



Patient Information and Bill of Rights

James B. Edwards College of Dental Medicine



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MUSC COLLEGE OF DENTAL MEDICINE

MISSION

The mission of the College of Dental Medicine is to develop principled, skilled, compassionate and culturally sensitive practitioners and leaders in oral health care, to expand the body of knowledge about oral and related diseases, and to serve the citizens of South Carolina and beyond.

WELCOME

Welcome to MUSC's College of Dental Medicine. We are delighted that you chose us as your dental care providers. The College of Dental Medicine is committed to providing you with high quality and comprehensive dental care. This booklet contains important treatment and payment policy information for registered patients of the College of Dental Medicine. We urge you to take time to read through it carefully, and to direct any questions you may have to your dental care provider.

INTRODUCTION

The primary role of the College of Dental Medicine's Clinical Education Program is the training of dental health professionals. Patients are charged a fee to cover the operating costs and services of the clinic. Treatments provided by student doctors and residents are discounted, however it is important to understand that patients will incur costs related to

treatments rendered at the College of Dental Medicine.

There is a possibility that patients who seek treatment at the College of Dental Medicine may be deemed too complex to be treated by our student doctors or residents. As indicated within our mission statement, this is a teaching institution and not a private dental office. The care performed by our student doctors and overseen by our faculty is done in a manner that gives priority to education. This results in longer treatment time for most of our procedures compared with a private dental office. Patients should consider the amount of time necessary to complete their care at the College of Dental Medicine to make sure this will not impose any undue hardship. The student doctors will also have periodic educational breaks, similar to other teaching institutions. During these times, the patient clinics are not open for routine dental appointments. Our clinics are open from 9:00 a.m. to 5:00 p.m. Monday through Friday throughout the school year, excluding holidays, although times may vary.

HOW TO BECOME A PATIENT

The first step is to schedule an initial examination to determine if your treatment needs would qualify you as a potential teaching case. Initial examination appointments may be made by calling (843) 876-SMILE (876-7645) and asking to be scheduled for a screening appointment.

Teaching cases are selected based on the needs of the clinical education programs. Therefore, not all individuals can be accepted since we have limited capacity in some disciplines and backlogs of patients in others. In the event you are not accepted as a teaching case, we will make a recommendation that we feel is in your best interest regarding what dental treatment to pursue.

If you are selected as a potential teaching case during the screening appointment, your name will be assigned to a student in our Undergraduate or Graduate Clinics, depending on the nature of your case. In addition, at this appointment, diagnostic aids such as radiographs (x-rays) may be ordered. You also will be scheduled for appointments for your dental cleaning and for your comprehensive exam and treatment plan presentation. The fee for this process is non-refundable, but copies of any radiographs (x-rays) taken may be sent to another dentist upon request.

Within a few days of your acceptance as a teaching case, your student doctor will contact you to introduce themselves. Your student doctor, under the guidance and supervision of our faculty members, will complete your remaining treatment needs.

There are separate Admissions Processes for our Faculty Practice (treatments are provided by faculty), Pediatric (children's dentistry) and

Orthodontic Clinics.

Please call (843) 876-SMILe (876-7645) to schedule an appointment in one of these clinics.

PLEASE NOTE: THE COLLEGE OF DENTAL MEDICINE IS NOT OBLIGATED TO PROVIDE ANY TYPE OF CARE, COMPREHENSIVE OR LIMITED, WHICH IS NOT IN THE BEST INTEREST OF THE PATIENT ACCORDING TO THE JUDGMENT OF ITS AUTHORIZED FACULTY.

GENERAL INFORMATION AND BUSINESS POLICIES

PAYMENTS

There is an initial fee to evaluate you as a potential teaching case after your initial interview. This initial fee includes a screening exam and x-rays. The screening exam fee is not applicable for the pediatric (children dentistry) patients. The initial payment must be made with cash, Master Card, or Visa.

Payment is due in full at the time the service is provided. Partial advance payment may be required for some major services and/or treatments.

After the first visit, you may make payments by personal check, Master Card, or Visa. No other payment methods are accepted. There is an additional \$30.00 charge for returned checks.

PLEASE NOTE: PATIENTS WITH DENTAL INSURANCE, MEDICAID AND OTHER SOCIAL SERVICE COVERAGE, SHOULD SEE THE SECTION ON DENTAL INSURANCE CLAIMS IN THIS BROCHURE.

FEE ESTIMATES

Patients will be advised on their recommended treatment and its estimated cost, as well as any alternative treatments. Once the treatment plan has been agreed upon, the patient will sign the treatment plan. The patient will also be given a

copy of the signed treatment plan.

Fee estimates are based on fees currently in force at the time the treatment plan was signed. The fee charged at the time any service or procedure is begun will be the clinical and/or service fee that is currently in effect. Estimated fees are honored for one (1) year unless: 1) the treatment plan requires modification due to changes in the patient's oral condition or patient neglect; 2) the patient does not follow the treatment schedule as directed by his/her student doctor; 3) the patient breaks two (2) or more appointments. If any of these occur, the fees will revert to the most current fee charged for each service.

At each visit, you should be advised of the costs of each succeeding procedure so that you are prepared for the subsequent charges.

PLEASE NOTE: DO NOT HESITATE TO ASK YOUR STUDENT DOCTOR OR THE FRONT DESK IF YOU NEED CLARIFICATIONS.

FEE SCHEDULE

The School of Dental Medicine reviews the fee schedule annually. All student doctors, faculty, and appropriate clinical staff members should be able to discuss fees with you prior to beginning any treatment or service.

Please remember that fees are generally increased annually. If a

patient breaks more than two (2) appointments or if treatment is delayed due to patient availability or finances, the most current fee will be charged.

BALANCES

Failure to maintain an up-to-date balance will result in the College of Dental Medicine withholding service until the balance is paid. If, after the third billing notification, you do not remit payment within ten (10) working days, your account will be sent to collection and you will be discharged as a patient.

DENTAL INSURANCE CLAIMS

THIRD PARTY COVERAGE

Patients with dental insurance are expected to pay for treatment as it is performed. If your carrier allows reimbursement for services rendered by a dental student or resident in our Clinic, the following steps should be taken:

We take assignment on a limited number of insurance programs.

If we do not take assignment on your insurance program, we will provide you with a claim form and instructions on how to file with your insurance carrier.

If your insurance company requires a predetermination for services to be performed, please call (843) 876-SMILE and ask to be transferred to the billing office for assistance.

MEDICAID AND SOCIAL SERVICE

A. South Carolina Medicaid is accepted in the emergency walk-in clinic

B. South Carolina Medicaid is accepted on a limited basis in the comprehensive adult treatment programs

(1) The College of Dental Medicine has a quota (specific number) of Medicaid patients that can be accepted at any given time. If that quota is full, a patient may choose to become a self-pay patient and pay for all services out of pocket (for which Medicaid will NOT reimburse the

patient)

(2) A patient also may request to be added to the Medicaid patient wait list. This list operates on a first come, first serve basis. No exceptions. If accepted, appropriate documentation must be completed.

C. South Carolina Medicaid is accepted on a limited basis in the specialty clinics

D. South Carolina Medicaid is NOT accepted in the Orthodontics clinic

E. Both adult and pediatric patients may still be seen as self-pay in all clinics.

F. Patients are financially responsible for all non covered services at the program (student, resident, or faculty) fee rate and for all services after the annual maximum benefits have been exhausted.

G. The College of Dental Medicine does NOT file Medicaid claims for treatments provided in the past. Should a patient not provide policy information prior to treatment, they are financially responsible for all treatment already completed regardless of the treating clinic.

H. Out-Of-State Medicaid is NOT accepted in the College of Dental Medicine Clinics notification.

PLEASE NOTE: YOUR MEDICAID CARD MUST BE VALID AT THE TIME OF TREATMENT.

TREATMENT POLICIES

COMPREHENSIVE CARE

Patient selection is based upon the educational needs and resources of the College of Dental Medicine.

If you are accepted as a teaching case, you will be given additional appointments to determine your personal treatment plan(s), depending on the complexity of your case. Two treatment plans may be presented. One will be an optimal plan to provide the complete restoration of your mouth. A second plan may be presented which will offer you a less expensive alternative. It may include (for example) the use of removable appliances rather than crowns (caps) which remain attached to your teeth.

A third plan to provide the minimal treatment necessary to eliminate disease in your mouth may be presented. Please bear in mind that many of these less expensive alternatives also represent less permanent solutions to your dental health problems. To further assist you, in some cases, treatment may be phased so that the better treatment can be affordable.

Each treatment plan will be thoroughly explained to you so that you understand what you can expect, how much each plan will cost and what your risks are, both physically and financially.

Patients will not have the option to select only limited portions of the recommended dental care

comprehensive treatment plan, or to split services between the College of Dental Medicine and a private dentist.

Exceptions are patients referred by outside dentists (dentists in the community) to the College of Dental Medicine for specialty treatment such as endodontic (root canal), periodontic (gums), oral surgery, implants, orthodontics (braces), and oral pathology services. These patients will be assigned to the relevant graduate program/s (residency) and will not receive comprehensive care. Following completion of the required specialty care, these patients will be referred back to their dentist in the community.

RECORDS

The College of Dental Medicine owns all dental records. You, as the patient, have a right to view these and obtain copies for insurance purposes or for your personal records. Copies of your records and radiographs will be provided to you or forwarded to another practitioner upon your signed written request. There may be a nominal fee charged for the duplication of radiographs which must be paid prior to the copies being released.

TREATMENT POLICIES *continued*

APPOINTMENTS

Treatments in the College of Dental Medicine's undergraduate clinical program are provided by students. For patients of record, Patient Service Representatives (PSR) will schedule appointments based on the availability of your assigned student.

Clinic starts promptly at 9:00 a.m. for the morning session and at 1:00 PM for the afternoon session. You may be asked to come later in the afternoon for shorter procedures. You should plan to have at least 3-4 hours available for each appointment. Since you are being treated by student doctors, your appointments will be longer and possibly fewer procedures may be performed than if you were treated by a private dentist. Patients with the most flexible availability will be the easiest to assign to our student doctors. If your availability is too limited, you may be dismissed from the program. In this event, appropriate referrals will be made to ensure access to care.

PLEASE NOTE: ARRIVE AT THE CLINIC CHECK-IN DESK AT LEAST 15 MINUTES PRIOR TO YOUR SCHEDULED APPOINTMENT TIME.

APPOINTMENT CANCELLATION

Please remember that your student doctor depends on you to show for your appointments as there is a limited amount of time for your student doctor to achieve the necessary clinical experiences for graduation. Appointments should be cancelled only if it is absolutely necessary and at least 24 hours in advance. Patients should call (843) 876-SMILe to cancel any appointments. A cancellation less than 24 hours before treatment, or a no-show for scheduled treatment is considered a broken/failed appointment. Three (3) documented broken/failed appointments will result in your treatment being terminated and dismissal from the College of Dental Medicine clinic programs.

There is a possibility of the school cancelling and/or rescheduling patients' appointment due to unforeseen circumstances, such as a weather-related emergency closure.

URGENT DENTAL CARE - DENTAL EMERGENCIES

If you are experiencing any life-threatening situation, please call 911 or present to the nearest Emergency Room.

DENTAL EMERGENCIES DURING REGULAR SCHOOL HOURS

Patients of record who have a dental emergency during normal school hours should call (843) 876-SMILe for guidance. Patients may also come to the walk-in clinic located on the first floor in the College of Dental Medicine, Monday through Friday at 8:45 AM (except Tuesday) or 12:45 PM.

hospital emergency room will not replace or repair fillings, crowns, or other dental appliances. A standard hospital fee for emergency visits may be applied. These fees are the patient's responsibility.

DENTAL EMERGENCIES DURING SCHOOL VACATIONS/ HOLIDAYS

Urgent dental care for active patients of record is provided by the College of Dental Medicine during vacations and holidays on select week days (not weekends). A fee may apply. For more details regarding urgent dental care during vacations/holidays please call (843) 876-SMILe.

DENTAL EMERGENCIES AFTER HOURS

College of Dental Medicine patients of record who need to be seen for dental emergencies involving severe pain, bleeding, and/or swelling, that occur after hours, i.e., evenings, weekends, or school holidays when urgent dental care is not provided within the College, can call (843) 792-2123 and ask for the dental resident on call. Please be advised that the

PATIENT INQUIRY

If you have any questions about your treatment, fees, or rights, you should call (843) 876-SMILe and ask to be transferred to a Patient Care Coordinator.

Patients of record may also email their questions or concerns to cdm-feedback@musc.edu, mentioning their full name and address. Problems of a financial nature should be directed to the Billing Office. Call (843) 876-SMILe and ask to be transferred to the billing office.

Occasionally, unforeseen complications result in unplanned and drawn out treatment. We will make every effort to avoid or minimize these occurrences. If, at any time, you feel that you have been unfairly treated, please call (843) 876-SMILe and ask to be transferred to the Patient Care Coordinator for further instruction.

PATIENT BILL OF RIGHTS AND RESPONSIBILITIES

The College of Dental Medicine accepts all patients with dental needs considered appropriate for teaching, regardless of race, religion, gender, age, disability, sexual orientation, ethnic or national origin. We want you to know that you have rights as our patient, and encourage you to let us know if you feel we have not lived up to our pledge, or if you feel that your rights were not honored.

However, we reserve the right to refuse treatment, except to relieve pain or protect life, to any person for the following reasons:

- The patient has a history of not discharging their financial obligations to the College of Dental Medicine.
- The patient has a history of not abiding by the patient responsibilities listed herein.
- The patient's conduct is disruptive or compromises the rights of others.
- The patient exhibits behavior which is considered inappropriate. This includes the verbal and physical abuse or intimidation of a student, resident, staff, another patient, or faculty member.

PATIENT'S RIGHTS

Patients have the right to:

1. The most appropriate considerate, respectful, and confidential care the College of Dental Medicine can provide.
2. An explanation of the risks and benefits of recommended treatment, and the risks of receiving no treatment
3. Emergency treatment and comprehensive patient care
4. Receive information about costs and any other information necessary to provide informed consent for treatment/s
5. Treatment that meets the established standards of care
6. Have access to present inquiries, express concerns and/or complaints
7. View and keep a copy of the MUSC Notice of Privacy Practices
8. Access or obtain copies of their

health and/or treatment information. This can be accomplished by calling (843) 876-SMILe and asking for the records department

9. Request restrictions on disclosures of protected health information for treatment, payment, and health care operations

10. Receive an accounting of disclosures of their health information for purposes other than treatment, payment, or health care operations

11. Request amendments to incorrect or incomplete medical information

12. Request alternative (confidential) communications concerning their health information

13. Referral to the HIPAA contact person for concerns about privacy

Along with your rights, you also have responsibilities which are listed on next page.

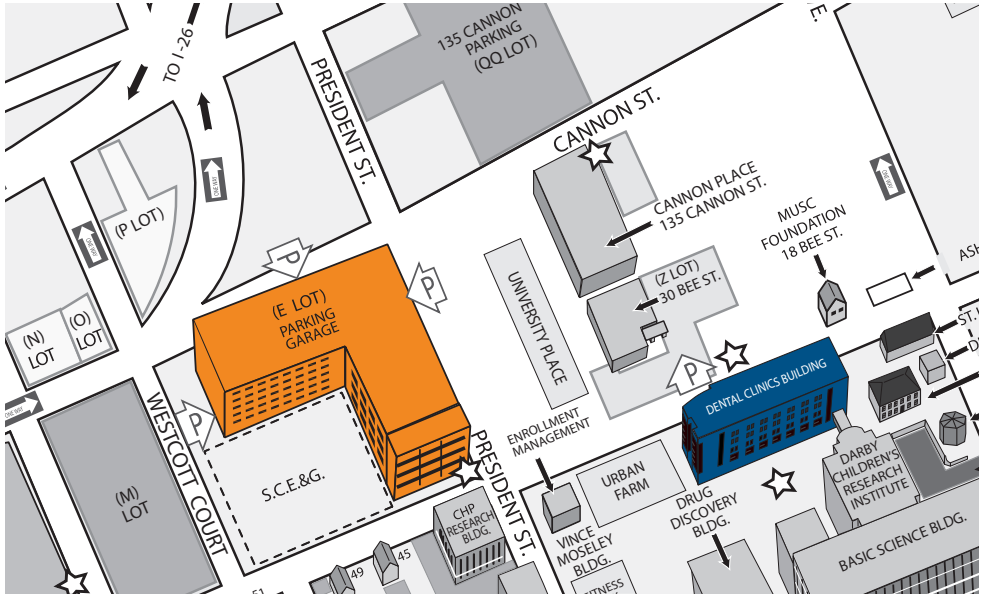
PATIENT BILL OF RIGHTS AND RESPONSIBILITIES

PATIENT'S RESPONSIBILITIES

1. Patients are responsible to arrive in time for their scheduled appointments. Failure to arrive in time for the appointment will lead to appointment cancellation and recording it as a broken appointment.
2. Patients with a health history that reveals a significant health problem, will be given a medical consultation letter for their physician to complete. Patients are responsible to report ALL medical issues, changes in health status, and medications.
3. Patients are expected to pay for services as treatment is rendered. The College of Dental Medicine requires payment in full at the beginning of certain treatments such as crowns, bridges, implants, etc. Patients, who do not comply with the stated financial policy, will be released from the program.
4. Patients must keep their student and the front desk informed of any change in name, address, and/or phone number.
5. To cancel a scheduled appointment, patients must call (843) 876-SMILe at least 24 hours prior to the scheduled appointment. Failure to do so, or not showing for a scheduled appointment will be recorded as a broken/failed appointment.
6. Patients who are uncooperative in their care or exhibit inappropriate behavior will be released from the clinical program at the College of Dental Medicine.
7. A parent or legal guardian MUST be present if the patient is under 18 years of age.
8. Patients should observe, comply with, and follow MUSC and the College of Dental Medicine rules and policies.
9. Children cannot be left unattended in the waiting area during the appointment. Also, other individuals usually are not allowed to be present back in the patient treatment room area.

**THANK YOU FOR BECOMING
A PATIENT AT THE JAMES B.
EDWARDS COLLEGE OF DENTAL
MEDICINE.**

AREA MAP



PARKING

91 President Street, Charleston, SC 29425

DENTAL MEDICINE BUILDING

29 Bee Street, Charleston, SC 29425

DIRECTIONS TO THE COLLEGE OF DENTAL MEDICINE

I-26 FROM THE WEST

1. Take I-26 E toward Charleston
2. Turn Slight Right at Rutledge Ave. exit
3. Turn Left onto Rutledge Ave.
4. Turn Right onto Bee Street
5. Turn Right onto President Street (second traffic light once on Bee Street). Entrance to parking garage is the left

US 17 FROM THE NORTH

1. Take Johnnie Dodds Blvd / US-701 / US-17 South
2. Cross over the Arthur Ravenel Bridge, Continue to follow US-17 South
3. Turn Slight Right at Rutledge Ave.
4. Turn Left onto Rutledge Ave.
5. Turn Right onto Bee Street
6. Turn Right onto President Street (second traffic light once on Bee Street). Entrance to parking garage is on the left

US 17 FROM THE NORTH

1. Take Savannah Hwy / US-17 North/ US-61
2. Cross the Ashley River Bridge
3. Continue to follow US-17 North
4. Stay straight to go onto Cannon Street
5. Turn Right at the first traffic light onto President Street
6. Parking garage entrance is on the right

US 17 FROM THE SOUTH

1. Take Folly Road / SC-171 / James Island Connector
2. Merge onto SC-30E towards SC-61/ Downtown SC-30 becomes Calhoun Street
3. Turn Left onto Jonathan Lucas Street
4. At stop sign turn Right onto President Street
5. After first traffic light, the entrance to the parking garage will be on the left



Changing What's Possible