

# 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

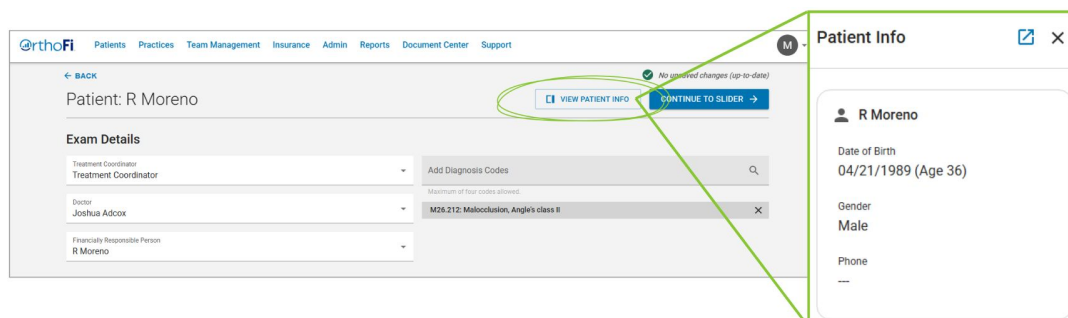
### Header/Exam Details Section

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

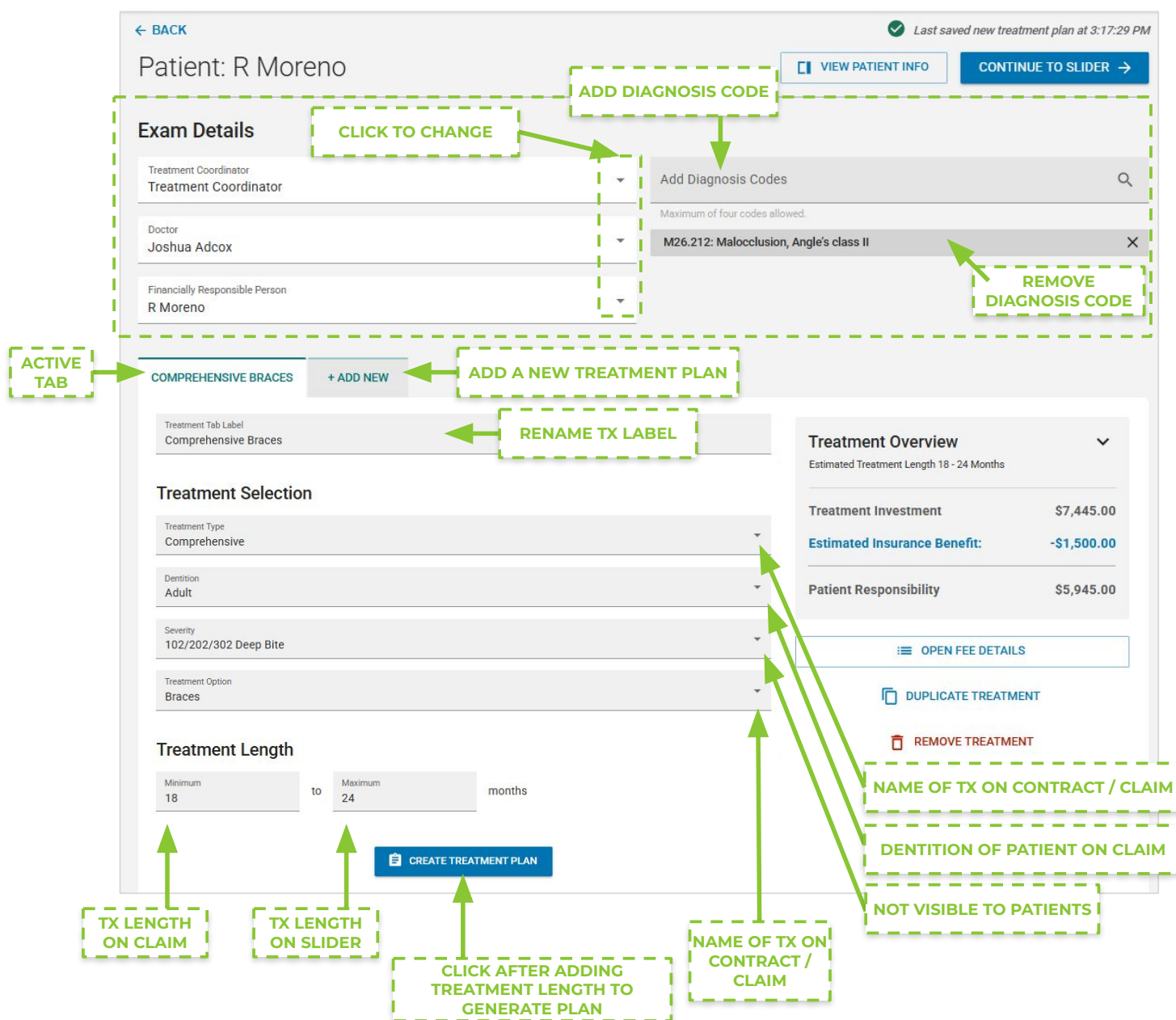
The screenshot shows the @rthoFi web application interface. At the top is a navigation bar with links: Patients, Practices, Team Management, Insurance, Admin, Reports, Document Center, and Support. A user profile icon 'M' is in the top right. Below the navigation bar, a green checkmark icon indicates 'No unsaved changes (up-to-date)'. The main content area is titled 'Patient: R Moreno' and is circled in green. To the right of the patient name are two buttons: 'VIEW PATIENT INFO' and 'CONTINUE TO SLIDER'. Below the patient name is the 'Exam Details' section, which contains three dropdown menus: 'Treatment Coordinator' (selected: Treatment Coordinator), 'Doctor' (selected: Joshua Adcox), and 'Financially Responsible Person' (selected: R Moreno). To the right of these dropdowns is a section for 'Add Diagnosis Codes' with a search icon. Below this is a text input field containing 'M26.212: Malocclusion, Angle's class II' and a close button 'X'. A note below the input field states 'Maximum of four codes allowed.'

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



## 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. At the top, a green dashed box highlights the '+ ADD COSTS (OPENS IN A NEW WINDOW)' button. Below this, the 'Treatment Fee (Before Discounts)' is listed as \$6,595.00. A table below it has columns for 'DESCRIPTION' and 'AMOUNT'. The first row is 'Comprehensive - Braces' with an amount of \$ 6595. A green dashed box around this row is labeled 'ALL FEES ARE EDITABLE'. Below the treatment fee, 'Additional Costs' are listed as \$850.00. A table below it has columns for 'DESCRIPTION' and 'AMOUNT'. The first row is 'Retainer Assurance + Copay' with an amount of \$ 550. The second row is 'Wireless LED Whitening Kit' with an amount of \$ 300. A green dashed box around the 'Retainer Assurance + Copay' row is labeled 'CLICK TO REMOVE'. To the right, a 'Add Costs' window is shown, displaying a grid of various cost items with their respective amounts.

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' window. It has two main sections: 'Procedures Included in Tx Fee' and 'Billable Additional Costs'. The 'Procedures Included in Tx Fee' section has a list of checkboxes for various procedures: Panoramic Image, Cephalometric Image, Diagnostic Photos, Diagnostic Models, CBCT, 3D Surface Scan, Virtual Treatment Simulation, and Retention. The 'Billable Additional Costs' section has a list of checkboxes for various costs: Retainer Assurance + Copay, Clear Brackets, Spk Whitening, Wireless LED Whitening Kit, Whitening Package (in-office + LED whitening kit), and Vivera. A green dashed box around the 'Billable Additional Costs' section is labeled 'BYPASS IMAXX'. A red dashed box around the 'iMaxX Unavailable' message is labeled 'DISPLAYS WHEN IMAXX IS UNAVAILABLE'. The message states: 'iMaxX Unavailable. iMaxX has reviewed the treatment selection and confirmed there are no iMaxX opportunities available for this treatment.' At the bottom, there are buttons for 'BYPASS IMAXX' and 'SUBMIT'.

## 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.

The screenshot displays the 'Courtesies' section of a software interface. At the top, there is a '+ ADD COURTESIES' button. Below it, a list of courtesies is shown, currently empty with the text 'No courtesies added.' and a value of '\$0.00'. A green dashed box with an arrow points to the '+ ADD COURTESIES' button, containing the text 'ADD A COURTESY (OPENS IN A NEW WINDOW)'. To the right, another green dashed box contains the text 'All one-time or custom courtesies require a dollar amount (\$) - percentages are not supported.' Below the main interface, an 'Add Courtesies' modal window is open. It features a grid of 12 courtesies, each with a dollar amount and a description. The courtesies include: -\$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, and 30% (Tx Fee) Smiles from Within Family M. Below the grid, there is a section for 'Create One-Time Courtesy (optional)' with a description field and a dollar amount field set to '\$ 0'. At the bottom of the modal are 'CANCEL' and 'APPLY CHANGES' buttons.

Add Courtesies		
-\$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:  \$

+ 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.

**Estimated Insurance Benefits**

INSURANCE CARRIER	AMOUNT
Completed 3P Administrators (Onalaska, WI)	\$ 1500

**VIEW ADDITIONAL DETAILS**

**OPEN ELIGIBILITY CHECK SUMMARY**

**INSURANCE CARRIER**

Completed 3P Administrators (Onalaska, WI)

**AMOUNT**

\$ 1500

Type: PPO Standard

Available Benefits: 50% up to \$1,500.00

Insurance Relationship: Out of Network

Age Limit: 99

Assignment of Benefits: Practice

## 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

**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

**OPEN FEE DETAILS**

**DUPLICATE TREATMENT**

**REMOVE TREATMENT**

**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 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 displays the 'Treatment Fee Details - 3P Administrators (Onalaska, WI)' window. A green dashed box highlights the 'OPEN FEE DETAILS' button in the 'Treatment Overview' section. A green line connects this button to the main window. The main window is divided into two main sections: 'Treatment Fee Breakdown' and 'Treatment Investment Breakdown'. The 'Treatment Fee Breakdown' section shows 'Comprehensive Braces' for \$6,595.00 and a '\$250 Referral Card' discount of -\$250.00, resulting in a 'Treatment Fee' of \$6,345.00. The 'Treatment Investment Breakdown' section shows 'Treatment Fee' of \$6,345.00 and 'Additional Costs' of \$850.00, resulting in a 'Total Treatment Investment' of \$7,195.00. An 'Estimated Insurance Benefit' of -\$1,500.00 is also shown, leading to a 'Patient Responsibility' of \$5,695.00. Below these sections, there are three detailed tables: 'Treatment Fee' (showing 'Comprehensive - Braces' for \$6,345), 'Additional Costs' (showing 'Retainer Assurance + Copay' for \$550 and 'Wireless LED Whitening Kit' for \$300), and 'Estimated Insurance Benefits' (showing '3P Administrators (Onalaska, WI)' for \$1,500). Brackets on the left and right sides of the main window group these sections into 'Treatment Fee Breakdown', 'Treatment Investment Breakdown', and 'Treatment Fee, Additional Costs, & Insurance Details'.

**Treatment Overview**

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

**Treatment Fee Details - 3P Administrators (Onalaska, WI)**

**Treatment Fee Breakdown**

Comprehensive Braces	\$6,595.00
\$250 Referral Card	-\$250.00
<b>Treatment Fee:</b>	<b>\$6,345.00</b>

**Treatment Investment Breakdown**

Treatment Fee	\$6,345.00
Additional Costs	\$850.00
<b>Total Treatment Investment:</b>	<b>\$7,195.00</b>
Estimated Insurance Benefit:	-\$1,500.00
<b>Patient Responsibility:</b>	<b>\$5,695.00</b>

**Treatment Fee** **\$6,345.00**

Description	Amount	Procedure Code	Contracted Rate	Network Discount
Comprehensive - Braces	\$ 6345	D8090		\$0.00

**Additional Costs** **\$850.00**

Description	Amount	Procedure Code	Contracted Rate	Network Discount
Retainer Assurance + Copay	\$ 550	Select Proce...		\$0.00
Wireless LED Whitening Kit	\$ 300	Select Proce...		\$0.00

**Estimated Insurance Benefits** **\$1,500.00**

Insurance Carrier	Amount	Network Discount
Completed 3P Administrators (Onalaska, WI)	\$ 1500	\$0.00