

Dental Office Update

Summer 2006

THE **ODS** COMPANIES



Healthcare identity theft

The crime of healthcare fraud is on the rise. Current studies predict that healthcare fraud, which is the intentional deception or misrepresentation of healthcare by an individual, group or provider, costs Americans \$100 billion a year. Healthcare fraud is a crime that affects everyone — the rise in fraudulent activities results in the rise of healthcare costs. These costs are paid in the form of higher healthcare premiums for employers and higher costs for benefits for employees and members. The best way to combat this crime is to be aware of it and make sure it is not happening to you.

The two most common types of healthcare fraud are member fraud and provider fraud. Examples of member fraud include:

- Using someone else's coverage or

insurance card

- Filing for claims or medications that were never received
- Allowing someone else to use your insurance card to receive treatment
- Forging or altering bills or receipts

Examples of provider fraud include:

- Billing for services or procedures that were not provided
- Performing medically unnecessary services in order to obtain insurance reimbursement
- Incorrect reporting of diagnoses or procedures to maximize insurance reimbursement
- Misrepresentations of dates, description of services or subscribers/providers

To ensure that you are not the victim

of healthcare fraud, take the following precautions:

- Always ask your healthcare provider questions about your diagnoses, treatment and services received
- Thoroughly check the Explanation of Benefits (EOB) form that ODS sends you. Make sure as you review your EOB that the dates, provider and services are correct. Also, make sure this was an appointment you actually attended — it is not uncommon for criminals to steal a person's identity and set up healthcare treatments.

If you suspect you are the victim of fraud or if you suspect a provider is committing fraud, please call ODS immediately at 503-382-5333 or 1-877-372-8356. ODS will investigate all reports of fraud to ensure the safety of our members.

2005 Dental Record Review

In 2005, ODS conducted a retrospective review of OHP member dental records. The objectives were to determine practitioner compliance with the Oregon Dental Practice Act OAR 818-012-0070 and evaluate quality of care to OHP members and the progress of established quality improvement projects.

The review focused on children from birth to five years old and pregnant women.

Study Results

The study results indicated a rate of documentation of 94 percent for five of the elements reviewed. This was an

increase of 31 percentage points from the previous review. These elements included legibility, date and description of treatment services, treatment plans, patient identification, and signing and dating each entry. The study showed the majority of the pregnant women in the study received an examination of their teeth, diagnostic services and adequate treatment plans.

Of the 240 records reviewed for children from birth to

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Title

Review

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five years old, 94 percent received at least one examination of their teeth during the study year. One hundred percent of the three to five year olds had a treatment plan.

The most notable improvement of the review showed practitioners having asked 73.1 percent of pregnant women whether they use tobacco. This was an improvement of 44.1 percentage points over the previous review.

Conclusions

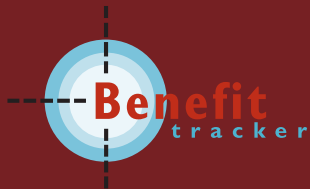
The review pointed out need for improvement in two documentation areas:

- Prevention education. Only fifty percent of the children's records showed documentation of oral health instruction, including counseling on fluoride use.
- Tobacco cessation efforts. Although practitioners are asking, through the medical history form,

if members use tobacco, documentation on whether they advised the member to quit or referred them to their OHP medical plan for assistance with quitting was only 12 percent. OHP medical plans are required to cover tobacco cessation.

The review also revealed that practitioners use various medical history forms. ODS noted several vital questions such as whether or not the patient has a heart murmur, allergies to medication or uses tobacco were missing on some forms. The Dentist Benefits Insurance Company (DBIC) recently researched and updated a medical history form that includes these items. Practitioners are welcome to download this form from the DBIC web site www.dentistbenefits.com under Risk Management, Forms, Patient Information.

ODS appreciates the cooperation received in conducting this review. Continue the excellent documentation and work on areas in which the study showed needing improvement.



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