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# BITING edge

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**Inside this issue**

- Patient Communication
- Improved Process for Onsites
- 2004 Panel Fees
- HIPAA, CDT4 Reminder
- Who's New

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## Who's New



Jacqueline Glaude

**M**et Jacqueline Glaude! In November 2003, she joined the company as your provider network specialist covering District of Columbia, Delaware, Maryland and Tennessee. Major job responsibilities include recruiting and retaining PPO dentists in her territory, handling office evaluations and compliance issues, representing Ameritas at dental conventions, working with Ameritas sales reps in her area and assisting providers and fellow associates.

A Tennessee native, she earned her bachelor's in business administration from Austin Peay State University in Clarksville. Prior job experience includes processing Medicare claims, working for a managed care organization, and employment as a provider relations administrative assistant and internal representative. During this time, she gained valuable experience in credentialing and contracting.

She enjoys traveling, dancing, exercising, spending time with family and friends, and volunteering for the March of Dimes and American Cancer Society. She is the proud mother of one son, AlDelvon, and resides in Tennessee. Say "Hello!" by emailing her at [jpglaude@ameritas.com](mailto:jpglaude@ameritas.com).

## Patient Communication: The key element in obtaining valid informed consent



by Richard F. Breitweiser, Esq., of The Redwoods Group

Following is a condensed version of Mr. Breitweiser's article regarding patient communication and valid informed consent. To view the full article, please visit [redwoodsgroup.com](http://redwoodsgroup.com) and select Columns/Articles in the Go To menu box.

**Emerging Trends**—Dentists have used consent forms for nearly half a century, especially for surgical procedures. But in the last two decades, a difference has emerged between simply obtaining a signature and obtaining valid informed consent through meaningful patient communication.

**Consent Forms**—There has been an increase in court cases where consent forms are ignored by juries or not allowed into evidence by trial courts. Why? Because truly valid consent involves the process of patient communication, education and negotiation, and that's what concerns juries and trial judges most. A quick signature is no longer enough.

**Four Components**—The consent process involves:

- 1) Professional Communication. Patients often claim they did not understand their condition. So be sure to protect yourself by thoroughly explaining the benefits, complications and alternatives of the proposed treatment in layman's terms. Professional communication, not technical information, often makes the difference.
- 2) Ethical Consideration. This involves the patient's self-determination. The patient must have enough information to decide whether or not to have a procedure performed. If the patient declines your recommendation, it's much easier to understand after gaining the patient's well-thought-out, deliberate decision. (In this case, documenting informed refusal is as important as obtaining informed consent.)

3) Educational Information. Dentists are educators, too. The dentist helps the patient know what to expect and responds to the patient's concerns. Take time to thoroughly educate your patients and gain their understanding. (Teaching should not be delegated.)

4) Legal Need. There are legal requirements of consent but, based on court decisions, there are some common misconceptions:

*Having (only) a consent form signed by a patient before a procedure (and before a premedication or anesthetic) confirms informed consent.*  
False. Patients often claim they did not understand and/or agree to services performed. Only supportive chart notations and credible testimony by the dentist can counter such a claim.

*A signed consent form protects against malpractice suits.*  
False. Legal action is most commonly instituted because patients are angry with a dentist who may have been uncommunicative, elusive, arrogant and/or who failed to persuade the patient that his or her best interests were in mind.

*Use of dental jargon or medical terms in the language of the form are common practice and suffice to show that the patient understood the planned procedure.*

False. How many patients understand apicoectomy or malocclusion?

*Consent is a ritual requirement to protect dentists from legal liability.*  
False. The process is primarily intended to further inform and help a patient.

**Conclusion**—Informed consent remains an important obligation to patients. If the dentist-patient relationship is well developed, the likelihood of a lawsuit is markedly reduced.

*Richard F. Breitweiser joined The Redwoods Group in October 1999 as Vice President - Claims and Director - Dental Program. Previously, he spent 10 years as claim manager of a large professional insurance liability unit handling multiple product lines in all states. Breitweiser is a 1981 cum laude graduate of Upsala College and a 1988 cum laude graduate of Seton Hall University School of Law. He is admitted to practice law in New Jersey and the U.S. District Court. Also an award-winning figure skater, he resides in New Jersey with his wife, Nancy, and two children, William and Kyra.*

## Improved Process for Onsites

**W**e're always working to enhance our participating provider program. Why? Because you are the most important component in caring for our insureds — your patients. So to save you time, we replaced our initial onsite evaluation visit with an office evaluation form. With quality assurance standards remaining the same, just make sure all items listed are checked off prior to participation or adding a new location.

We're also using this form during our yearly re-onsite process. Some of you may already have received the form, requesting its completion in lieu of being contacted by your provider network specialist for an office evaluation visit. Questions about the new Office Evaluation Form? Or maybe you just miss your perky provider network specialist? Contact our Provider Relations Department at 800-755-8844 or call your respective provider network specialist. We're here to help!

## HIPAA, CDT4 Reminder

**T**ransactional code set rules went into effect 10/16/2003, and the ADA updated the Current Dental Terminology (CDT) to CDT4 on 01/01/2003. To assure regulatory compliance, we accept CDT3 codes for claims with dates of service prior to 01/01/2003. We accept CDT4 codes for claims with dates of service on or after 01/01/2003. If a claim is returned to your office noting invalid codes, we will be happy to assist your office to expedite claim consideration.

## 2004 Panel Fees

**I**n October 2003, our 2004 panel fees were mailed to all participating providers. Why so early? At least two states have new legislation mandating that providers are to receive contract updates within 30-45 business days prior to the effective date of the change. So we said, no problem! State compliance concerning our dental network is paramount. **If for some reason you haven't received the 2004 fees for your area, contact our Provider Relations Department at 800-755-8844 today and receive them ASAP by fax or email.**

## Happy Holidays!

Your participation in our PPO helps thousands of individuals receive quality dental care at competitive prices. We truly appreciate your professional dedication to helping others. Please accept our sincerest wishes for a wondrous holiday season and a Happy New Year!



To expedite electronic claims processing, be sure to include your office telephone number.

If you are interested in contributing to *Biting Edge*, please e-mail Lori McPherson at [lmcperson@ameritas.com](mailto:lmcperson@ameritas.com).

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