Painless Medical Billing Howard Speaks Podcast 040 Rose Nierman Listen on iTunes

Websites, Emails, Phone Numbers and Products Mentioned:

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Howard Farran: I want to thank you Rose so much for being with me today. You're in a very exciting area because a lot of dentist have thought about can I bill any of this stuff to medical and I would say probably not even 1% of the dentists have gone down the road that you have mastered for 26 years which is medical billing.

I want us to just start off with the obvious – what per cent of dentist would you say have never billed medical insurance?

Rose Nierman: I'd probably say 90%.

Howard Farran: 90%? So you think 10% have?

Rose Nierman: Possibly.

Howard Farran: Is that because you're adding specialists like oral surgeons?

Rose Nierman: With the specialists it's actually more.

Howard Farran: Yeah. So Rose I'm just going to start off with the deal. Tell my viewers who have never billed a single dollar to medical insurance, what are you talking about? How can I do this? What procedures are you talking about and what if they use Dentrix or Eaglesoft? How does this even work and first of all start off with how did you even get into this?

Rose Nierman: Well actually I started as a hygienist in Indiana and moved to Florida after that and I worked for a busy TMD practice that was billing a lot of TMD to medical and I kind of figured out how to bill it and the dentist's friends started calling me and I wrote a manual. I wrote the first medical billing manual in dentistry and then created a software for medical billing too.

Howard Farran: So you have your software now?

Rose Nierman: Yes.

Howard Farran: How does a dentist get a sample of that? What is your website for that, Rose?

Rose Nierman: It's Dentalwriter.com.

Howard Farran: Dentalwriter.com?

Rose Nierman: Yeah Dental, D E N T A L W R I T E R.

Howard Farran: I've got to tell you the truth, whenever I see people talking about Dentalwriter.com, usually they're talking about billing out CBCT's. I think a lot of dentists think that that's specifically just a CBCT medical billing piece of software, but you're saying it's also for other things.

Rose Nierman: There is another software called Dentalwriter for cone beam, but Dentalwriter bills everything to medical. Anything that you're going to bill to medical from a dental office, Dentalwriter will bill that.

Howard Farran: And that's your software?

Rose Nierman: That's ours yeah.

Howard Farran: At Dentalwriter.com.

Rose Nierman: And it's called Dentalwriter because it writes reports of medical necessity and it bills the medical but the key for medical billing is documentation and those reports, those narrative reports of medical necessity, so it does a nice job with that.

Howard Farran: So in dentistry, we just bill a code, we did a DO. But if you're a MD, you have to bill a diagnosis with the code?

Rose Nierman: That's right.

Howard Farran: Is that the main difference in nuance?

Rose Nierman: Yes the main key to medical billing in dentistry, well any medical billing, is having that diagnosis code and in order to bill medical you must have at least one diagnosis code, whether it be TMD or sleep apnea or through the bone grafts it could be bone atrophy.

Howard Farran: Really? Bone grafting? I just learnt something new and I have been talking to you for three minutes and thirty seconds and I just learnt something new. Bone grafting. So it's mostly TMD, bone grafting, CBCT's, what else?

Rose Nierman: Accident cases, sedation especially for kids is mandatory now as part of the affordable care act. Anything surgical can be billed to medical. Medications that you write prescriptions, a dentist writes prescriptions for will be covered by medical. So lots of different things.

Howard Farran: So also for the Americans listing I know with iTunes that whenever we do a podcast like this someone downloads it from every single country on earth – sorry to ask a USA specific question. In the States, the States have Medicaid, but the country national has Medicare and would you call the affordable health care act – is that in fact Medicaid and Medicare and private insurance, I mean that affects everything doesn't it?

Rose Nierman: It does. It affects everything. We haven't billed much Medicaid, dentists haven't billed too much of that- well pediatric dentists do, but as far as Medicare, that's very common for dentists to bill them. The affordable care act does apply to all, private carriers, Medicare and Medicaid.

Howard Farran: Has the affordable care act, otherwise known as ObamaCare, has that affected your business, your Dentalwriter, have you had to change software or anything because of that?

Rose Nierman: Not because of that. Next year every ICD diagnosis code is changing and so they're going to be, instead of numeric they're going to be alphanumeric, and so that will affect Dentalwriter. It's changing on October 1st of 2015 and so Dentalwriter is all set to change over to the new code set on that day.

Howard Farran: You demoed me the code. It was at a- I'm trying to think of somewhere it was in Scottsdale, five or ten years ago, I think it was an orthodontic seminar wasn't it?

Rose Nierman: Oh yes, it was.

Howard Farran: So why were you at an orthodontic course? Is that more for the TMD?

Rose Nierman: We do have an orthodontic report writer because we're all about documentation and so you can use that for dental insurance as well. It also writes nice narratives and letters to the patient. A lot of- when you're talking orthodontists, or not orthodontists, but orthodontic course, sometimes TMD is covered there too, so our TMD module is very popular.

Howard Farran: Okay Rose, so there's probably going to be a couple of thousand viewers out here who have never billed a medical code ever, so pitch me on why I should go to <u>www.dentalwriter.com</u> and how- is this a long, steep learning curve? I need to have an office manager that's really Albert Einstein's sister, or is this a short learning curve? How can I see a demo of this? What is the chance I'm going to get reimbursed?

I mean some people have no problem- like chiropractors, a lot of them have no problem billing out 100 patients on medical insurance even though they may only get paid by 5%.

Rose Nierman: That's correct.

Howard Farran: Is that going to be my case, I'm going to bill up for every 100 procedures, 5 will get covered? I mean tell me what I'm looking at?

Rose Nierman: It depends on the procedure. If you're talking about the sleep apnea appliances you should be seeing 95% of those being paid by medical.

Howard Farran: Really? 95%?

Rose Nierman: Yeah absolutely.

Howard Farran: Sleep apnea, and that's for the retainer?

Rose Nierman: That's for the oral appliance yeah.

Howard Farran: And what's the average fee for the oral appliance, about \$695?

Rose Nierman: \$695- no the average fee is about \$2500 to \$3500, maybe \$1800. Anywhere from \$1800 to about \$3500 or so.

Howard Farran: Okay I'm going to go home and raise my fee today on that one. So 95% coverage on an \$1800 to \$2500 oral sleep appliance. Is that including them taking home the sleep- the home study?

Rose Nierman: Well medical will pay for the exam and let's say you do a Panorex as well, medical will pay for that, for the sleep apnea. You probably would include the home sleep test in that exam code.

Howard Farran: Okay.

Rose Nierman: Some dentists bill the home sleep test to medical but some just include it in that exam code.

Howard Farran: Okay so then what would be another procedure? A TMD? Are you taling about an oral appliance, a flat plane acrylic appliance?

Rose Nierman: Sure if the patient comes in with pain, not just bruxism, has TMJ pain or signs of TMD symptoms then that could be billed to medical. That should be probably- I mean I have practices that get 80 or 90% of the insurances to pay for that.

Howard Farran: And what kind of fee?

Rose Nierman: It's a little more for the TMD appliances, we'll see anywhere from \$1000 to about \$2000 for TMD.

Howard Farran: Wow I'm must have the lowest fees in the country. And then anything else being billed in TMD?

Rose Nierman: The exam and the x-ray and the follow up appointment.

Howard Farran: Really?

Rose Nierman: Yeah. In some areas, about maybe 50 or 60% of the medical might pay for TMD and in other areas you'll see better, but most of the time it should be billed to medical if it's for TMD.

Howard Farran: Over dental?

Rose Nierman: Yes.

Howard Farran: And what about- the fastest growing area in dentistry now is CBCT's. Talk about that.

Rose Nierman: Well there are medical codes for that and keep in mind, as we've mentioned earlier, you do need a diagnosis code, so you'll have to select whatever the diagnosis code is. If a patient came in and you took the cone beam and you see a cyst, you could bill under that, or TMD or bone atrophy, you know, all kinds of different things but your key is to have a diagnosis.

Howard Farran: What about pericoronitis from wisdom teeth?

Rose Nierman: It's possible that that could be billed to medical.

Howard Farran: Are a lot of oral surgeons billing CBCT's to medical insurance for wisdom teeth?

Rose Nierman: And a lot of general dentists are too.

Howard Farran: Are they paying for the removal of the wisdom teeth too?

Rose Nierman: Generally- probably more than 50% the medical policies will pay for impacted wisdom teeth.

Howard Farran: Wow so-

Rose Nierman: Either completely or partially bony.

Howard Farran: So there's 5000 oral surgeons in the United States, what per cent of them do you think bill medical?

Rose Nierman: Not as many as I thought. We work with general dentists, we don't have that many oral surgeons on board, our market is general dentistry but I am seeing that not as many oral surgeons bill medical as I originally thought but they are billing for the cone beam for sure.

Howard Farran: They are billing medical.

Rose Nierman: Yeah.

Howard Farran: So is your business starting to boom because of CBCT?

Rose Nierman: Oh absolutely. Yeah.

Howard Farran: Do you see that as a game changer?

Rose Nierman: Oh absolutely. A few years ago medical didn't understand why a dentist would have a CT scan in the office, so they weren't paying very well. They are starting to pay a lot better for that now, so that's definitely-

Howard Farran: What is the fee for a scan?

Rose Nierman: Usually the insurance will pay anywhere from \$400 to \$800.

Howard Farran: \$400 t0 \$800 for a CBCT scan?

Rose Nierman: The average is around \$400.

Howard Farran: And go through the indications for it again?

Rose Nierman: Well again, I mean whatever diagnosis the patient comes in with, or what you see on the CT you've got to have a diagnosis code, whether it be abscess or cellulitis or could be a cysts, like a bone cysts, could be a good medical necessity.

Howard Farran: And you were also talking about medical billing for sedation? You said especially for kids?

Rose Nierman: Yeah.

Howard Farran: So talk about that.

Rose Nierman: Well prior to the affordable care act it was hard to get sedation paid for because the insurance would be well, we don't see why the patient needed sedation during that procedure. The affordable care act mandates in every state that sedation be covered for kids, so that's really been a game changer.

Howard Farran: Specifically for kids in dentistry? Or just kids for any procedures?

Rose Nierman: Dentistry.

Howard Farran: You know I raised four boys, so we literally lived in the emergency room and I was always amazed at how a dental office is so more sensitive with nitrous oxide and topical anesthetic and trying to be pain free when the emergency rooms didn't even make an attempt. I mean they didn't have nitrous, they didn't even try not to be traumatic. It was a totally different atmosphere.

Rose Nierman: They just go in and do whatever.

Howard Farran: Oh yeah, and then you said bone grafting and implants. That was totally news to me.

Rose Nierman: Yeah medical is more likely to pay for the bone graft than the implants, although I've seen them pay it if the patient is medically compromised. Let's say a patient has severe bone atrophy of the maxilla or the mandible that would be a reason that they pay but only if the patient has difficulty masticating, chronic mouth sore, something that shows medical necessity.

Howard Farran: So walk me though I'm an office, we've never done this before, this is the first time hearing about it, I'm listening to you now, how would I get started in something like this? How does someone get trained? How is this going to work? How hard is this going to be for my front desk and my interns, my front house staff to do this?

Rose Nierman: Well there is a learning curve to medical billing because of the diagnostic codes and what practices don't realize is that it's all about your documentation, so you would have to have the right narratives for each patient. It can't be like just one template letter you send in for every patient and so Dentalwriter helps because it has a questionnaire, let's say for sleep apnea or TMD, or oral surgery, there's a specific questionnaire, specific exam form, you plug in the finding and it generates your report of medical necessity if the treatment is in fact medically necessary.

Then when you say the diagnosis, chairside and the plan, it's going to link the procedure and the diagnosis code to the medical claim form and put those in your narrative. So you know, big part of what we do is record keeping and documentation and I can't stress enough, if you're going to bill medical you want to have that documentation. You don't want the insurance coming back and saying you know, we changed our mind and if you have really good documentation of medical necessity that's going to help a lot. It'll help you get reimbursed, but if the insurance were to come back and say we want to look at this, you've got yourself covered.

Howard Farran: So this is something you would recommend the doctor using the software to put in the-

Rose Nierman: Yeah the team would use it, the way it works is the patient can actually fill out the questionnaire online and then there's symptoms and medical history we'll download into Dentalwriter and while the dentist is doing his or her exam the assistant could be plugging in the exam findings chairside. And then when you get up and walk out the room you've got your narrative report and your medical claim all generated.

Howard Farran: And then is this electronic claims or is this something you have to print out?

Rose Nierman: You can print it or do electronic claims.

Howard Farran: Through you? Through Dentalwriter?

Rose Nierman: Yeah.

Howard Farran: And what per cent would you say are going through electronic claims versus printing out and doing the US Mail?

Rose Nierman: I think more of our practices use paper than probably electronic.

Howard Farran: Really?

Rose Nierman: Probably yeah. More and more are getting up on electronic.

Howard Farran: Yeah. I would think you would definitely want to do electronic.

Rose Nierman: Yeah that's what we recommend.

Howard Farran: So what would you recommend that- first to do, do you have a demo at Dentalwriter.com that shows all this?

Rose Nierman: We do. We have a short demo and then what we do is we set up a live demo with the doctor or the practice administrator and we can show the practice then what it's all about.

Howard Farran: So how do I go about getting a demo?

Rose Nierman: Just go to Dentalwriter.com and request a demo. There's a place to request a demo.

Howard Farran: And will they actually get you or will they get one of your?

Rose Nierman: Sometimes.

Howard Farran: Sometimes they even get you?

Rose Nierman: Sometimes they get me.

Howard Farran: It's got to be their lucky day?

Rose Nierman: Yeah. Thank you.

Howard Farran: So what else do you want to educate for someone who's never done this? They're saying oh come on Rose, I'm busy, and I'm overwhelmed, really? Pitch me more on why they should be doing this.

Rose Nierman: Well I think it helps with case acceptance. You're going to have more patients being able to accept the treatment whether it be implants or bone grafting or any type of oral surgery or sleep apnea or TMD. People are very insurance conscious right now and if the medical pays, it's also going to save their dental benefits for dental procedures.

Howard Farran: Yeah and I have a MBA from Arizona State University and the one thing they teach in economics is price is the most variable. Do you know why Singer is the biggest brand name is sewing machines?

Rose Nierman: No.

Howard Farran: Because there was a ton of sewing machines out there but it was old man Singer who realized all these waves of Irish immigrants. I'm like 100% Irish- four grandparents and eight grandparents, I'm so Irish, and they were coming over by the boatloads and he realized that everybody was selling sewing machines but if he sold them at credit for a dollar a week, he could get a job for three dollars a week and so he was the only one that offered installment credit and so Singer just took over the whole market.

Rose Nierman: Wow, that's amazing.

Howard Farran: Same thing, everybody will tell you about Henry Ford's Model T, and you're saying well what ever happened to Model T? Well it got crushed by General Motors because General Motors offered- they did two things; instead of just the Model T, they offered five price points- Chevy, Pontiac, Buick, Cadillac but they offered installment credit. Henry wanted his \$668 right now and GM said installment credit, so when a dental office offers credit like CareCredit, then they're putting out more disease because more patients use installment credit and if we can get a third party health insurance or dental insurance to help pay for that, you're actually going to be a better dentist if you can get your customers a lower price, third party insurance installment credit, you're going to fight more disease.

Rose Nierman: Absolutely and some of the things we're billing to medical like the TMD is life changing. Tooth replacement of course is too, and sleep apnea treatment. If you can get more patients treated for that you're really being a great practice and helping your patients and I think if the patient knows their medical is going to help out at least with something, although sometimes they pay very well, then they're more likely to go through with the treatment.

Howard Farran: And one thing I want to remind the dentists of is- a lot of dentists want a special niche market of like full mouth rehabs on the ridge or cosmetic dentistry, big cases on rich women or whatever, but I always think when they accept us in dental school, they were thinking about public health dentists. They were thinking of someone that could treat a 2 year old and 102 year old and a rich man and a poor man and a middle class and if you can afford to do a root canal, great, but if you need an extraction, great.

I don't think a lot of these dentists would have got accepted at dental school if they told the dental school what they planned on doing with their degree, you know what I mean?

Rose Nierman: Interesting.

Howard Farran: And I see it as, we treat people, and we can't be judgmental and we can't care where they come from and anything we can do to help them be disease free is what we do. So what else do you want to tell my viewers? What else do you want to-talk to the office manager and the receptionist right now. What if I'm a receptionist and I've been using Eaglesoft and Dentrix for 10 years. I know that system. How long is it going to take me to learn Dentalwriter and what's the learning curve on something like that?

Rose Nierman: The learning curve on medical billing can take a long time but it's going to go a lot faster with Dentalwriter because within a few hours of just looking at the questionnaires and exam, clicking in the findings from those, it's already going to tell you what diagnosis code and what procedure code to use so I think it would take a lot of research without it. Probably, we see practices get up and running within a few hours.

Howard Farran: What type of training do you offer? Is there any online- first of all how much is Dentalwriter? Is it just one system or is there different types of packages?

Rose Nierman: It's a complete package with all the different modules with the TMD, sleep apnea, oral surgery all in one. It's \$5000 to get started with it and there's the \$99 a month is for the updates and support and the help center and training. We've got great training. We've got a great team of technical people and great trainers as well. So there's all kinds of videos; quick videos, longer videos in the help center. We have a

study club on Tuesdays where we have dentists as guest speakers and we'd love to have you come on and be a guest speaker sometime too.

Howard Farran: Anytime, it would be an honor.

Rose Nierman: And those are recorded and they're all about medical billing for TMD or how to treat sleep apnea or how to treat TMD or medical billing for all kinds of things. They're really good. There's 50 of those recorded study clubs now. We've worked with the best dentists, I mean we really love the group of dentists that we work with and a lot of my mentors are doing study clubs for us now.

Howard Farran: How long are these study clubs? How long is each one?

Rose Nierman: One hour on Tuesdays.

Howard Farran: And you have 50 recorded ones?

Rose Nierman: Yes we do.

Howard Farran: Wow that's a huge library. So do you do them on Skype like we're doing?

Rose Nierman: We actually do them on WebEx but you know we might start doing them on Skype.

Howard Farran: Yeah Microsoft bought Skype for \$8.9 billion, so hopefully- I don't know if they're doing good things with that or not. So if I give you five grand how long do you think it takes the average person who buys this for five grand to bill five grand worth of procedures that they get paid for and get their money back?

Rose Nierman: Oh once they send their first case in, I mean it'll probably just take them a few hours to get up and going. We actually walk the practices through the Dentalwriter one on one and so they have a couple of hours of our time just to get started and then they can watch the videos or call or get more training as well. So really within a few hours, once you send the claim in its very much like dental. If you send your letter of medical necessity with the claim it's going to be paid a lot faster.

Howard Farran: But I was wondering how long it takes the average dentist to actually bill \$5000 worth of stuff?

Rose Nierman: Oh, well-

Howard Farran: Is that a month, three months?

Rose Nierman: One month.

Howard Farran: So in one month they probably get their investment back?

Rose Nierman: I would think so, yeah.

Howard Farran: Not many businesses can say invest a dollar and you'll get it back in 30 days.

Rose Nierman: Yeah.

Howard Farran: That's a hell of a good return.

Rose Nierman: Most dentists aren't sending their TMD appliances to medical and so if you do actual TMD, not like a suck-down bruxism appliance, but TMD appliances, those should go to medical. Lots of different things.

Howard Farran: And I'm embarrassed to say this Rose but we have viewers and listeners, viewers on Dentaltown, Youtube or listeners on iTunes from literally, from here to Equatorial Guinea and Kathmandu, Nepal – is this only for US?

Rose Nierman: Yes it is.

Howard Farran: So it's only US, so if you're like- it doesn't do Canada or Australia or?

Rose Nierman: Well actually we have quite a few practices in Canada using it because they like the report writer. The medical billing doesn't translate but Dentalwriter does nice narrative reports and we have clients in Australia, in England, in Canada who use that part of the Dentalwriter.

Howard Farran: Okay so they can use the narrative diagnostic part?

Rose Nierman: That's correct.

Howard Farran: And then transfer that to their own country's health insurance?

Rose Nierman: Absolutely. Another good use of the narrative reports is to send them to the physicians that the patient has and that gets the word out about this treatments that you're doing and it's a great way to build relationships with physicians.

Howard Farran: I think it's always amazing whenever I'm lecturing in like China or Brazil, where the dentists just look confused like well, they just can't believe that anybody else would pay to fix your body because they're like well, if you drink Coca-Cola and don't brush and you need a cavity, why would anybody else pay for this? And if you smoke cigarettes and don't exercise and drink whiskey, why is it the governmentit's kind if indefensible because you don't really have a good answer. I mean I'm responsible for my car, I'm responsible for my house, but when it comes to my body I can abuse it all day long and someone else is going to pay for it. Rose Nierman: That's interesting, I've never thought of it that way.

Howard Farran: Yeah the Chinese don't get it the most. They just go like well you're incentivizing bad behavior. If you're smoking, drinking, if you're not taking care of yourself, you should pay for it. You should learn your lesson. Nobody- only about 20 socialized medicine countries buy into this someone else should be paying for your routine chronic neglect diseases, you know. So what else do you want to talk about? Have you covered it all? Is there anything else more you want to say?

Rose Nierman: Well I think some of the office administrators are probably thinking, you know we had the accident case who came in, you know, that patient who had an accident to teeth maybe six months ago. We give our seminars, they're like how far can you bill back, because we have this case we want to bill. Usually you can bill within a year, so if you think of any accidents to teeth, that should be billed to medical as well.

Howard Farran: And it's amazing because our fellow chiropractors have mastered billing accidents. I mean injuries, car wrecks and I mean- so you're talking about just auto accident, or you're talking about?

Rose Nierman: No not just auto, you know if someone's on a ladder and they fall from a ladder and they're missing teeth or break teeth, there's codes for that. There's codes for missing teeth due to trauma, broken teeth and then there's codes for fall from ladder, fall from playground, all kinds of codes. Fall from animal.

Howard Farran: Does insurance really- does it matter if you fell off a ladder at work versus at home?

Rose Nierman: Well if it would be at work it would be worker's compensation you would bill. Sometimes at home it might be Home Owner's but it could be the medical too.

Howard Farran: Are you seeing a lot of worker's comp claims? A lot of people use it for worker's comp?

Rose Nierman: We see that for TMD.

Howard Farran: What about domestic violence? What about your husband knocks your front tooth out?

Rose Nierman: Well that would generally be covered under the medical.

Howard Farran: There are codes for domestic violence?

Rose Nierman: There are.

Howard Farran: My last domestic violence case- front four teeth were knocked out but what was bizarre, he punched her so hard in the chest, she had a split and they had to put like six staples in. Could you imagine the force of a punch that just vertically split the skin above her sternum? I mean its crazy- but medical insurance would be paying for domestic violence?

Rose Nierman: Yeah.

Howard Farran: With the auto accident, would you be billing that to the auto insurance policy?

Rose Nierman: Right. Yeah if it's a car accident it would be auto.

Howard Farran: And all of this is on your Dentalwriter?

Rose Nierman: Yeah.

Howard Farran: So also- and you have phone operators for tutorials- if someone's stuck at 9 o'clock on a Monday, they can call and talk to somebody?

Rose Nierman: Absolutely. We've got a great tech team.

Howard Farran: That's amazing. Right there in Jupiter.

Rose Nierman: Yeah right here in beautiful Jupiter, Florida. And we give seminars right here too. We give them all over the country and some in Canada but we give a lot of seminars right here in South Florida, in Jupiter Florida, which you fly into the West Palm Beach airport. Very nice. Very nice area.

Howard Farran: I've always wished you would put that course on Dentaltown.

Rose Nierman: Yeah I think I would love to do that Howard.

Howard Farran: Really? How long is the course? Is it an all day course or half day course?

Rose Nierman: We have a half day cross coding course, which is medical billing for dentistry. We have an all day one. Yeah so it could be any length of time. I would love to do that. Maybe like a three of four hour course I think would be a good starter.

Howard Farran: Well this is what I tell people.

Rose Nierman: But they're usually an hour.

Howard Farran: You know being a dentist for 27 years and all my friends are dentists what I tell them is this- before dentists buy, like talk about a consultant. They're never

going to give 30 grand to a consultant to find out what's behind mystery door number three, so the consultants that are the most transparent, they get on Dentaltown, put on their courses- because the dentists might be thinking well I don't want to give you 30 grand and then you come in and say drop all insurance and be a cosmetic dentist or something that I don't want to do.

So they see the consultants and a lot of them are secretive and they don't tell you what they're doing or anything and other ones are transparent and they say oh, I like this person and I believe all that and actually what they're paying for is just for you to come in and implement it. They're paying for accountability, they don't want any mystery.

So for me, I think for you the more courses you put on Dentaltown that their front desk and office manager and the dentist can watch the whole thing and every question answered, then what they say is okay I get it, yeah this will work, I'll do it. Then they'll give you five grand. But to give five grand and have all these wonderings, you know, it's kind of like what they teach in sales.

I'll never forget, my dad made me go- one of his buddies had a car dealership and I was like twelve, I had to go sit through a three day weekend training to sell cars. I'll never forget this one example, somebody walked in there and a young salesman; she said I like this car because it has a moon roof. And he said no, no, no that's not a moon roof, that's a sunroof. And then she's like oh my God, did I want a moon roof or a sunroof, so she turned around and left, and Mr. Donovan is saying she wants a hole in the top of the car, who cares if it's moon, sun- why didn't you get in there and show it to her? And if she sat in there and liked the way it opened and closed she would have bought the car. That's the way I think dentists minds work.

They want to see all the details and any little unanswered questions, they're going to have anxiety and not want to sign the dotted line and once you've dotted every I, crossed every T and him and his office manager and his front desk and his assistant are saying yeah, we should do that. And then you'll get the check in the mail.

Rose Nierman: Yeah I agree. I'm like you- all my friends are dental people, dentists and dental team and you know, I think the more sharing you are and the more transparent and the more information you give out, the more trust there is, so definitely. Even when we do the demo of the Dentalwriter you'll learn something, you'll learn about medical billing and see some good codes to use and everything, so. Definitely, I'd love to do a course on Dentaltown.

Howard Farran: Please, let's do it. Send me an email. <u>Howard@Dentaltown.com</u>, the guy in charge of that is Howard Goldstein, you know Howard Goldstein? He's in Bethlehem, Pennsylvania. We hired him several years ago. Once he hit 30 000 posts on Dentaltown, we said okay, come on, you're not seeing patients anyway, you could only

be on Dentaltown to se e, to have 30 000 posts so we hired him full time but he's in charge of the online CE courses and we would love to have that.

Is there anything else you want to tell these people?

Rose Nierman: No, if anyone has any questions they can contact me and I'll be happy to answer any questions as well.

Howard Farran: And how do they contact you, Rose?

Rose Nierman: They can go to Dentalwriter.com, they can call the 800 number, which is 1800-879-6468 and just ask for me.

Howard Farran: Say that number one more time in case they didn't get it?

Rose Nierman: It's 1800-879-6468.

Howard Farran: And can they email you?

Rose Nierman: Oh absolutely.

Howard Farran: What's that?

Rose Nierman: It's Rose@Dentalwriter.com.

Howard Farran: And that's writer- W R I T E R?

Rose Nierman: Dentalwriter.

Howard Farran: Well Rose thank you for writing the first manual in medical billing, I mean that's a pioneer, I've got to hand it to you. Anytime you're a first in anything, that's just an amazing- you must have an incredibly amazing mind, incredibly amazing pioneer. Thank you for all the earthlings that you've helped get financing so that they could have a healthier body. That's got to make you feel incredibly proud and it's got to be incredibly rewarding to know that you help someone get financing so that they can take care of their body, that's got to be incredibly rewarding.

So thank you for al you've done for so many people, thank you for what you've done for dentistry and Dentaltown and I'm going to hold your feet to that fire and hope that you and Howard Goldstein get some courses up on Dentaltown.

Rose Nierman: Okay will do Howard. Thank you so much.

Howard Farran: Okay and I hope to see you in Jupiter. Next time you're in Phoenix call me up.

Rose Nierman: | will.

Howard Farran: Okay Rose, have a good day.

Rose Nierman: Alright, thank you. Bye.

Howard Farran: Bye-bye.