New Customer Pre-Training Call Form

Before your first training session, please take a moment to consider the answers to the following items and be prepared with the appropriate data for your practice.

This is designed as a tool to help you be organized, so if you are prepared with this information elsewhere, you do not have to fill this form out or return it to DentiMax.

Practice Contacts / People Training	Phone # / Extension	Email Address

Practice Information: Business Name(s), Addresses, and Phone/Fax	Tax ID(s)	Practice NPI(s) (If applicable)

Billing Providers Number of provider typers in your practice			
DDS / DMD		Other	

Indicate which providers CANNOT bill under their own name:

1. ______________________________
2. ______________________________
3. ______________________________

Scheduling Information			
Dentist Providers			
1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	
Other (Chair, Room, Equipment, Etc...)			
1.		4.	
2.		5.	
3.		6.	

Do you need to link multiple appointments scheduled with different providers/resources? (e.g. equipment & dentist)
Who creates/manages the schedules? Who is responsible for modifying those templates on a daily basis?
Do providers book appointments in the same time increments (example 15 min each time slot?)
Do your providers offer the same office hours every day?
What days of the week is the office open for appointments? E.g. Monday-Friday, Saturday, etc…
How far out do you schedule patient appointments?
How far out is your current schedule open?
Do you have color-coded appointment types in your current system?

Do you have providers that work between multiple departments or locations?
If multiple locations, does each of the locations schedule patients?
If multiple locations are the provider templates maintained at each location?
Do you set up recurring appointments?
Do you schedule appointments for outside services or facility locations? (E.g. x-ray facilities, hospitals,)?
Do you double/triple book appointments?
Do you overbook appointments?
Do you accept walk-in appointments?
Do you want to schedule non-provider appointments? (E.g. Assistant only visits, etc.)
Do you want to schedule non-patient appointments? (E.g. meetings, luncheons, etc...)
Do you track cancellation reasons for appointments?
Do you have the need to restrict time slots on your schedule for specific appointment visit types?
Do you need to print provider patient appointment schedules?

Documents

What patient documents do you print from your existing practice management system?

- [ ] Registration Forms
- [ ] Referrals - Outgoing
- [ ] Appointment Schedule Reminders / Post Cards
- [ ] Collections / Statements

What other documents do you provide?

Prior Authorizations / Referrals / Recalls

Do you require incoming referrals?	☐ Yes ☐ No
Do your carriers require prior insurance authorization before scheduling patient appointments?	☐ Yes ☐ No
Do you track referrals?	☐ Yes ☐ No
Would you like ot print a document with referral information?	☐ Yes ☐ No
Do you currently send out recalls / reminders?	☐ Yes ☐ No
Do you want to print appointment reminder cards?	☐ Yes ☐ No
Do you confirm upcoming appointments with patients?	☐ Yes ☐ No

Billing / Insurance / Claims

If multiple locations, are visit charges entered at practice locations?	☐ Yes ☐ No
Do you have providers that do not ahve billing numbers?	☐ Yes ☐ No
Do you participate in workers compensation?	☐ Yes ☐ No
Do you have any pre-paid services?	☐ Yes ☐ No
Do you utilize family billing - sending one statement to the “head of the household?”	☐ Yes ☐ No
Are your charges posted on the same day as the service?	☐ Yes ☐ No

Will co-pays be entered prior ot the charge being entered?	☐ Yes ☐ No
Do you provide any services (e.g. medical record fees, whitening trays, etc...) or products for sale (e.g. whitening gels, toothpaste) that do not have a valid CPT codes or that do not get filed to the insurance company?	☐ Yes ☐ No
Do you charge tax on any products or services?	☐ Yes ☐ No
Do you have a balancing or close-of-day processes in place? If so, what reports do you run?	☐ Yes ☐ No
Who is your current clearinghouse for electronic claims filing?	
Do you currently submit ANSI 837D (dental) claims?	☐ Yes ☐ No
Do you print CMS 1500 claim forms in-house?	☐ Yes ☐ No

Reports

What report information will you need ot run on a daily basis? Any specific reports for your providers?	
Do you have custom reports in your legacy program that you'd like to keep? Which ones?	

Additional Notes or Questions