

2022 BROKER TRAINING



DENTAL RISK COMPANY

Affordable | Excellence | Scale | Care | Unique

Introduction



Dental Risk Company has been a leading managed care organisation in the health care industry for well over two decades. We specialise in managing dental costs via a robust administration system and providing clinical adjudication services for our clients and providers. With our clinically qualified and experienced team, policy holders across medical aid and medical insurance schemes receive maximised dental care based on their insured benefits







ABOUT DENTAL RISK COMPANY

Our Vision:

Best healthcare funder provider with quality, efficiency, and cost-effectiveness on clinical and administrative services. Empowering our clients to offer access to healthcare for all South Africans, making us a leader in the health administration industry.

Our Mission:

To provide patient-centric healthcare access with excellence in quality, through our contracted provider networks

Our Values

Client driven.

- Putting our client first.
- Treat clients and healthcare stakeholders with respect at all times.

Commitment to Excellence.

- We set goals and define milestones.
- Being consistent and remaining committed to our objectives.
- Being knowledge driven.

Compassion and respect for people.

- Willingness to assist.
- We pledge to treat others with dignity and respect.

Commitment to integrity and ethical practice.

- Client service integrity.
- Integrity in management practices.
- Personal integrity, where we practice honesty and high ethical standards



OUR SERVICES

- Claims processing and clinical adjudication.
- Client services: Receiving and resolving dayto-day queries.
- Benefit confirmation.
- Risk Management.
- Benefit design.
- Access to a contracted provider networks.
- Client detail Reports







OUR DIGITAL TOOLS Client Experience System

- This client centric system is allocated in our call centre department, which assists to measure the agents' quality of service. We generate a daily report on the feedback received from the callers using a customer satisfaction software.
- Callers have the ability to rate the agents at the end of the call.

Provider and Bureau Portal

Our personalised self-service systems were created to support and empower our service providers and medical bureau companies by having the ability to resolve their administration issues in their own time.

Provider Portal - A record of the practice previous benefits confirmation and services is available which can assist their team to locate what they need using information on the portal. The provider's team will have the ability to download remittances, confirm dental benefits, verify membership status, upload pre-authorisation requests, view processed authorisations and claims online.

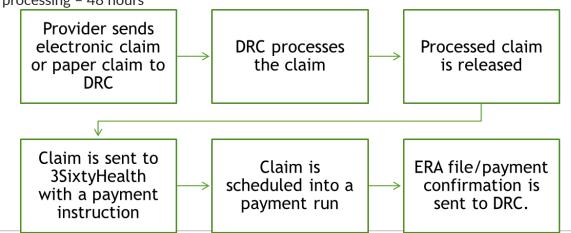
For easier access, the provider can log onto our website <u>www.dentalrisk.com</u> and click on Provider Portal Login in order to access their profile. Should the practice require their login details or require technical support, they may contact our team at <u>providerportal@pamc.co.za</u>

GENERAL CLAIM PROCESSES



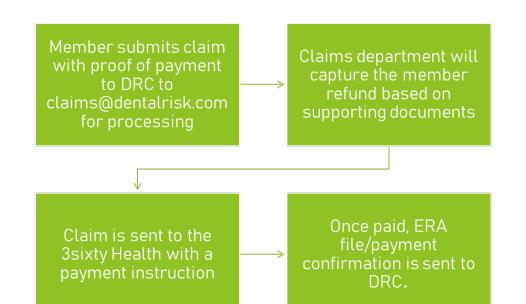
Dental Risk Company (DRC) processes two types of claims:

- *Electronic claims* Service providers may submit claims electronically using EDI codes. Our team will apply clinical adjudication to the electronic claims.
- Paper claims Providers may submit claims to <u>claims@dentalrisk.com</u> for capturing and processing.
- Turnaround time for processing 48 hours



MEMBER REFUND PROCESS









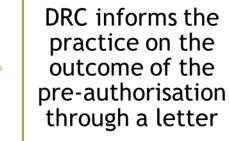


DENTAL PRE-AUTHORISATION REQUEST

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- Pre-authorisation requests are submitted to our team: <u>auth@dentalrisk.com</u>
- Practices are advised to submit a quotation/estimate with clinical supporting documents for processing. The standard turnaround time for processing is 2-3 working days.
- Kindly note that all dental authorisations are valid for 45 days. For updating issued authorisations, requests must be sent to auth@dentalrisk.com

Provider submits quote to DRC for processing DRC clinically assess and process the request based on scheme rules, rates and DRC protocols.

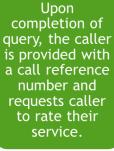


OUR CLIENT SERVICES

Call Centre Department:

- 1. Our call centre is inbound and our agents are trained to assess and resolve calls that are received by dental practices, members, medical bureau companies and medical schemes. The nature of queries is based on claims, benefits confirmations, authorisations, and general information.
- 2. Our Service Level Agreement 80%









OUR CLIENT SERVICES



Client Services Division

- Our Client services team are responsible for handling and resolving email dental escalations and general enquiries that are received by the scheme, service providers and medical bureau companies.
- The nature of queries is based on claims, benefits, provider searches and provider related complaints.

Provider, member, or bureau sends their query to the client services division to enquiries@dentalrisk.com

Client services agents will investigate the query within the standard SLA of 48 hours

Final feedback is provided to the provider/member



OUR CLIENT SERVICES



Contracting a Non-Network Provider Non-contracted dentists and dental therapists will contact our provider relations team Agent will send the contract to the practice Provider will return the completed contract with the required supporting documents Agent will contract the practice and send confirmation of registration Provider profile is updated systematically

Provider Relations Division:

- All provider relations queries must be sent to <u>network@dentalrisk.com</u>
- Nature of queries:
 - Contracting provider requests
 - ► Termination requests
 - Provider detail update



OUR PROVIDER NETWORK



A dental provider network is a list of the dentists and dental therapists that a plan contracts with to provide medical care to its members. These service providers are called "network providers" or "contracted providers." A provider that is not contracted with the scheme is regarded as a non-contracted/out of network provider. As measured, 75% of our contracted dentists and dental therapists submit claims to medical aids on behalf of members.

Benefits of using a Network Provider.

- Providers will charge according to scheme rates, which will reduce out of pocket expenditure for members.
- Providers will confirm dental benefits prior to proceeding with the procedures. Kindly note that for non-covered procedure codes members will be informed by the practice, ensuring that there is a consent form in place.
- Providers have access to the benefit guide, rates and rules.
- Providers will claim on behalf of the member. This will ensure that the claims are submitted in time and any shortfalls, the provider can query with the Dental Risk Company (DRC) client services team.



VERYIFYING PROVIDERS



- Confirm with Dental Risk Company (DRC): Dental Risk Company can provide with a list of contracted dentists in your area. Contact the DRC call centre on 087 943 9611 or direct your queries to <u>enquiries@dentalrisk.com</u>
- Call the provider: The member's preferred service provider will advise whether or not their practice is on the network. The provider may contact our team to verify and confirm their profile with us.



DRC CONTACT MATRIX



General Enquiries		
Call centre	087 943 9611	
Client Services Division	enquiries@dentalrisk.com	
Provider Relations Division	network@dentalrisk.com	
DRC fax number	086 687 1285	
Claims submissions	claims@dentalrisk.com	
Authorisation submissions	auth@dentalrisk.com	



Operational Support			
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Client Service, Escalations & General Support			
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