

# Connecting with TruAssure is easy!

Through the dentist portal, dentists and dental staff can easily look up patient benefits, submit claims, view claims and more. Fast access to the information you need means less time spent on patient administration and more time spent with your patient.

## **Register for an Account**

**1**) Go to **<u>TruAssure.com</u>**, and select <u>Dentists</u>.

2) On the Dentist page, select Create an Account.



3) Complete the online registration and enter the following information:

- a. First name
- **b.** Last name
- c. User ID
- d. Email address
- **e.** Provider first name (you must enter the name that TruAssure has on file)
- f. Provider last name (you must enter the name that TruAssure has on file)
- **g.** License state

| Registration          |   |                         |
|-----------------------|---|-------------------------|
|                       |   |                         |
| FIRSTNAME *           |   | LASTNAME *              |
| USER ID *             |   |                         |
| EMAIL ADORESS *       |   | CONFIRM EMAIL ADDRESS * |
| PROVIDER FIRST NAME * |   | PROVIDER LAST NAME *    |
| LICENSE STATE *       | - | LICENSE NUMBER *        |
| TAX ID *              |   |                         |
|                       |   |                         |

- h. License number (numeric only, omit dashes, dots and alpha characters. Do not use a "0" preceding the license number. CORRECT entry would be: 19012345; INCORRECT entry would be 0190-12345)
- i. Business tax ID number (no dashes)

Please note: The information that you enter must match what TruAssure has on file. The most common mismatched information is the dentist's license ID. License number should be numeric only, omit dashes, dots and alpha characters.

- 4) Click <u>Register.</u>
- 5) Following registration, you will receive an email with your username and temporary password to log in. Upon sign in, you will be prompted to update your password.
- Your personalized dentist dashboard will appear.
  From your dashboard, you can verify patient benefits, view recent claims and recent payments.

| bread | Find a Patient | Claims  | Peyments   | Documents  |   |   |        | د 🤫 | shin Dae |
|-------|----------------|---|--|--|---|---|--------|-----|----------|
|       |                | • We are current<br>unavailable. Yo<br>performance, v | ly performing syst<br>u may also experi<br>ve recommend Ch | tem maintenance and sc<br>ence reduced functional<br>rome, Finefox, Safari, or | me web functionality may I<br>ity when using internet Exp<br>Edge. Thenk you for your p | be temporarily<br>lorer (IE). For I<br>atlence. | best   |     |          |
|       |                | Patient Guick Search:                                 |  |  |   |   |        |     |          |
|       |                | SUBSCRIBER ID OF                                      | R SSN *  | FIRST NAME *   | D08 *   |   | SEARCH |     |          |
|       |                | Recently-viewed nem                                   | e/10   | Pending Claim  | Data of Service:  | Provider  |        |     |          |
|       |                | 20HN DOB<br>28 (2000000000<br>20HN DOB (200000        | -061<br>000000-061   | -  |   |   |        |     |          |
|       |                | Recent In F   | Process Cla  | ims  | Recent Paym   | nents   |        |     |          |
|       |                | Pie re  | rcent le process clait                                     | •  | No 11   | ecord payments.                                 |        |     |          |
|       |                |   |  |  |   |   |        |     |          |

#### **Manage Your Patient Benefits**

From your dentist dashboard or from the <u>Find a Patient</u> tab, search for a patient using their subscriber ID or social security number, first name and date of birth. Then click <u>Search.</u> You will be able to access the following:

- **Dental Benefits:** You'll see an overview of your patient's benefits, including plan and network information, maximums and deductibles used to date, and remaining cleanings. To print benefit information, at the bottom of the page select <u>Click here to view full benefits information</u>.
- Limitations: View the patient's plan allowances and limitations for each service type, as well as any remaining services available.
- Coverage: View coverage by in-network or out-of-network based on your network participation status to view the payment level and whether the patient is subject to deductibles or waiting periods. You can also search specific procedure codes. Click on <u>Select Provider</u> to select the provider. Next, enter the procedure code in the <u>Code(s) Search</u> (four numeric characters are required). Click on the <u>space bar</u> to enter additional procedure codes and then select <u>Search</u>.
- Claims and Treatment Plans: View all claims submitted to date for the calendar year, indicating how much TruAssure will pay and the patient's responsibility for each claim. You can also view treatment plans submitted for a patient.

| nboard | Find a Patient                                  | Claims               | Payments                                     | Documents                 |                               | 🤨 John Do |
|--------|---|----------------------|--|---------------------------|-------------------------------|-----------|
| Р      | atient Quick Search:                            |                      |  |                           |                               |           |
| s      | UBSCRIBER ID OR SSN *                           | FIR                  | ST NAME *                                    | DOB *                     | SEARCH                        |           |
|        | JOHN DOE  |                      |  |                           | Submit Claim or Treatment     | Plan      |
|        | Dental Benefits                                 | Limitations          | Coverage                                     | Claims                    | Treatment Plans               |           |
| Р      | olicy Information<br>enefits for 01/01/2023 - 1 | 2/31/2023            |  |                           |                               |           |
| N      | ame:  |                      | JO   | HN DOE                    | Cleanings remaining           |           |
| G      | roup Name:                                      |                      | ABC Company<br>000000000-0000000-<br>0000000 |                           | IO JOHN.                      |           |
| G      | roup Number:                                    |                      |  |                           | 2                             |           |
| IC     | ):  |                      | 0000000                                      | 000-00                    | <b>∠</b>                      |           |
| c      | overage:  |                      | Xxx/)  | Xxxxx<br>(xxxxxx<br>Xxxxx | Next available:<br>05/08/2023 |           |
| P      | focuce:   |                      | 12.6   | Group                     |                               |           |
| Te     | ermination Date:                                |                      |  | N/A                       |                               |           |
| м      | aximums apply if the Membe                      | r meets the age requ | irement of the covered s                     | ervice                    |                               |           |
| Ir     | ndividual Calendar Year                         | Maximum (Out o       | of Network)                                  |                           |                               |           |
| U      | lsed: \$1000 / Remaining:                       | \$0                  |  |                           | Total allowed: \$1            | 000       |
| Ir     | ndividual Orthodontic L                         | ifetime Maximum      | n (Out of Network)                           |                           |                               |           |
| U      | Ised: \$0 / Remaining: \$10                     | 00                   |  |                           | Total allowed: \$1            | 000       |
| Ir     | ndividual Calendar Year                         | Maximum (In Ne       | twork)                                       |                           |                               |           |
| U      | lsed: \$1000 / Remaining:                       | \$0                  |  |                           | Total allowed: \$1            | 000       |
|        |   |                      |  |                           |                               |           |

### **Submit Claims and Treatment Plans**

 From your dentist dashboard or the Find a Patient tab, search for a patient to go to the patient's benefits page.

- 2 Click <u>Submit Claim</u> or <u>Treatment Plan</u> at the top right of the patient benefits screen.
  - a. If submitting a treatment plan, check the box at the top for <u>Treatment Plans</u>. If you are submitting a claim, this should not be checked.
- Fill in additional coverage information (if applicable) and dentist information.

| ruAssur   | e-  |             |           |           |                                  |             |  |
|-----------|---|-------------|-----------|-----------|----------------------------------|-------------|--|
| Dashboard | Find a Patient                                    | Claims      | Payments  | Documents |                                  | 💿 🛛 John Do |  |
|           | Patient Quick Search:                             |             |           |           |                                  |             |  |
|           | SUBSCRIBER ID OR SSN *                            | FIRS        | ST NAME * | DOB *     | E SE/                            | ARCH        |  |
|           | JOHN DOE  |             |           |           | Submit Claim or Treat            | ment Plan   |  |
|           | Dental Benefits                                   | Limitations | Coverage  | Claims    | Treatment Plans                  |             |  |
|           | Policy Information<br>Benefits for 01/01/2023 - 1 | 2/31/2023   |           |           |                                  |             |  |
|           | Name:   |             | JO        | HN DOE    | Cleanings remaining<br>for JOHN: | 9           |  |

- Click <u>Add Procedure</u> and fill in the date of service, procedure code(s) and other fields as necessary, being sure to fill in the fee amount. To add additional procedures, click <u>Add Procedure</u> and fill in the appropriate fields.
  a. If submitting a treatment plan only, complete the ancillary treatment information section if treatment is for orthodontic service.
- 5 Read and check the boxes next to the two legal statements and click <u>Submit</u>.

| oard   | Find a Patient             | Claims                              | Payments            | Documents                |                   | 🤢 John Do |
|--------|----------------------------|-------------------------------------|---------------------|--------------------------|-------------------|-----------|
| Pat    | lent Quick Search:         |                                     |                     |                          |                   |           |
| su     | BSCRIBER ID OR SSN *       | FIR                                 | ST NAME *           | DOB *                    | E SE              | ARCH      |
| < Back | to Patient Overview        |                                     |                     |                          |                   |           |
| J      | OHN DOE /                  | Submit Cla                          | im or Treatm        | ent Plan                 |                   |           |
|        |                            | _                                   |                     |                          |                   |           |
|        | Check here if              | r<br>you are only sub               | mitting a treatment | olan and not a claim. Tr | eatment plans are |           |
|        | valid for a per            | iod of 180 days f                   | ollowing submission | •                        |                   |           |
|        | Payer Informat             | on:                                 |                     |                          |                   |           |
|        | Truassure Insurar          | ice Co.                             |                     |                          | *                 |           |
|        | Additional Cov             | erage Informat                      | ion:                |                          |                   |           |
|        | Assignment o               | ner Coverage?<br>f Benefits is on F | ile                 |                          |                   |           |
|        | Dentist Informa            | Dentist Information:                |                     |                          |                   |           |
|        | TREATING DENT              | TREATING DENTISTS NPI: *            |                     |                          |                   |           |
|        | BILLING / BUSIN            | BILLING / BUSINESS NPI: *           |                     |                          |                   |           |
|        | Patient Informa            | Patient Information                 |                     |                          |                   |           |
|        | JOHN DOE                   |                                     | 000<br>GEN          | 000000000-00<br>DER:*    |                   |           |
|        | ADDRESS 1: *               |                                     | Ma                  | e                        |                   |           |
|        | ADDRESS 2:                 |                                     |                     |                          |                   |           |
|        | CITY: "<br>CITY<br>STATE - |                                     |                     |                          |                   |           |
|        | STATE<br>ZIP: *            |                                     |                     |                          |                   |           |
|        | 12345                      |                                     |                     |                          |                   |           |
|        | Subscriber Info            | rmation                             |                     |                          |                   |           |
|        | JOHN DOE                   |                                     | OOC<br>GEN          | 000000000-00             |                   |           |
|        | 01/01/1980<br>ADDRESS 1: * |                                     | Mai                 | e                        |                   |           |
|        | ADDRESS 2:                 |                                     |                     |                          |                   |           |
|        | CITY: "                    |                                     |                     |                          |                   |           |
|        | STATE -                    |                                     |                     |                          |                   |           |
|        | 21P: *<br>12345            |                                     |                     |                          |                   |           |
|        |                            |                                     |                     |                          |                   |           |

### **Convert Treatment Plan to Claim**

- 1) Find a patient from your dashboard or by clicking on the Find a patient tab.
- (2) Click the <u>Treatment Plans</u> tab; then select <u>Convert to Claim</u> next to the appropriate treatment plan.
- 3 The treatment plan will appear. At the bottom of the page, read and check the boxes next to the two legal statements, then click <u>Submit.</u>
- 4) The converted treatment plan will be displayed under <u>Claims.</u>

#### **Track Practice Claims and Payments**

- 1) View claims in process and recent payments from your dentist dashboard.
- 2 To find a specific claim, click <u>Claims</u>. You can filter by claim status, location, patient name and date. The status of the claim, amount paid, service date, and patient name will be displayed.

|                                  | Find a Patient    | Claims             | Payments    | Documents |   |                           | 🤓 John Do     |
|----------------------------------|-------------------|--------------------|-------------|-----------|---|---------------------------|---------------|
| Patient                          | Juick Search:     |                    |             |           |   |                           |               |
| SUBSC                            | RIBER ID OR SSN * | FIRST              | NAME *      | DOB *     | ۵                                       | SEARCH                    |               |
| Clai                             | ms<br>ratus:      | FILTER BY PROVIDER | R LOCATION: |           |   |                           |               |
| FILTER                           | BY PATIENT NAME   | All locations      |             | Q 1       | HOWING FROM:<br>1/08/2022               | SHOWING TO:<br>05/08/2023 | 3             |
| Claim                            | 00000000          | 000 (In Proce      | ss)         |           |   | 🖌 Edit/Vol                | d             |
|                                  | JOHN DOE          |                    |             |           | Processed                               | 05/08/202                 | 3             |
| Patient:<br>Provider<br>Subscrit | JOHN DOE          |                    |             |           | Date of Service<br>Paid Amount<br>Check | \$79.50<br>N/             | <b>0</b><br>A |

To check the payment status of a claim, click <u>Payments.</u> Filter by date and click on the check number to view the payment information.



## Documents

Click on **Documents** to view and download forms and other resources.

| TruAssure |   |        |          |           |              |  |  |  |  |
|-----------|---|--------|----------|-----------|--------------|--|--|--|--|
| Dashboard | Find a Patient                                | Claims | Payments | Documents | 😕 John Doe 🔸 |  |  |  |  |
|           | Forms<br>Dentist Forms<br>Porms and Resources |        |          |           |              |  |  |  |  |

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