned to the patient. Click the Edit button to makes changes.

Medical alerts assigned to the patient are highlighted in blue in the Medical Alerts list (Figure 2). Add a note in the Note field that gives information about the medical alert (for example, "The patient is allergic to aspirin."). Click OK to save your changes. The Medical Alerts list for the patient will update to show the medical alert(s) and any notes entered that pertain to them. Then click Close to return to the Family File.

Note that it will still look like the patient is assigned to the Allergy – Aspirin medical alert, but that is okay. You will be renaming that alert to be a generic Allergy alert, so when you rename it the alert will be correct.

Repeat these steps to add notes about the medical alert to the remaining patients in the List Manager. Once all patients on the list have had notes added pertaining to their aspirin allergy, you can rename the Allergy – Aspirin type to Allergy.

STEP / 3

RENAME THE OLD MEDICAL ALERT TO BE THE NEW GENERIC ALERT

From the Office Manager, select Maintenance > Practice Setup > Definitions. From the Definition Type drop-down list, select Medical Alerts. Select the Allergy – Aspirin alert you want to rename.

In the Definition Text field, enter the new name for the generic Allergy alert, and then click the Change button.

A warning message appears telling you that changing the definition changes it wherever it is used in Dentrix. Click OK to change the definition. Patients who were assigned to the Allergy – Aspirin alert will now be assigned the generic Allergy medical alert, and the Allergy – Aspirin alert will no longer exist.

STEP/4 REPEAT STEPS 1 AND 2 FOR THE OTHER ALERT TYPES YOU WANT TO DELETE

Repeat Step 1 to generate another list of patients assigned to the next medical alert you want to eliminate (for example, Allergy – Codeine). Then add medical alert notes about the specifics of the allergy as you did in Step 2.

Because you have already created a generic allergy medical alert, un-assign the Allergy – Codeine medical alert and

reassign the generic allergy alert. The notes will now specify the details of the allergy.

Repeat these steps for each patient in the List Manager, adding notes about the medical alert, un-assigning the alert you want to eliminate, and assigning the new, generic alert.

STEP/5 DELETE THE UNASSIGNED MEDICAL ALERTS FROM DENTRIX TO FREE UP SPACE FOR NEW ALERTS

Once you have reassigned medical alerts to a more generic alert and are using the Notes field for more specific information, delete the old medical alerts that have now been reassigned. That will prevent them from being assigned to patients in the future and will free up space for you to create other medical alerts you need.

From the Office Manager, select Maintenance > Practice Setup > Definitions. From the Definition Type drop-down list, select Medical Alerts. Select the medical alert you want to delete, and click the Delete button. A warning message appears stating that you need to select a replacement definition for the one you are deleting (Figure 3).

Click the search button next to Select Replacement Definition, select the generic medical alert you created in Step 2, and click OK. Then click OK again to begin the replacement process. A message appears informing you of how many definitions were replaced. Click Close. Repeat these steps to delete any other alerts you reassigned, and then click Close again to return to the Office Manager.
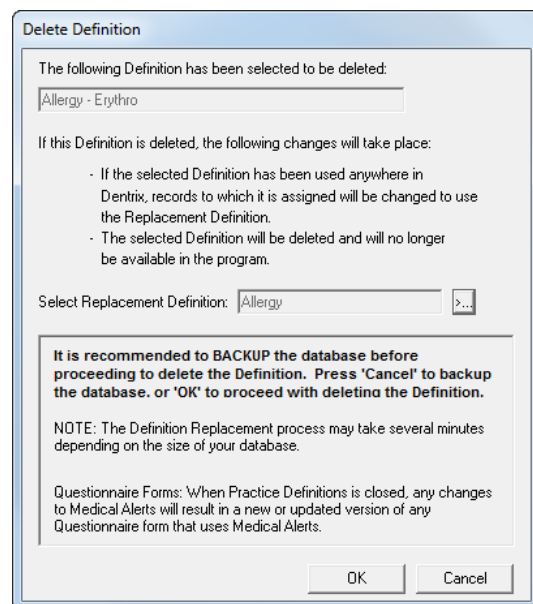

Figure 3 Delete the unused medical alerts and select a replacement definition.

N E X T
S T E P S

USE THE FOLLOWING CHECKLIST TO
HELP YOU IMPLEMENT IDEAS FROM
THIS ARTICLE IN YOUR PRACTICE

✓ Look at the current list of medical alerts in your Dentrix system and discuss with your team members which medical alerts you need to create, which specific alerts could be replaced with more generic alerts with notes for additional information, and which alerts could be deleted to free up space for more useful alerts in the future.

✓ Discuss each new medical alert you want to create with the team to make sure you should create a new alert, or if you could use a more generic alert and record the details with notes instead.

✓ Set aside time to create new medical alerts, create lists of patients attached to alerts you want to delete, and reassign the patients to the new alerts.

✓ Train staff who create Family File records for new patients and update patient information to use the medical alert Note field to enter details and additional information about medical alerts.

✓ Train staff to read the medical alert note to find details about patients' medical alerts.

Dentrix workshops offer you a chance to practice using Dentrix in a hands-on, trainer-led class. Workshops offer examples of best practices for using Dentrix in your office, ideas for incorporating lesser-used features into your workflow, and advice about how to customize Dentrix to suit your preferences.
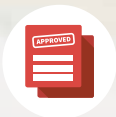
L E A R N   M O R E

✓

For more tips like the ones in this article and to get in-depth training on assigning and customizing medical alerts in Dentrix, attend the Clinical Charting workshop. Visit **www.Dentrix.com/Workshops** for more information about this and other training workshops, including the full course list, course descriptions, and schedule.

Consider It Done.

As an office manager, you're expected to do it all—scheduling, billing, insurance, appointment reminders and more—while keeping production up and costs down. We'd like to give you a hand. Our **Dentrix Service Bundles** are packed with eServices—powerful tools connected to Dentrix that help boost your front office productivity and streamline your workflow. Now you can automate the tasks you shouldn't be doing manually. Done and done.

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A-ES-DONE-Q117

Setting Up Dentrix for a New Associate

Complete these important tasks in your dental software whenever a new associate joins your practice.

W hen you have a new associate join your practice, there are a couple of Dentrix settings that you need to make sure are correct to avoid delayed or rejected claims and to ensure accurate provider payment allocation. Depending on whether your new associate is paid based on production or collection will determine how you set up your default payment allocation. It is also important to know how Dentrix reports on the provider when you use some of the management reports.

The first thing you will set up is the provider ID. In the Office Manager, from the Maintenance menu, point to Practice Setup, and then click Practice Resource Setup. In the Practice Resource Setup dialog box (Figure 1), under Provider(s), click New, and then add the new provider information in the Provider Information dialog box (Figure 2). This is where you will enter the provider's StateID#, TIN#, DEA#, NPI, Provider#, and so forth. The doctor's personal (Type I NPI) number goes in the NPI field, and the office tax ID number goes in the Office# field. When finished, click OK.

After the provider setup is finished, verify that the claim is set up the way you want it. From the Maintenance menu, point to Practice Setup, and then click Practice Defaults. Under Default Insurance Claim Providers, verify that the Billing Provider, Rendering Provider, and Pay-To Provider all specify the correct provider information (Figure 3). The information you provide here is used in the bottom two boxes on your insurance claim form, and the insurance companies use this information to know who to send payment to and if the rendering provider is a contracted provider. When finished, click OK.
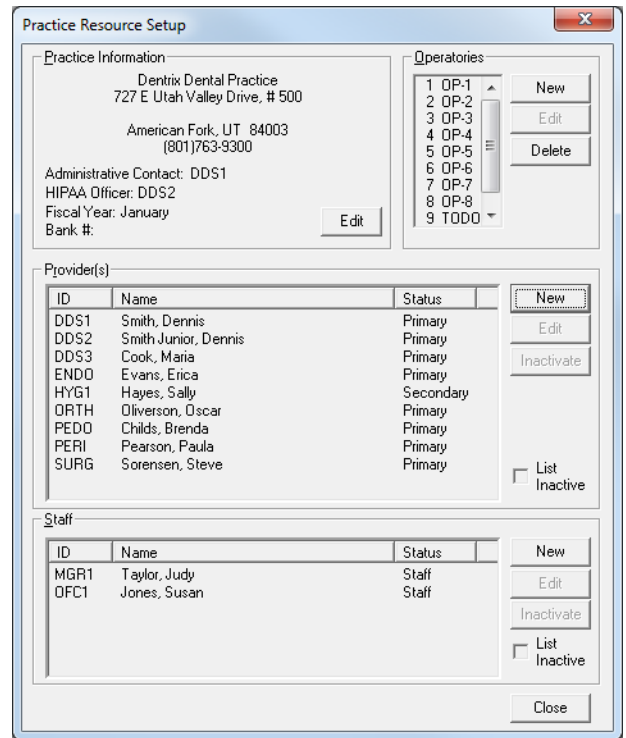

Figure 1 The **Practice Resource Setup** dialog box.

Depending on how your associate is being paid, you may want to also verify your default payment allocation setup. From the Maintenance menu, point to Practice Setup, and then click Preferences. If your new associate is being paid on collections, this is going to be extremely important.

For Provider, select one of the following:

- Split by Provider will separate out the patient payment to pay off each producing provider. Your insurance claims already do this, so why not split the personal payments as well?

- To Patients Primary Provider will apply the entire personal payment to the patient's primary provider (PROV1 on family file) regardless of who the producing provider is. This decision will give too much collections to one provider and, if you run a Provider A/R report, the payments and accounts receivable will be lopsided.

For Patient, select one of the following:

- Family Account will post the entire payment to the guarantor. The result of doing this will be an accurate family balance but incorrect patient balances.

- Current Patient will post the personal payment only to the patient ledger you are logged onto currently.
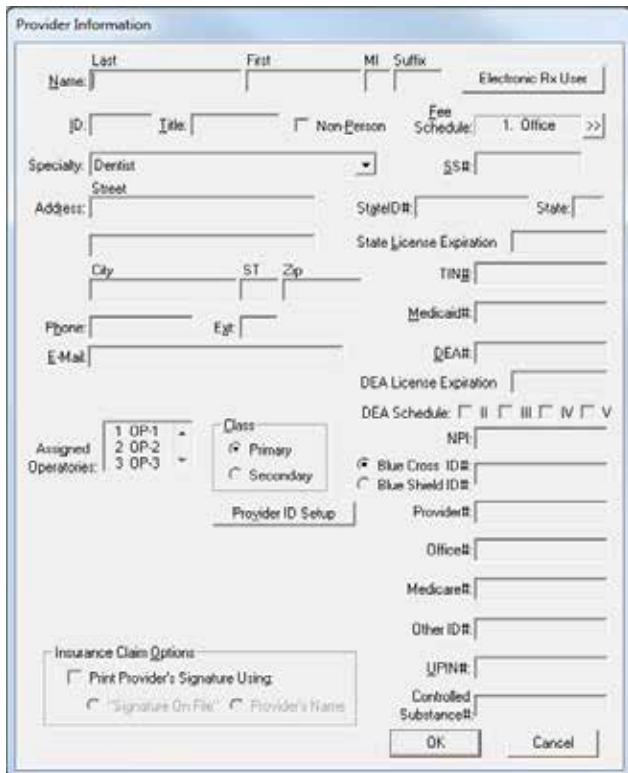
Figure 2 The Provider Information dialog box.

- **Split by Family Members** is a new feature as of Dentrix G6. It allows you to take one payment and distribute it out to multiple family members with one step. The result of doing this will be more accurate patient balances because it looks across the entire family account for patients with a balance. Please note: if you have archived a patient with a balance and you are using this new feature, it will pull that patient out of archive to apply a payment.

For **Split Method**, select one of the following:

- **Percentage Payments** will equally distribute the patient payment between any providers who has a balance.

- **FIFO (First In First Out)** will pay off the oldest provider balance first.

- **Guarantor Estimate** is always my first choice. What this allocation method will do is look at any current treatment with an insurance claim pending and allocate the patient payment depending on the insurance estimate. After it has allocated the payment to the estimated patient portion of the claim, it will revert to FIFO.

- **Equal Payments** is very similar to the percentage payments method but will just split the payment into equal payments instead of a percentage.

These are the critical things you need to do to ensure that billing and claim forms are set up correctly for your doctors. You will also need to set up your new provider with the appointment days, hours, and a special color for the appointment book. **DM**

Figure 3 The Practice Defaults dialog box.

Dayna Johnson, founder and principal consultant of Rae Dental Management, helps dental offices improve patient care, increase collections, and reduce staff headaches by implementing efficient management systems. With over 20 years of experience in the business and technical side of dental offices, Dayna's passion for efficient systems is grounded in both personal understanding and professional expertise. Dayna can be reached at dayna@raedentalmanagement.com or visit her website at www.raedentalmanagement.com.

DAYNA JOHNSON
Certified Dentrix Trainer

The 5 Things Never to Say to Your Patients about Insurance

Discover the phrases you should never use when talking to patients about insurance and why.

Like it or not, dental insurance has had a profound influence on dentistry. The insurance industry will continue to help mold the reimbursement landscape and patient perceptions of dental care and its affordability. It's challenging to do and say the right thing when having the insurance dialogue with our patients.

It's very important to train the dental team appropriately so that they can communicate with patients in a way that helps the patient understand what they can expect from the insurance without accepting responsibility for what the insurance carrier does. Here are five statements that should never be made to patients about their insurance coverage.

1. **Your insurance will….** It is foolhardy to believe we can always predict what the plan will cover, how much the plan will pay, and explain the ever-expanding limitations that could affect the expected reimbursement. Suggesting to the patient that the practice can always accurately predict the expected payments and what their copayment will be is dangerous and detrimental to the reputation and credibility of the practice.

   Should the practice strive to maintain accurate information in the dental software? Absolutely! This will aid the business team in estimating the potential benefit and collecting the patient's portion. Always remember, when describing to the patient the expected reimbursement, use words like, "estimate, estimated, potential reimbursement, our experience has been."

   The patient must understand that reimbursement is subject to many variables outside the practice's control. The patient should be made aware of your intention to help them maximize their legitimate reimbursement; however, the carrier is ultimately in control of the reimbursement made on their behalf.

2. **We are going to send a Pre-treatment Estimate.** Only send a pre-treatment estimate when the plan requires it; otherwise, it is poor use of the business team's time and expertise. Pre-treatment estimates only delay necessary treatment, and obtaining an estimate is no guarantee of payment. This disclaimer appears on every pre-treatment estimate: "The services are still subject to the plans restrictions and limitations." That being the case, why even obtain a pre-treatment estimate at all?

3. **We will accept the insurance payment as payment in full.** This statement should only be made if the plan covered the service at 100%. It is considered illegal in every state and unethical by the American Dental Association to waive any portion of the patient's copayment and/or deductible.

What to say to potential patients when you're not in-network with their insurance plan

Consider using these responses when you are not in-network with a potential patient's insurance plan.

If you file the insurance claim for the patient and accept assignment of benefits, the response could be:

"We have many patients that are covered by your plan, and our staff member Mary is great at working with dental insurance plans. She does everything possible to obtain the maximum reimbursement available through your plan.

We are not in-network with your plan because that plan has some significant limitations and restrictions associated with participation. If we were in-network, the insurance provider could then dictate and limit the kind of care we can provide our patients. Our doctor is concerned about your health, the overall appearance of your smile, and the long-term success of all dental care provided. Our doctor does not feel comfortable providing anything less than the best care available. Our valuable patients deserve the best care available and should not be limited to the type of care any insurance company dictates.

While we are not in-network with your plan, we accept assignment of benefits from it. With an assignment of benefits in place, you will only need to pay what the plan does not cover. Can I make you an appointment to meet our doctor? I know you will be impressed!"

Waiving the patient's portion is a material misrepresentation to the carrier of the actual fee charged for the service, a potentially fraudulent act. The practice should make every attempt to collect the patient's portion of their treatment cost and document those attempts. Failure to attempt to collect the patient's portion could be problematic.

4. **We will bill your insurance and send you a statement after we receive the insurance reimbursement.** Every attempt should be made to collect the patient's portion on or before the day the service is provided. Collecting on or before the date of service will serve to reduce the practice's accounts receivables and reduce the number of statements that are sent.

   Chasing the money is never easy for team members and is one of the least enjoyable parts their duties. If the practice carries balances and/or charge interest on open balances, most states consider the practice a lender and may hold the practice to the same standard and subject to the regulations as the banks in your state.

5. **No, we do not take your insurance (unless you neither file claims nor accept assignment of benefits).** When the practice is not in-network with the potential patient's insurance plan, never mislead the patient or provide inaccurate information. However, it's better not to just blurt out the answer "no," ending the conversation without taking the opportunity to establish a relationship with that shopper.

   When this occurs, you have lost the opportunity to educate that patient and perhaps encourage them to become your patient. While it is important to always be honest with the potential patient, other responses can be provided that reduce the likelihood of the patient immediately moving on to the next practice on their Google search. (See below for more information.)

When talking with our patients, it's important to help them understand their benefits. The patient should be aware that the coverage they have is a benefit that can help defer the cost of treatment, but that dental insurance seldom covers everything the patient needs to become and remain healthy. The dental team can help the patient understand the benefits and limitations of the coverage they have, and it could be helpful to eliminate the phrases identified here. **DM**

Dr. Shelburne graduated from the University of Virginia with a double major in Biology and Religious Studies in 1977. He went on to graduate with honors from Virginia Commonwealth University's Dental School and opened a private general practice in Pennington Gap, Virginia, in 1981. He has served as Secretary/Treasurer and President for Southwest Virginia's Component 6 of the Virginia Dental Association and as a delegate to the Virginia Dental Association's Annual Meeting. He and his family have served as short-term volunteer missionaries with the Baptist Medical Dental Missions International and on various Mission of Mercy projects in Virginia. In March 2008, he surrendered his dental license after being convicted of healthcare fraud and spent 19 months in Federal Prison and 2 months in a halfway house. Dr. Shelburne is a nationally known speaker/writer/and consultant who openly shares his mistakes, what he learned as a result, and how to avoid those career ending errors. "It is a wise man who learns from his mistakes, but a wiser man still that learns from another's."

ROY SHELBURNE
DDS

If you do not accept assignments but do file the claim on the patient's behalf, your answer might vary. Again, always be honest. Consider this response.

"We have many patients that are covered by your plan, and our staff member Mary is great at working with dental insurance plans. She will work with your dental plan and file a claim for our services on your behalf. Following each visit, you will pay us for the services provided. After the claim is processed by your insurance provider, you will receive reimbursement directly from the insurance provider.

We are not in-network with your plan, nor do we accept assignment of benefits from it because that plan has some significant limitations and restrictions associated with participation. If we were in-network, the insurance provide could then dictate and limit the kind of care we can provide our patients.

Our doctor is concerned about your health, the overall appearance of your smile, and the long-term success of all dental care provided. Our doctor does not feel comfortable providing anything less than the best care available. Our valuable patients deserve the best care available and should not be limited to the type of care any insurance company dictates.

Furthermore, being out-of-network greatly reduces our administrative fees, and we pass those savings on to our patients by keeping our fees for service reasonable.

Can I make you an appointment to meet our doctor? I know you will be impressed!"

Ransomware Attacks:
They Could Happen to You

Find out how ransomware could affect you and the steps you can take to help protect yourself.

L osing all your dental practice data. Being threatened by an extortionist. Having to stop operations while patient records are inaccessible. These can be a nightmarish reality for practices hit with ransomware.

Ransomware is a dangerous cyber threat, with attacks on the rise: "From January to September of 2016, total ransomware attacks against businesses increased by 300 percent when compared to 2015." Small-to-midsize businesses (SMBs), which includes many dental practices, are often a prime target. Over 50 percent of SMBs have fallen victim to ransomware, and on average, they spend almost $880,000 to fix damages and recover data. When you consider possible fines, lost revenue and recovery costs, you can see how one wrong click could potentially shut a practice down completely.

What Is Ransomware?
Ransomware is malware that can encrypt your data — patient records, financial and accounting information, payroll, and inventory — so they can't be accessed. The attacker then demands payment for you to regain access to your valuable data.

This is easy money for hackers. They send out a mass email or post a malicious link and wait for someone to take the bait. If just one of your employees clicks on the wrong link on a website or in an email, your practice is the next victim.

Unfortunately, outside experts may be limited in what they can do to resolve these issues. It depends on the severity and circumstances and what preventative measures were put in place by the office prior to the attack. A couple weeks ago, I helped a dental office that had been hit with ransomware. An employee working remotely had been browsing the web and checking email while connected to the office's server, and it became infected. Because the backup drive was plugged into the server at the office, it got encrypted too. Although they had another backup drive, it hadn't been used for a while, so the office lost three months of data.

Mitigating the Damage
You can take steps to protect yourself. Virus protection software is a great first-line defense. However, it may not stop every virus, including those enabled by users who ignore warnings, and it often can't identify the newest malware. In 2014, researchers tracked 500+ antivirus software evasion techniques in what was then the latest advanced malware.

You need more protection than antivirus software alone. I highly recommend you "insure" your data, similar to insuring yourself against other potential unexpected catastrophes, by using a backup that can restore your files to the point before the system was infected. In the last 90 days, 75 percent of TechCentral clients who were dealing with ransomware required a restore from a backup.

TechCentral Hybrid Backup Services take the hassle out of backups and restoration by regularly and automatically backing up your data to an on-site storage drive, as well as in the cloud using AES 256-bit encryption. Even if your entire system becomes infected and unusable, with a backup, you should be able to restore your data to the point before infection to minimize data loss.

Stop Waiting for Disaster to Strike
With TechCentral Hybrid Backup Services, when disaster strikes, you don't have to worry as much about losing precious data because we've got your backup. TechCentral monitoring and backup services are an investment in the safety of your most precious asset, your data. For more than 15 years, Henry Schein TechCentral has offered a single-source team of experts who design, deliver, and support your integrated dental technology. To learn more about Henry Schein TechCentral, call 877.483.0382 today. **DM**

Jamie Lamphere is a Network & Hardware Tech II at Henry Schein TechCentral, where she provides IT support to dental practices and is a trainer for the Network & Hardware and Digital Imaging support groups. Jamie has over a decade of experience in IT, networking, and medical fields, and she uses her wealth of knowledge to help practices so they can remain focused on their patients.

JAMIE LAMPHERE
Network & Hardware Tech II,
Henry Schein TechCentral

Simplifeye and Dentrix: Wearable Tech Saves Time, Drives Practice Efficiency

RYAN HUNGATE
Simplifeye co-founder and co-CEO

Simplifeye helps you save time, increase profits, decrease risk, and improve patient satisfaction.

As a busy orthodontist, I got tired of walking up to patients and not having a clue what I was doing for them that day. Every appointment began with a generic, "Hey buddy, how're you doing today?" Now, that doesn't happen anymore. With Simplifeye, my Apple Watch, and Dentrix, after I take a five-second glance at my wrist I immediately know the following:

- The patient's name
- The type of appointment
- Any medical alerts or allergies they have
- When I saw them last and what I did
- Crucial details about the procedure I'm doing today
- Where I need to be next

Through the Dentrix Connected program, Simplifeye makes dental electronic health records (EHRs) less time-consuming and easier for dentists to use. We integrated Simplifeye technology with the Apple Watch and Dentrix so you can reference EHRs as easily as checking the time on your watch. Each day, Simplifeye takes the critical information you need from Dentrix and displays it in a personalized queue for each provider (Figure 1). It's the perfect mobile solution for a dental practice with three or more operatories, because EHRs can travel with the doctor from chair to chair.

Simply put, Simplifeye delivers the right information to your wrist at the right time. You only see the patient information relevant to you at that time, on that day. And, you don't have to remove gloves, open a window, scroll through charts, use a keyboard, or click on a mouse to see the data you need.

Save Time and Drive Efficiency
Simplifeye helps you save time and drive efficiency in your practice. The displays are color-coded by appointment type. This allows you to triage the patients in your queue.
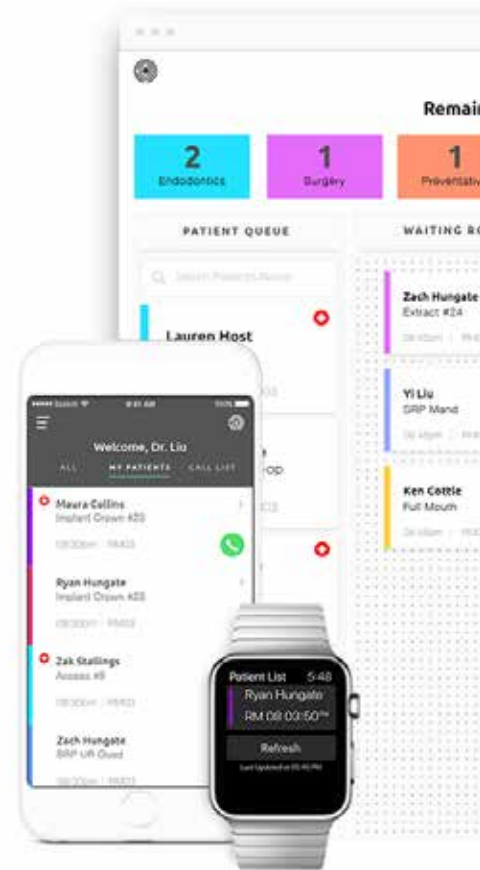

Figure 1 Simplifeye displays patient information from Dentrix for each provider.

For example, your watch shows that the patients in Chair 2, Chair 3, and Chair 5 are ready to see the doctor. The patient waiting in Chair 2 is a hygiene check and Chair 3 is an extraction. You do the hygiene check first, clear that chair, and allow the waiting room to funnel in.

Instead of your waiting room stacking up using a first-in/first-out strategy, Simplifeye lets you drive efficiency with informed choices about who to see first in your queue.

Figure 2 Simplifeye displays the medical alert screen first.

Our goal at Simplifeye is to make dentists more efficient at what they do, and what they do best is treat patients. We take care of all the headaches about where to go next, what to do when you get there, what the patient's name is, and what happened during the previous visit. With dental patient records on your wrist, you can save two to three minutes just getting the appointment started. By the end of the day, you've saved 60 minutes or more.

In our product beta tests, Simplifeye decreased waiting time by 10 to 15 minutes per patient. If you normally see 20 patients a day, you could save 200 minutes or more each day. What could you do for your practice with three more hours of production per day?

Increase Profits and Decrease Risk
Using Simplifeye in your practice allows you to see more patients in a day and earn more revenue. One study showed that Simplifeye increases the doctor's efficiency by 20 percent. That's an additional four patients a day, or 16 days a year.

If the average patient creates $90 of profit for your practice, adding just two patients per day would give you $70,000 more profit in a year.

Simplifeye gives you and your team a sixth sense about everything happening in your practice, updating displays "live" every minute. It signals your wrist when and where you need to go, keeping production flowing smoothly—no radios, light systems, or door flags needed. No more shouting down the hallway, either.

More importantly, Simplifeye helps you decrease risk in your dental practice. In a survey of 1,000 dentists, their number-one regret was not looking at medical alerts before seeing a patient. Simplifeye doesn't let you miss this vital information.

When you tap a patient's name on your wrist, the first thing you see is the medical alert screen (Figure 2). You must tap OK before you can see more information about that patient. That way, you won't wear latex gloves walking up to a patient with a latex allergy.

With its "patient ready" signals, Simplifeye also prevents the risk of leaving a patient alone in the chair while someone finds the doctor.

Improve Patient Satisfaction
Using Simplifeye with Dentrix can improve patient satisfaction in three ways:

1. It reduces wait times, so patients don't spend as much time at the dentist.
2. It demonstrates that your practice is keeping up with the latest technology.
3. It enhances doctor-patient communication.

With Simplifeye, providers in your practice can glance at their wrist, greet patients by name, and ask specific questions about their visit. No more starting the appointment with, "Hey buddy, how're you doing today?"

Also, your patients won't have to repeat the same answers they gave to your assistant five minutes before you walked into the room. Simplifeye lets you personalize each patient's experience in your office. This shows them you care about them as people, not just as patients.

One of the best ways to improve patient satisfaction is the follow-up call. But at the end of the day, who wants to stay late in the office and make those calls?

Simplifeye helps with follow-up calls by putting a list of patients you've seen that day on your personal phone. It masks your personal number so you can make calls from home (or from anywhere) on your personal phone, and your patients only see your office number in caller ID.

Where to Buy Simplifeye
There's nothing else like Simplifeye on the market today. For personalized queues by provider, medical alerts before you see a patient, and live patient-ready signals, Simplifeye is the answer.

To order Simplifeye or request a product demo, contact Dentrix Sales at 844.633.8002, or visit our website at www.Dentrix.com/Simplifeye.

As its name implies, Simplifeye is simple to install and use. The installation process takes less than 10 minutes. Once installed, you never have to worry about updates because the software updates automatically through the web.

Simplifeye is also compatible with the iPhone, iPad, and iPod touch. It requires iOS 9.3 or later. **DM**

SOLUTION GUIDE

You already depend on Dentrix to make your practice more profitable and productive. Now, you can turn Dentrix into an even more powerful solution by adding trusted, fully integrated third-party applications and capabilities to your digital dental office. The Dentrix Connected logo means the product has been carefully developed, tested and certified to work with your Dentrix platform. To see the full list of Dentrix Connected applications visit www.Dentrix.com/Connected today.

3M
www.3m.com

Tru Definition scanner

The 3M™ True Definition Scanner—available in mobile or cart editions—offers unparalleled accuracy, ease of use, and affordability for making fast, precise digital dental impressions.

3Shape
www.3shape.com

TRIOS Scanner

Take advantage of the award-winning TRIOS intraoral scanner to enhance patient experience, reduce chair-time and unlock the widest range of treatment opportunities. Backed by continuous software updates, upgradable hardware and add-on treatment modules, TRIOS ensures your practice stays ahead and your business grows stronger.

Apteryx
www.apteryx.com

Dental Practice Solution

Apteryx exceeds the expectations of its customers by creating timely, innovative and cost effective software solutions that improve the profitability of the clients' businesses.

Brightsquid
www.brightsquid.com

Secure-Mail

SecureMail is the patient-centric platform for secure healthcare collaboration. Thousands of physicians, specialists, allied health professionals, and patients are improving quality of life and overall care by sharing Protected Healthcare Information securely and efficiently with Brightsquid Secure-Mail.

Broadview
www.broadviewnet.com

Network-based Business Communication

Make your practice more profitable with OfficeSuite Dental, the state-of-the-art phone system that fully integrates with Dentrix G5.

DDX
www.ddxdental.com

Digital Dental Exchange

We provide next generation lab case management. Save time and boost efficiency, store patient data more securely, and improve communications with your lab. Call 877.244.9345 to schedule a demo or speak to a live sales representative.

Demandforce
www.demandforce.com

Patient Communication Solution
Demandforce works seamlessly with Dentrix G5 software to automate online and offline communications with existing patients to improve in-office efficiencies.

Dental Symphony
www.dentalsymphony.com

Dental Practice Solution
Dental Symphony's web-based clinical software revolutionizes patient management. Working alongside Dentrix, Dental Symphony provides innovative tools to practice easier, safer and more efficiently.

DocuFi
www.docufi.com

Document Management Solutions
DocuFi™ is a certified Dentrix partner providing tools to capture and process documents into electronic digital form. ImageRamp™ for Dentrix, using Fujitsu scanners, offers the most productive document scanning solution for Dentrix.

DentalWriter
www.dentalwriter.com

Medical Billing Software
For over 25 years, Nierman Practice Management has led medical billing in dentistry by continuously developing innovative products and providing exceptional training for dentists looking to grow their practice.

DEXIS
www.dexis.com

Digital Diagnostic Imaging
DEXIS delivers innovative, high-quality digital imaging solutions to the dental community. With its state-of-the art sensor and easy-to-use imaging software, Dexis provides numerous benefits to you, your practice, and your patients.

eDossea
www.edossea.com

Intra-Office Communication
We are solely focused on the dental profession and within the dental profession on the secure, easy and inexpensive transfer of your client's medical records from one office to another. This is all we do.

imagn
www.imagnsolutions.com

imagn sleep software
We've spent years researching the best method of implementing sleep in dental practices. Now you can take advantage of our complete sleep solution to enrich the lives of your patients and add new revenue streams to your practice.

Jakari Care
www.jakaricare.com

Patient Health Information
Less work. Better care. Let our HIPAA-compliant solution automatically collect, analyze and transfer patient medical history, treatment goals and other important information into Dentrix.

Lighthouse
www.lh360.com

Patient Communication Solution
Lighthouse 360 is a comprehensive automated patient communications system designed exclusively for dentists. It uses email, two-way text messaging, automated phone calls, postcards and letters to reach your patients.

LocalMed
www.localmed.com

LocalMed
LocalMed is a live online scheduling platform that fully integrates with Dentrix to provide new and existing patients online and mobile scheduling access 24/7.

Patient Activator
www.patientactivator.com

Patient Communication Solution
Patient Activator, part of Los Angeles-based 1-800-DENTIST®, is the leading social media optimization and patient communications service dedicated to the dental profession.
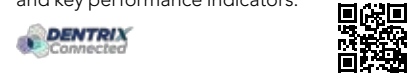
Personable
solutions.personable.com

ScanWriter
Want to know how profitable your practice can be? Use ScanWriter® Dentrix Edition to seamlessly integrate your Dentrix® data into QuickBooks (and other accounting software) and to improve your practice. You can automate your accounting process easily now for real time monitoring of financial health and key performance indicators.
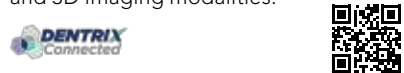
Planmeca
www.planmeca.com

Planscan
Planmeca Romexis® is an advanced, easy-to-use software suite providing a rich set of tools to meet the imaging requirements set by any dental facility – from a small clinic to a large hospital. It supports the most versatile range of 2D and 3D imaging modalities.
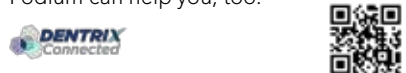
Podium
www.podium.com

Podium
Stop the guesswork and know what your patients are saying. With Podium, you can impact what's said, where things are said, and how things are said. Podium helps over 3000+ organizations take full control of their online reputation. Podium can help you, too.

Practice Mojo
www.practicemojo.com

Patient Communication Solution
PracticeMojo creates proven campaigns that help dental practices recruit, retain and reactivate patients automatically, using email, text messages, automated phone calls and mailed postcards.

Practice Safeguard
www.practicesafeguard.com

Web-Based Fraud Monitoring
A web-based financial monitoring tool for Dentrix G5 users that deters fraud and costly errors by alerting any device you carry to unusual transactions in real time.

Protected Trust
www.protectedtrust.com

Protected Trust
Protected Trust offers simple and secure email encryption and identity verification that protects your patient health information (PHI) by ensuring privacy and HIPAA compliance.
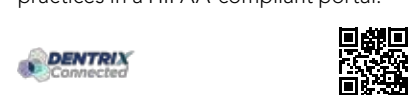
RecordLinc
www.recordlinc.com

Patient Communication Solution
RecordLinc is the largest professional network of dental professionals in the world. Securely and easily send electronic referrals, patient transfers, and track treatment plans between dental practices in a HIPAA-compliant portal.

Reputation
www.reputation.com

Patient Communication Solution

Reputation.com's platform enables dentists to see all their online reviews in one space and use the platform's analytical tools to understand the broad themes that emerge from patient feedback.

Sesame
www.sesamecommunications.com

Patient Communication Solution

Sesame Communications helps dental and orthodontic practices harness the power of the Internet to accelerate new patient acquisition, build patient loyalty and transform the patient experience.

Simplifeye
www.simplifeye.co

Simplifeye

The #1 mobile experience for dental providers, Simplifeye connects you, your patients, and your business in amazing ways via state-of-the-art consumer tech. Say goodbye to inefficiency and hello to a whole new way of running your practice.

Solutionreach
www.solutionreach.com

Patient Communication Solution

Smile Reminder provides patient engagement and communication solutions for healthcare practices. Utilizing the latest text, email, voice, video, web, and social media tools to communicate with customers.

TeleVox
www.televox.com

Patient Communication Solution

TeleVox Software is a high-tech engagement communications company, providing automated voice, email, text and web solutions that activate positive patient behaviors through the delivery of a human touch.

Transparent Aluminum
www.transparentaluminumllc.com

Dental Practice Solution

Transparent Aluminum is a company focused on creating custom workable solutions for practices to get the most out of their Dentrix database.

U.S. Health Record
www.teamlinks.com

Intra-Office Communication

Teamlinks EHR was created to foster interdisciplinary collaboration on patient health information with the goal of connecting the health care team and the patient.

Updox
www.updox.com

Updox Central for Dentrix

Updox is the industry-leading healthcare connectivity solution, offering dentists and practices a cohesive suite of services so practices can focus more on patient care and less on managing multiple platforms. With Updox, practices can lower costs, increase revenue, improve workflow, maximize staff time and increase efficiencies.

Yapi
www.yapicentral.com

Dental Practice Solution

Started as the first fully integrated intra-office communication software, YAPI has grown into a comprehensive suite of innovative automation solutions designed around unique needs of dental practices.