

Treatment & Network Details

Page Overview

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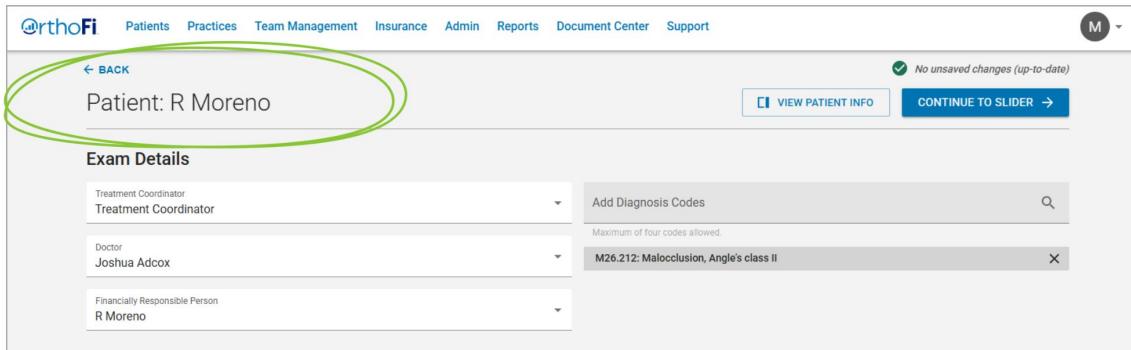
Before You Begin:

- To begin the treatment build process, make sure that the patient has completed forms and verified insurance.
- Review the Cheat Sheet and enter "Treatment Recommended" as the exam result.
- A real-time payment summary will be on the right side.
- TC + Doctor can't be changed after contract is signed.
- Your work automatically saves as you go

Page Header

Header/Exam Details Section

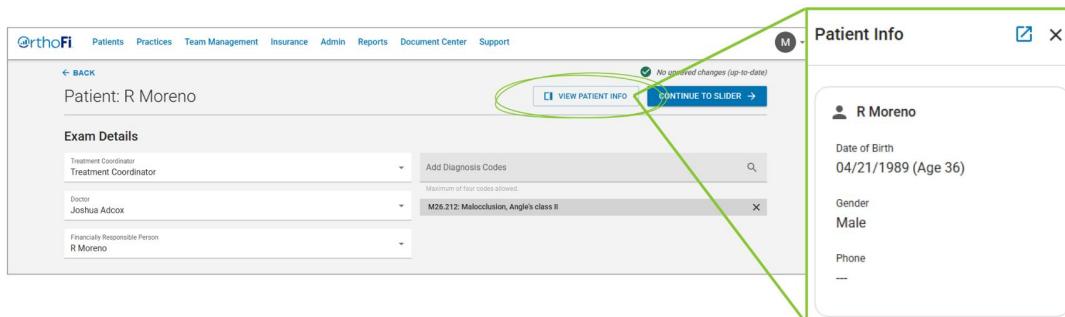
- This section displays the **Patient Name** front and center, so you always know who you're working with.



The screenshot shows the OrthoFi software interface. At the top, there is a navigation bar with links: Patients, Practices, Team Management, Insurance, Admin, Reports, Document Center, and Support. On the far right of the top bar is a user icon with the letter 'M' and a dropdown arrow. Below the navigation bar, the main content area has a header 'Patient: R Moreno'. To the left of this header is a 'BACK' button. To the right is a message 'No unsaved changes (up-to-date)' with a checkmark icon. Below the patient header, there is a section titled 'Exam Details' with three dropdown menus: 'Treatment Coordinator' (set to 'Treatment Coordinator'), 'Doctor' (set to 'Joshua Adcox'), and 'Financially Responsible Person' (set to 'R Moreno'). To the right of these dropdowns is a 'Add Diagnosis Codes' input field with a search icon and a note 'Maximum of four codes allowed.' Below this input field is a list box containing the code 'M26.212: Malocclusion, Angle's class II'. At the bottom right of the interface are two buttons: 'VIEW PATIENT INFO' and 'CONTINUE TO SLIDER'.

The header features two primary buttons:

- **Continue to Slider** – Click this after setting up treatment options to direct the patient to the slider.
- **View Patient Details** – Opens a side panel with key info, without leaving the page or exposing sensitive info when handing the device to patients.



Exam Details & Treatment Selection Overview

ACTIVE TAB

CLICK TO CHANGE

ADD DIAGNOSIS CODE

ADD A NEW TREATMENT PLAN

RENAME TX LABEL

TX LENGTH ON CLAIM

TX LENGTH ON SLIDER

CREATE TREATMENT PLAN

NAME OF TX ON CONTRACT / CLAIM

DENTITION OF PATIENT ON CLAIM

NOT VISIBLE TO PATIENTS

DUPLICATE TREATMENT

REMOVE TREATMENT

Treatment Overview

Estimated Treatment Length 18 - 24 Months

Treatment Investment \$7,445.00

Estimated Insurance Benefit: -\$1,500.00

Patient Responsibility \$5,945.00

OPEN FEE DETAILS

Treatment Costs

The Treatment Costs section is split into two areas:

1. **Treatment Fee:** This is the base fee for the orthodontic treatment, which includes:
 - a. The orthodontist's primary treatment code (e.g., comprehensive orthodontic treatment).
 - b. Any procedures included in the overall fee (e.g., records, retainers, etc.).

Note: Included items reduce the base treatment fee, as their costs are already factored in.
2. **Additional Costs:** These are procedures or items not included in the Treatment Fee but bundled with the treatment plan. They will appear separately in the patient's financial agreement (e.g., whitening kits, retainer assurance).

- a. To change an additional cost item into a treatment fee, select the checkbox next to the item.
- b. To revert a treatment fee back to an additional cost, deselect the checkbox.

Click **+ ADD COSTS** to add another line item to your treatment.

The screenshot shows the 'Treatment Costs' section of a software interface. On the left, there are two tables: 'Treatment Fee (Before Discounts)' and 'Additional Costs'. The 'Treatment Fee' table has one row for 'Comprehensive - Braces' with an amount of '\$ 6595'. The 'Additional Costs' table has two rows: 'Retainer Assurance + Copay' with '\$ 550' and 'Wireless LED Whitening Kit' with '\$ 300'. A green dashed box highlights the '+ ADD COSTS (OPENS IN A NEW WINDOW)' button in the top right of the main section. A green arrow points from this button to a separate window titled 'Add Costs' on the right. This window lists various cost items with their descriptions and amounts, such as '\$100.00 3D Surface Scan', '\$550.00 CBCT', and '\$995.00 Appliance - Fixed'. A green dashed box highlights the 'CLICK TO REMOVE' button in the bottom right of the 'Additional Costs' table, and another green arrow points from the 'Add Costs' window to this button.

If iMaxX is available for the patient's treatment, **iMaxX Selections** will appear, displaying:

- Optimized recommendations for **Procedures Included in Tx Fee**.
- Any **Billable Additional Costs** that are available for selection.

The screenshot shows the 'iMaxX Selections' section. It has two main sections: 'Procedures Included in Tx Fee' and 'Billable Additional Costs'. The 'Procedures Included in Tx Fee' section contains checkboxes for 'Panoramic Image', 'CBCT', '3D Surface Scan', 'Virtual Treatment Simulation', 'Diagnostic Photos', 'Diagnostic Models', and 'Retention'. The 'Billable Additional Costs' section contains checkboxes for 'Retainer Assurance + Copay' (which is checked), 'Clear Brackets', 'Spk Whitening', 'Wireless LED Whitening Kit' (which is checked), 'Whitening Package (in-office + LED whitening kit)', and 'Vivera'. A green dashed box highlights the 'BYPASS IMAXX' button at the bottom left. A red box with a warning message 'iMaxX Unavailable' is displayed in the center, stating 'iMaxX has reviewed the treatment selection and confirmed there are no iMaxX opportunities available for this treatment.' A green dashed box highlights the text 'DISPLAYS WHEN IMAXX IS UNAVAILABLE' in the bottom right, and a green arrow points from the 'iMaxX Unavailable' message to this text.

Courtesies, Network Discounts, & Estimated Insurance Benefits

Courtesies and Network Discounts are divided for clear distinction between the two items.

- **Courtesies:** Office-provided discounts (e.g., sibling or military discounts)
- **Network Discounts:** Applied automatically based on insurance carrier contracts

For instances in the legacy system where \$0 courtesies were used because percentage-based discounts couldn't be added, TCs have the following options for specifying the courtesy amount:

- Enter a specified dollar (\$) amount.
- Calculate a percentage-based courtesy and enter the corresponding \$ amount.
- Contact your OSM to update to a percentage-based discount (specify if it applies to the treatment fee only or total fee).

Note: All one-time or custom courtesies require a dollar amount (\$) - percentages are not supported.

The Estimated Insurance Benefits section displays Primary and Secondary Insurance separately, and includes:

- Eligibility Status
- Insurance Type
- Available Benefits
- Insurance Relationship
- Age Limit
- Assignment of Benefits
- Dropdown arrow for viewing insurance and benefit details

Note: If you edit or update your iMaxX selections after applying a courtesy, you must remove and reapply the courtesy to ensure the discount reflects the updated selections.

Courtesies

Courtesies

No courtesies added.

+ ADD COURTESIES

\$0.00

All one-time or custom courtesies require a dollar amount (\$) - percentages are not supported.

ADD A COURTESY (OPENS IN A NEW WINDOW)

Add Courtesies

Select all additional courtesies and fees that apply to this treatment.

-\$250.00 \$250 Off SDS	-\$250.00 \$250 Referral Card	-\$500.00 \$500 Down Payment Match
-\$750.00 Better Together \$750	-\$350.00 Family 2nd	-\$450.00 Family 3rd
-\$550.00 Family 4th	10% (Tx Fee) Military	-\$750.00 Phase 2 \$750
100% (Tx Fee) Smiles for the Heart	100% (Tx Fee) Smiles from Within	30% (Tx Fee) Smiles from Within Family M

Create One-Time Courtesy (optional)

Courtesy will be created one-time for this patient only.

Description

\$ 0

+ ADD ONE-TIME COURTESY

CANCEL **APPLY CHANGES**

Courtesies, Network Discounts, & Estimated Insurance Benefits (Cont.)

OrthoFi estimated insurance benefits are calculated on this page based on the treatments selected, benefits verified by OrthoFi, and the Doctor's network relationships with specific carriers

- Total in-network discount is calculated by comparing your treatment fee with contracted rates by procedure code(s) added by you.
- It is your practice's responsibility to maintain your network agreement with carriers, and select additional costs, etc. per your network specifications.
- OrthoFi software will not automatically adjust your treatment build by network.

The screenshot shows the 'Estimated Insurance Benefits' section. It lists a carrier '3P Administrators (Onalaska, WI)' with an amount of '\$ 1500'. A green box labeled 'VIEW ADDITIONAL DETAILS' points to a detailed view of this carrier. This view includes the carrier name, type (PPO Standard), available benefits (\$50 up to \$1,500.00), insurance relationship (Out of Network), age limit (99), and assignment of benefits (Practice). A green box labeled 'OPEN ELIGIBILITY CHECK SUMMARY' points to the bottom right of this detailed view.

Treatment Overview

Located at the right side of the Treatment Tab, the Treatment Overview section summarizes the selections of the previous sections and the information entered. Users can see the following information:

- Estimated Treatment Length
- Treatment Investment
- Discounts
- Estimated Insurance Benefit
- Patient Responsibility

The screenshot shows the Treatment Overview section with a summary of treatment details. A dashed green box encloses the 'Treatment Overview' table, which includes columns for Treatment Investment (\$7,445.00), Discounts (\$-250.00), Estimated Insurance Benefit (\$-1,500.00), and Patient Responsibility (\$5,695.00). Below the table are three buttons: 'OPEN FEE DETAILS', 'DUPLICATE TREATMENT', and 'REMOVE TREATMENT'. To the right of the screenshot, three callout boxes provide descriptions for these actions:

- Open Fee Details:** Select to review all treatment details.
- Duplicate Treatment:** Create an editable copy of the current Treatment Tab.
- Remove Treatment:** Deletes the current Treatment Tab.

Below the Treatment Overview section, are three actions:

- **Open Fee Details:** Select to review the specific details and fees of the treatment. Treatment Coordinators should review this section to ensure accuracy for CIGNA and DHMO carriers.
- **Duplicate Treatment:** Creates an editable copy of the active Treatment Tab.
- **Remove Treatment:** Deletes the active Treatment Tab.

All discounts, costs, and insurance estimates are updated in real time.

Fee Details Window

The Fee Details window has been updated to clearly communicate the relationship between discounts, procedures included in the fee, contracted rates, and network discounts.

To access it, users can click the **Fee Details** button located below the Treatment Overview.

Top Section:

- **Treatment Fee Breakdown (New):** This section outlines the base treatment fee and how any applied courtesies (e.g., discounts) reduce that amount. The result is the final Treatment Fee.
- **Treatment Investment Breakdown:** This section summarizes the total treatment cost, calculated as:

$$\text{Treatment Fee} + \text{Additional Costs} = \text{Total Treatment Investment}$$

➤ *If the patient has insurance, the Estimated Insurance Benefit (if applicable) is subtracted from the Total Treatment Investment to determine the Patient Responsibility.*

The screenshot shows the Treatment Fee Details window for '3P Administrators (Onalaska, WI)'. The window is divided into several sections:

- Treatment Fee Breakdown:** Shows the breakdown of the treatment fee, including 'Comprehensive Braces' (\$6,595.00) and a '\$250 Referral Card' discount (-\$250.00), resulting in a **Treatment Fee: \$6,345.00**.
- Treatment Investment Breakdown:** Shows the total treatment cost, including the treatment fee and additional costs, resulting in a **Total Treatment Investment: \$7,195.00**. It also shows an **Estimated Insurance Benefit: -\$1,500.00** and a **Patient Responsibility: \$5,695.00**.
- Treatment Fee:** A table showing the breakdown of the treatment fee, with 'Comprehensive - Braces' listed as \$6345 with procedure code D8090.
- Additional Costs:** A table showing the breakdown of additional costs, with 'Retainer Assurance + Copay' listed as \$550 and 'Wireless LED Whitening Kit' listed as \$300.
- Estimated Insurance Benefits:** A table showing the breakdown of insurance benefits, with '3P Administrators (Onalaska, WI)' listed as completed with an amount of \$1500 and a network discount of \$0.00.

On the right side of the window, there is a 'Treatment Overview' section with a dashed green box around it, showing the following data:

Treatment Overview	
Estimated Treatment Length	18 - 24 Months
Treatment Investment	\$7,445.00
Discounts	-\$250.00
Estimated Insurance Benefit:	-\$1,500.00
Patient Responsibility	\$5,695.00

Below the Treatment Overview are three buttons: 'OPEN FEE DETAILS' (highlighted with a green box), 'DUPLICATE TREATMENT', and 'REMOVE TREATMENT'.

Green curly braces on the left and right sides of the window group the 'Treatment Fee Breakdown' and 'Treatment Investment Breakdown' sections respectively.