

DENTRIX ASCEND

Release Notes: January 18, 2022 (Beta 386)

The product update released January 18, 2022, introduces enhancements related to insurance coordination and insurance claims. Power Reporting has a couple of new fields.

Insurance

New Workflow for Switching Primary and Secondary Insurances

The previous release introduced an easier workflow for switching primary and secondary insurance plans. This release includes additional enhancements to that workflow:

- Swapping insurance coordination order using drag and drop
- Handling unsent claims with credit adjustments

Note: For more information on how to deal with outstanding claims attached to insurance plans or how to review the history of insurance coordination order changes, review the [385 Release Notes](#).

Swapping Insurance Coordination Order Using Drag and Drop

In the patient information ribbon, click the **green shield icon** to see a patient's insurance information. On the Insurance Information page, click **Edit Order**.

The screenshot shows the 'Insurance Information' page for patient Candice Rogers. The 'Patient's Plans' section includes a table with the following data:

Order	Carrier	Plan/Employer (Group #)	Insurance Contact	Subscriber - DOB	Relation	Coverage Period
Primary	Blue Cross Blue Shield...	9F873A82D5E54	Candice Rogers - 01/01...	Self	02/15/2021 - Present	
Secondary	Aetna DMO	082E4BBC66EC4E	Candice Rogers - 01/01...	Self	12/15/2020 - Present	

Select the grab-handle icon next to the plan you would like to move. Then drag and drop the plan to the desired position.

The screenshot shows the 'Move plan' dialog box. A red circle with the number 1 highlights the 'Move plan' button. The dialog box displays the details of the selected plan:

Order	Carrier	Plan/Employer (Group #)	Insurance Contact	Subscriber - DOB	Relation	Coverage Period
Primary	Blue Cross Blue Shield of Texas	9F873A82D5E54	Candice Rogers - 01/01/1989	Self	12/15/2020 - Present	

When you move an insurance plan, the Change Insurance Coordination Order dialog appears. You see the current state of the insurance plans on the left and the desired state on the right. Click **Change** to confirm the new order of insurance plans.

Change Insurance Coordination Order for Candice Rogers - 12/31/1988 ✕

Are you sure you would like to change coordination orders of existing plans?

Current Order

1. Primary 12/13/2021 - Present
Plan: 9F873A82D5E54

Claims

Service Date	Carrier	Status	Amount
No claims for the given period			

2. Secondary 12/13/2021 - Present
Plan: 082E4BBC66EC4E

Claims

Service Date	Carrier	Status	Amount
No claims for the given period			

New Order as of Start Date ⓘ 01/04/2022 📅

1. Primary 01/04/2022 - Present
Plan: 082E4BBC66EC4E

Claims

Service Date	Carrier	Status	Amount	Action
No claims for the given period				

2. Secondary 01/04/2022 - Present
Plan: 9F873A82D5E54

Claims

Service Date	Carrier	Status	Amount	Action
No claims for the given period				

Change
Cancel

By changing coordination orders of the plans, insurance estimates may change.

The new order is reflected on the Insurance Information page.

The **Edit Order** functionality can also be used when the primary insurance has expired, and you would like to promote the secondary insurance to the primary insurance.

Insurance Information

Patient's Plans Show expired plans Off Edit Order Add Plan

Order	Carrier	Plan/Employer (Group #)	Insurance Contact	Subscriber - DOB	Relation	Coverage Period
Primary	- No Primary Insurance Coverage -					
Secondary	Aetna DMO	082E4BBC66EC4E		Paige Bentley - 01/01/1...	Self	12/16/2021 - Present

Insurance Information

Patient's Plans Show expired plans Off Done

Order	Carrier	Plan/Employer (Group #)	Insurance Contact	Subscriber - DOB	Relation	Coverage Period
<div style="display: flex; align-items: center; justify-content: space-between;"> <div style="font-size: 0.8em;">Primary Section</div> <div style="font-size: 0.8em;">Drag a plan here to make it primary.</div> </div>						
Move plan	Aetna DMO	082E4BBC66EC4E				

Handling unsent claims with credit adjustments

Sometimes when you are trying to switch the primary and secondary insurances, Dentrix Ascend will warn you that you have unsent claims with credit adjustments in a closed period. You must delete these credit adjustments before proceeding with the insurance order change. To do this, click **View credit adjustment**.

Change Insurance Coordination Order for Paige Bentley - 01/01/1992

Are you sure you would like to change coordination orders of existing plans?

There are existing claims in the period between today and the selected **New Order as of Start Date**:

- To change the order, the existing claims should be checked in order to be deleted and proceed with changes.
- To keep the existing claims, they should be unchecked and a **New Order as of Start Date** should be set later than the service dates in the claims.

Note: Predeterminations should be resubmitted for treatment planned procedures after specifying new coordination order.

Current Order

1. Primary 01/01/2021 - Present
Plan: 00615ACD3B9

Claims

Service Date	Carrier	Status	Amount	
01/02/2022	Assurant Employee Benefits	Uns...	100.00	Details

2. Secondary 01/01/2022 - Present
Plan: 59F9C85C69C145B69BA46

Claims

Service Date	Carrier	Status	Amount	
No claims for the given period				

New Order as of Start Date

01/02/2022 [Earliest possible date: 01/03/2022](#)

Alert. Claims marked with can't be deleted because they have locked Credit Adjustment. Use "View credit adjustment" link below to view and delete Credit Adjustment to proceed.

1. Primary 01/02/2022 - Present
Plan: 59F9C85C69C145B69BA46

Claims

Service Date	Carrier	Status	Amount	Action
No claims for the given period				

2. Secondary 01/02/2022 - Present
Plan: 00615ACD3B9

Claims

Service Date	Carrier	Status	Amount	Action
01/02/2022	Assurant Emplo...	Uns...	100.00	Details View credit adjustment

By changing coordination orders of the plans, insurance estimates may change.

When you click **View credit adjustment**, the View Credit Adjustment dialog appears. An authorized user must click the lock icon in the upper-right corner and enter their credentials to unlock the credit adjustment.

View Credit (-) Adjustment

Edit Credit adjustments for Insurance Claim

Transaction date * 01/02/2022

Type * Insurance Adjustment

Amount * \$ 30.00

Apply to charges for

Transaction Date	Patient	Provider	Tooth	Surface	Code	Description	Charge	Other Credits	Balance
01/02/2022	Paige Bentley	#Alpha	1		D6013	Mini Implant Surgical Placement	100.00	0.00	0.00

Amount not applied 0.00
Amount applied 30.00

Mandatory tag(s) (Select one)

Unlock Credit Adjustment

Authorized user

Password

for 15 minutes

Edit Credit (-) Adjustment

Edit Credit adjustments for **Insurance Claim**

Transaction date * 01/02/2022

Type * Insurance Adjustment

Amount * \$ 30.00

Apply to charges for

Transaction Date	Patient	Provider	Tooth	Surface	Code	Description	Charge	Other Credits	Guar Estimate	Applied	Balance
01/02/2022	Paige Bentley	#Alpha	1		D6013	Mini Implant Surgical Placement	100.00	0.00	0.00	30.00	70.00

Amount not applied 0.00
Amount applied 30.00

Tags Xfer Reason(s) Notes

Mandatory tag(s) (Select one) tag_1

Select a tag

Save Cancel Delete

Once the credit adjustment is unlocked, close the Edit Credit Adjustment dialog box. You do not need to click **Save**. The credit adjustment will now be deleted along with the unsent claim. This is noted in the red text under the Action column. You are now able to click **Change** and proceed with the insurance order change.

Change Insurance Coordination Order for Paige Bentley - 01/01/1992

Are you sure you would like to change coordination orders of existing plans?

There are existing claims in the period between today and the selected **New Order as of Start Date**:

- To change the order, the existing claims should be checked in order to be deleted and proceed with changes.
- To keep the existing claims, they should be unchecked and a **New Order as of Start Date** should be set later than the service dates in the claims.

Note: Predeterminations should be resubmitted for treatment planned procedures after specifying new coordination order.

Current Order

1. **Primary** 01/01/2021 - Present
Plan: 00615ACD3B9

Claims

Service Date	Carrier	Status	Amount
01/02/2022	Assurant Employee Benefits	Uns...	100.00

2. **Secondary** 01/01/2022 - Present
Plan: 59F9C85C69C145B69BA46

Claims

Service Date	Carrier	Status	Amount
No claims for the given period			

New Order as of Start Date 01/02/2022

1. **Primary** 01/02/2022 - Present
Plan: 59F9C85C69C145B69BA46

Claims

Service Date	Carrier	Status	Amount	Action
No claims for the given period				

2. **Secondary** 01/02/2022 - Present
Plan: 00615ACD3B9

Claims

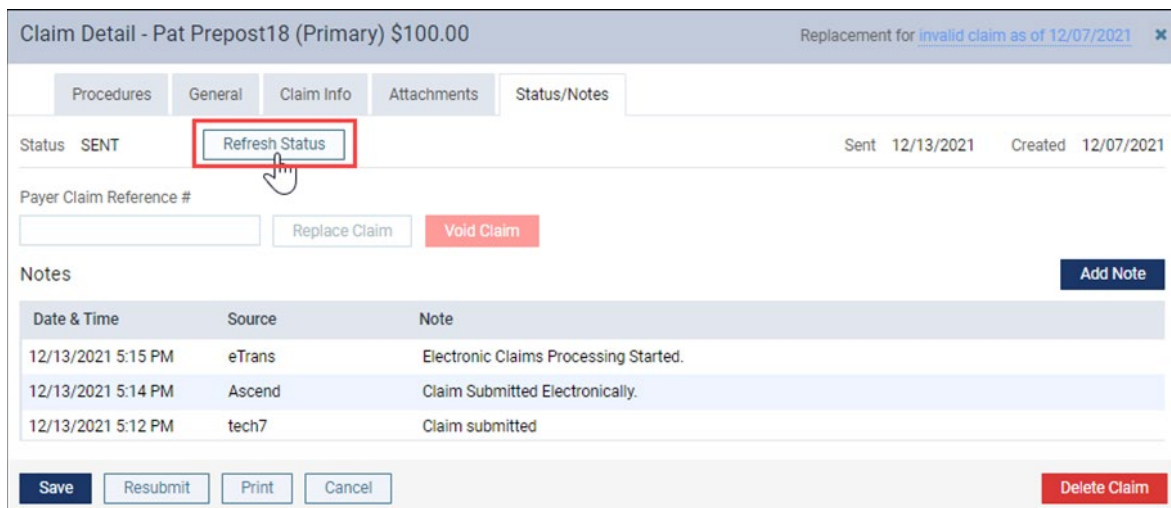
Service Date	Carrier	Status	Amount	Action	
<input checked="" type="checkbox"/>	01/02/2022	Assurant Emplo...	Uns...	100.00	Will be deleted with Adj.

Change Cancel *By changing coordination orders of the plans, insurance estimates may change.*

Refresh Claim Status

A new enhancement has been added to the Claim Detail dialog box. You can now manually request an update from the clearinghouse for the claim if the automatic update between Dentrix Ascend and the clearinghouse was interrupted. When you click the new **Refresh Status** button, Dentrix Ascend refreshes the claim with the most recent status that the clearinghouse has received from the carrier.

To use this new enhancement, open a submitted claim and then select the Status/Notes tab. You will see a new **Refresh Status** button.



Claim Detail - Pat Prepost18 (Primary) \$100.00 Replacement for [invalid claim as of 12/07/2021](#) ✕

Procedures General Claim Info Attachments Status/Notes

Status SENT Refresh Status Sent 12/13/2021 Created 12/07/2021

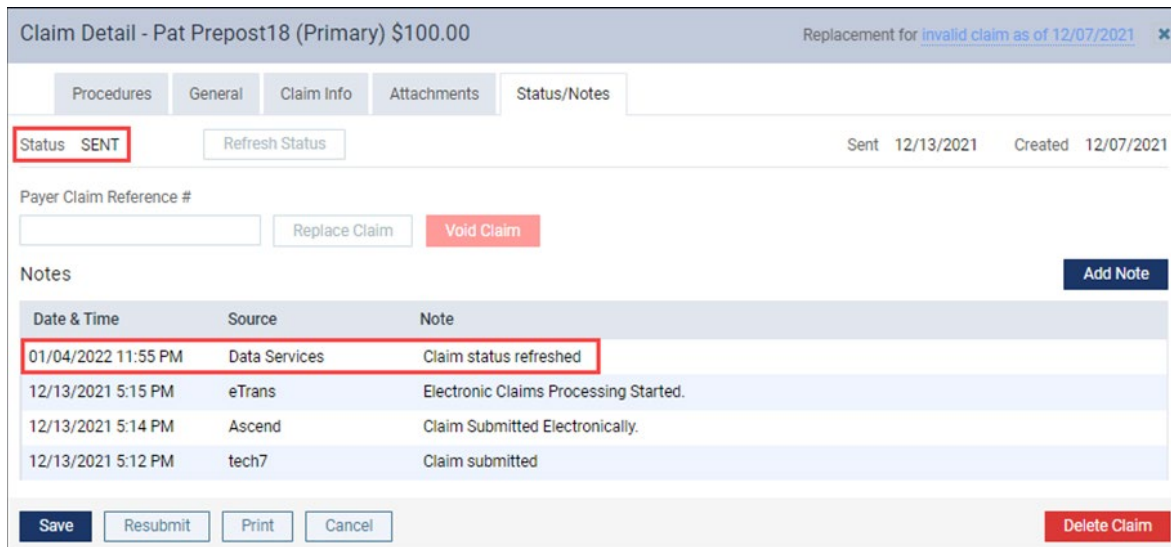
Payer Claim Reference # Replace Claim Void Claim

Notes Add Note

Date & Time	Source	Note
12/13/2021 5:15 PM	eTrans	Electronic Claims Processing Started.
12/13/2021 5:14 PM	Ascend	Claim Submitted Electronically.
12/13/2021 5:12 PM	tech7	Claim submitted

Save Resubmit Print Cancel Delete Claim

The button is active when there has been no status update received from the clearinghouse in the last two days. When you click **Refresh Status**, Dentrix Ascend immediately updates the status of the claim with the information that the clearinghouse has. If the status has changed, the new status appears next to the **Status** field. Also, under the **Notes** section, Ascend adds a note that the claim status was refreshed.



Claim Detail - Pat Prepost18 (Primary) \$100.00 Replacement for [invalid claim as of 12/07/2021](#) ✕

Procedures General Claim Info Attachments Status/Notes

Status SENT Refresh Status Sent 12/13/2021 Created 12/07/2021

Payer Claim Reference # Replace Claim Void Claim

Notes Add Note

Date & Time	Source	Note
01/04/2022 11:55 PM	Data Services	Claim status refreshed
12/13/2021 5:15 PM	eTrans	Electronic Claims Processing Started.
12/13/2021 5:14 PM	Ascend	Claim Submitted Electronically.
12/13/2021 5:12 PM	tech7	Claim submitted

Save Resubmit Print Cancel Delete Claim

Note: The **Refresh Status** button becomes active after two days without an update from the clearinghouse. Once you click this button, it becomes inactive. After two days, the button may become

active again, and you can request another update if you wish. This should not, however, be necessary under normal circumstances.

Set Predetermination Requirements – Feature Update

This feature is still under construction. When completed, it will save time and remind team members to send out predeterminations when needed. This update includes new additions to the new **Manage Predeterminations** window. This is where you will be able to select which procedures require predetermination.

To see the Manage Predeterminations window, open an insurance plan and click the new **Predeterminations** button.

The screenshot shows the 'Insurance Carriers' edit plan window for Aetna - 0365734E14DF. The form includes fields for Plan/Employer name, Group #, Benefit renewal month, Claim mailing address, City, State, ZIP code, Phone number, Ext, Fax number, Contact, and Email. A 'Max allowable amount fee schedule' dropdown menu is open, showing options for 'Coverage Table', 'Benefits', 'Coordination of Benefits', and 'Predeterminations'. The 'Predeterminations' option is highlighted with a red box.

The Manage Predeterminations window is where you will select the procedures in this specific plan that require predeterminations. Note that the entire organization will share the plan settings. New in this window are the **Replace with** search box, and the **Require predetermination for procedures over** field.

The screenshot shows the 'Manage Predeterminations' window. It includes an information banner, a search bar with a 'Replace with' dropdown, and a table of procedures. The 'Require predetermination for procedures over' field is highlighted with a red box.

Required	Code	Description	Treatment Area
<input type="checkbox"/>	D1707	Janssen Covid-19 vaccine admin	Mouth
<input type="checkbox"/>	D1999	Personal Protective Equipment	Mouth
<input type="checkbox"/>	D2009	Invisalign Tray Delivery	Mouth
<input type="checkbox"/>	D2140	Amalgam 1 Surface	Surface
<input type="checkbox"/>	D2150	Amalgam 2 Surface	Surface
<input type="checkbox"/>	D2160	Amalgam 3 Surface	Surface
<input type="checkbox"/>	D2161	Amalgam 4 Surface	Surface
<input type="checkbox"/>	D2330	Anterior Resin Composite 1s	Surface

The **Replace with** search box will allow you to find another insurance plan for which you have already done the work of configuring and import the selections to this plan. This can be a great time saver. As with the **Load Defaults** option, you will be instructing Dentrax Ascend to replace any existing selections. The best workflow is to import the defaults or the configuration of another plan and then make your adjustments.

<input type="checkbox"/> Required	Carrier Name	Group Plan/Employer	Group #
<input type="checkbox"/>	Aetna	00083C2B17104398A07D5845685	FFBAFFBAC4814154
<input type="checkbox"/>	Aetna	0051DFEC76DF40B	B61E3F
<input type="checkbox"/>	Aetna	0057B3F5B42C48E89	4E55522FD
<input type="checkbox"/>	Aetna	02316BF40F514F83BD0A4D58DE35DEB	B78A10
<input type="checkbox"/>	Aetna	0365734E14DF	CF8996B5F6C74
<input type="checkbox"/>	Aetna	03F6D175D76F48D4A9E19C0048	8175A4CEE
<input type="checkbox"/>	Aetna	0440E110403C4F4CA70E10	EB6544F849AE44
<input type="checkbox"/>	Aetna	05015F6AF977470FBBF95D11A082FC543	1757F6A
<input type="checkbox"/>	Aetna	05438EC03C274ACC8F0EA1C4D6E53	8758616705AE444
<input type="checkbox"/>	Aetna	05B5959BDEBC425B93173692A36BD4	B95A6B36B
<input type="checkbox"/>	D2330	Anterior Resin Composite 1s	Surface

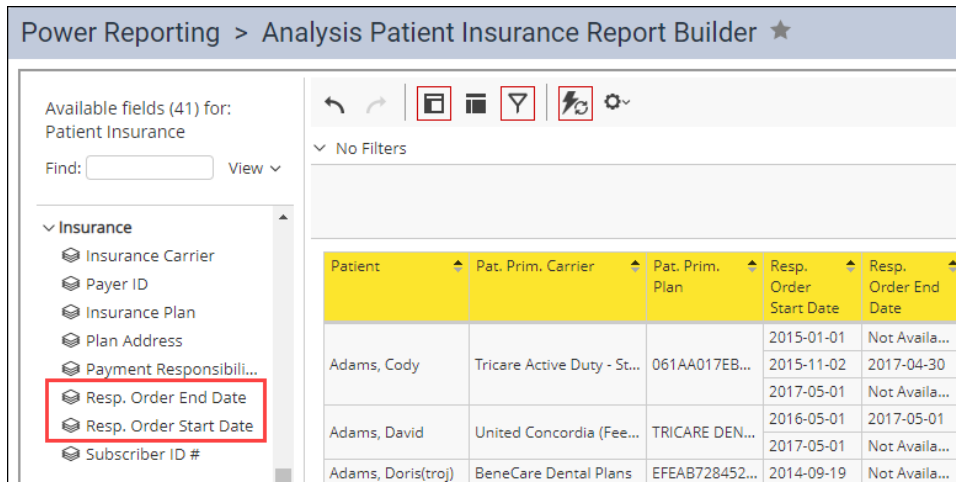
The **Require predetermination for procedures over** field, when it gets implemented, will allow you to set predetermination requirements based on a financial threshold, as directed by the carrier. Check the box, and enter a dollar amount. All procedures whose fee exceeds that amount will automatically be marked as requiring a predetermination. Like the other tools in this window, applying a financial threshold will wipe out any configuration you may have already done.

Require predetermination for procedures over * \$

Power Reporting

New Fields Supporting Insurance Coordination Changes

As an adjunct to the updates that now allow you to switch primary and secondary insurance plans more easily, the Analysis Patient Insurance Report Builder has two new fields in the **Insurance** category. The fields, **Resp. Order End Date** and **Resp. Order Start Date**, refer to the dates upon which an insurance plan, respectively, stopped and started being responsible as the primary, secondary, tertiary, or other plan for a given patient. Naturally, an active plan without a current end date will return a value of Not Available for the end date.



Power Reporting > Analysis Patient Insurance Report Builder ★

Available fields (41) for: Patient Insurance

Find: View ▾

Insurance

- Insurance Carrier
- Payer ID
- Insurance Plan
- Plan Address
- Payment Responsibili...
- Resp. Order End Date**
- Resp. Order Start Date**
- Subscriber ID #

No Filters

Patient	Pat. Prim. Carrier	Pat. Prim. Plan	Resp. Order Start Date	Resp. Order End Date
Adams, Cody	Tricare Active Duty - St...	061AA017EB...	2015-01-01 2015-11-02 2017-05-01	Not Availa... 2017-04-30 Not Availa...
Adams, David	United Concordia (Fee...	TRICARE DEN...	2016-05-01 2017-05-01	2017-05-01 Not Availa...
Adams, Doris(troj)	BeneCare Dental Plans	EFEAB728452...	2014-09-19	Not Availa...

Do not be confused by what may appear to be two primary insurance plans on the same day. When you switch plans on the same day, one *was* and one *now is* the primary. The date field is just a date and does not include a timestamp to show you when the switch occurred.

No default reports currently make use of these new fields.

User Rights

No new user rights were introduced in this release.

New Learning Content

As the Dentrix Ascend software continues to change and improve, the Practice Success library also expands and updates when needed. Click a title below for some great new content.

[Entering an Electronic Patient Prescription](#)

Sending an electronic prescription is convenient for your patients and helps your practice avoid mistakes, delays, and safety risks associated with written prescriptions. Watch this step-by-step tutorial to learn how to enter an electronic patient prescription.

[Print and Mail for Me](#)

Sending billing statements to patients is time consuming and expensive, and it requires the office to maintain an inventory of supplies. *Print and Mail for Me* is an integrated print statement fulfillment option that allows you to send paper billing statements directly from Dentrix Ascend.