

Find A Patient - Claims/Treatment Plans

Online Dentist Account



★ Claims and Treatment Plans Tab

On the patient record, you can also Submit a Claim or Treatment Plan. For a pre-treatment estimate, click on the check box below treatment plan and proceed to adding all required information in the form below. To submit a claim, complete the form with all required information.

Enter the appropriate procedures that were completed on the patient under the Procedures section. You can add or remove procedures as needed.

[Submit Claim or Treatment Plan](#)

Benefit Verification Number [?] 146

[Dental Benefits](#) [Limitations](#) [Coverage](#) [Claims](#) [Treatment Plans](#)

SHOWING FROM: 04/22/2023 SHOWING TO: 04/22/2024

Claims: (In Process) [Edit/Void](#)

Provider:

Date	Code	Proc
04/10/2024	D2391	RESI

[Submit Claim or Treatment Plan](#)

Benefit Verification Number [?] 147

[Dental Benefits](#) [Limitations](#) [Coverage](#) [Claims](#) [Treatment Plans](#)

SHOWING FROM: 04/22/2023 SHOWING TO: 04/22/2024

Expires in 147 days

Treatment: (Final) [View Treatment Plan](#) [Edit/Void](#) [Convert to Claim](#)

Entered on: 03/21/2024

Code	Procedure	We Pay	Patient Pays
D0120	PERIODIC ORAL EVALUATION ESTABLISHED PATIENT	\$33.00	\$0.00
D1110	PROPHYLAXIS - ADULT	\$65.00	\$0.00
D0274	BITEWINGS - FOUR RADIOGRAPHIC IMAGES	\$42.00	\$0.00
Total		\$140.00	\$0.00