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High dental surgery bill prompts questions by parent

By Tammie Smith



Lisa Ownby spent weeks trying to get her two young sons approved for complex oral surgery after dentists recommended it.

She also tried to get an estimate of her costs, asking the patient accounts employees at VCU Medical Center what she could expect to pay out of pocket.

"I was told I could not be given a dollar amount of what I'd owe," Ownby said.

She was shocked, she said, when the bills and insurance company explanation-of-benefits started arriving in the mail a month or so after the procedures were performed a year ago with an amount that showed charges close to \$40,000.

"If I had known it would cost \$40,000, I would have said 'No.' They were baby teeth," Ownby said about the hospital charges before the insurance discount.

"It's not even like they were saving permanent teeth. I could have chosen to say, 'I couldn't afford this.' I wasn't given that option," said Ownby, of Williamsburg.

The nearly \$40,000 in charges is before health insurance-negotiated discounts are applied. With the discounts, the cost was more than half of that.

Ownby's dilemma represents a common complaint among patients — how to know what medical care will cost upfront.

A spokeswoman for VCU Medical Center said the university would not comment on an individual case but explained that costs can vary.

"Sometimes the dental cases are not limited to the clinical work. There's a hospitalization required," VCU spokeswoman Anne Buckley said.

As more people enroll in high-deductible health plans, where they pay out of pocket for care until a certain dollar threshold is reached, knowing what services will cost becomes more important, experts say.

However, health care price data, particularly for complex procedures, remains difficult to impossible to get.

One reason is the sheer number of billable items in health care, said Len Nichols, a health care economist and director of the Center for Health Policy Research and Ethics at George Mason University.

"There are a whole lot of prices. There are 8,000 different things for which doctors can be paid and about 10,000 or more things for which hospitals can be paid," Nichols said. "What insurance does for us, at some level, is negotiate with doctors, hospitals and drug companies."

Some states are trying to help consumers by developing databases that collect data on every public and private health care claim paid — medical, dental and pharmacy — and create user-friendly websites that allow searching for cost of procedures.

Virginia lawmakers are considering such a database. Versions of House bill 343 and Senate bill 135 each have passed initial votes and have moved to the other chamber for consideration.

"The ultimate goal is to give people knowledge that they can use when they go for their day-to-day health care needs, so that they will know the value of something, what something costs, how good the quality is," said Del. John M. O'Bannon III, R-Henrico, sponsor of the House version of the bill.

"The business world has been dying for this kind of data," O'Bannon said.

His version of the bill would roll out gradually. The state health commissioner would oversee the initiative, which would use a nonprofit organization such as Virginia Health Information to collect the data and operate the database.

The health insurance industry is not enamored of the bills, said O'Bannon, who expects a final version to be worked out in a conference committee.

For now, Nichols said patients can ask, as Ownby did, what to expect with the caveat that the numbers are not carved in stone.

"What should happen is the clinician should talk them through, here are the things that are possible. And if you had a price list you might know what it would cost," said Nichols, who also said all-payer claims databases would provide such a price list.

"It makes so much sense in a world in which we all agree we are paying too much for health care," Nichols said.

Ownby said she expected maybe a \$1,000 co-pay. She and her husband, who runs a small business, have paid about \$3,000 out of pocket. Insurance has paid about more than \$17,000.

There are outstanding bills of about \$3,400 in hospital charges that she refuses to pay, Ownby said.

Each of the boys had multiple teeth extracted, root canals and dental crowns during outpatient procedures. The charges include operating room time, physician fees for dental surgery and general anesthesia, and supply costs for crowns.

The boys have a condition in which their enamel easily erodes, Ownby said. Amelogenesis imperfecta is an inherited disorder. It causes teeth to be prone to rapid wear and breakage.

"We've seen lots of specialists, in Newport News, a local dentist in Williamsburg," Ownby said.

"I love my kids, but they are baby teeth. It's not like they were going without care. Local doctors were kind of patch-working it, trying to get as much longevity out of those baby teeth as they could. The bottom line is they could have been pulled. We would have done less sophisticated and invasive and aggressive treatment for a lot less money. Had I known it was going to cost that, I would not have done it. I don't have that kind of money."

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