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DENTIST SPOTLIGHT:

Q&A with Dr. Joy M. Collier
Desert Vista Dental in Goodyear

Q: Do you brush and floss as much as recommended?

A: Yes, I do.

Q: Electric or manual toothbrush?

A: Electric. I use my Oral-B at least once a day. It does a much better job than a manual toothbrush. I wish I could get the majority of my patients to use an electric toothbrush. It would help to eliminate a lot of issues.

Q: If you could tell patients to stop doing one thing, what would it be?

A: If you are going to have a glass of wine, coffee or a sugary drink, go ahead and drink it quickly instead of sipping it over a long period of time. Make sure to brush afterward.

Q: What is the best thing about being a Delta Dental dentist?

A: The Contract Compliance Review visits have never been intimidating.

Q: If you were stuck on a desert island, what three items would you bring?

A: My toothbrush, my bikini and my protein bars. I am pretty sure I could find something on the island that can be used for flossing!

If you'd like to be featured in First Impressions or the Delta Dental of Arizona Blog, email marketing@deltadentalaz.com.

JOIN THE GOVERNMENT PROGRAMS NETWORK TO EXPAND ACCESS TO PATIENTS

Delta Dental of Arizona has placed a renewed focus in two key areas in the last few years: (1) providing Arizonans greater access to affordable dental care and (2) ensuring continued growth in an increasingly competitive environment. In support of these efforts, Delta Dental of Arizona will begin to compete for insurance contracts with Arizona health plans that provide dental services for the Centers for Medicare and Medicaid Services (CMS) and the Arizona Health Care Cost Containment System (AHCCCS).

To serve these health plans, we are creating a new Government Programs network that will only be used to administer dental benefits for CMS and AHCCCS members. If we are successful in obtaining contracts for CMS and AHCCCS programs, your participation in the Government Programs network will ensure continued access to these patients.

Administration of Arizona's CMS and AHCCCS programs will be via collaboration between Delta Dental of Arizona and Delta Dental Insurance Company. This will allow us to leverage expertise and scale to improve service levels and administrative costs. We are confident that Delta Dental's involvement in these programs will make dental benefits accessible to more Arizonans, easier to understand and simpler to use.

If you are interested in joining the Government Programs network, call 855.357.8258 or email PR_GovernmentPrograms@delta.org for more information.



CEO's CORNER

Focusing on Preventive
Oral Health

Last month, Delta Dental of Arizona held its annual membership meeting, during which Dr. Bruce Spigner was elected to the Board of Directors and Dr. Brien Harvey, Candace Wiest and David Day were re-elected to the Board. We also discussed key initiatives and market dynamics affecting the company, network dentists and the industry as a whole.

One topic that resonated with dentists in attendance was the introduction of Healthentic dental health reporting. This proprietary tool is exclusive to Delta Dental and uses claims data to examine employees' oral health behaviors and identify opportunities for improving oral health. For example, we know that 34% of Delta Dental of Arizona members failed to visit the dentist in 2015. Encouraging those members to schedule their twice yearly exams and cleanings will result in more patients in your dental offices and healthier smiles, which ultimately saves both the employer and the employee money.

By working closely with brokers and HR administrators to educate them on the oral health of their clients and workforce, we can help increase utilization for preventive and diagnostic dental services and truly be an oral health advocate for our valued customers. We are very excited about this new tool—available to employer groups with more than 75 subscribers at no additional cost—and we hope you are too.

Warmest Regards,

R. Allan Allford
President & CEO

REMINDER: DENTIST CREDENTIALING POLICIES BENEFIT YOUR PATIENTS

Delta Dental of Arizona's credentialing policies help ensure that your Delta Dental patients receive their contracted benefits:

1. Every dentist must be contracted at each participating location he/she works. If a dentist works at multiple locations, he/she must be contracted with DDAZ at each address.
2. All dentists working under the same corporate or tax identification number must be contracted as a participating provider with DDAZ.
3. All dentists at each participating location must have the same network status. This means that all dentists must be certified as exclusive providers or be contracted as PPO/Premier providers.
4. Participating provider agreements must be filed with DDAZ at least 30 business days before the dentist begins treating or seeing patients. Failure to file the contract 30 days prior to providing services may result in the claim(s) being processed as a non-participating provider. If this happens, the check(s) may be sent to the patient. This is also considered non-compliance of your participating provider agreement.

By requiring all dentists at each office to (1) have a signed participating provider agreement on file and (2) have the same network status, we can guarantee subscribers that they will be treated by a Delta Dental dentist.

Questions? Call the Professional Relations team at 866.746.1834, option 5.

DeltaUSA National Processing Policy Updates

The American Dental Association's Code on Dental Procedures and Nomenclature (commonly known as CDT) is updated annually to reflect changes in dental procedures accepted by the dental community. In keeping with these CDT changes, Delta Dental Plans Association (DDPA) also updates the DeltaUSA National Processing Policies. DeltaUSA was designed to provide claim processing consistency for dentists treating Delta Dental patients who work for out-of-state national employers.

Delta Dental of Arizona, along with other Delta Dental member companies, incorporate DeltaUSA National Processing Policies annually. For a copy of the 2016 DeltaUSA National Processing Policies, please visit deltadentalaz.com/dentist/forms-and-resources.asp.

Questions? Call the Customer Service team at 866.746.1834, option 6.

New Appeals Contact at DDAZ

Please make note that we have changed our appeals contact: Claims appeals should now be directed to Naira Chavez, appeals and grievances coordinator. She can be reached by phone at 602.588.3925, fax at 602.548.5089 and email at appealsdepartment@deltadentalaz.com.

More information on Delta Dental of Arizona's appeals process for risk/pooled groups is available at deltadentalaz.com/documents/AppealsBklt.pdf.

Reminder: Oral Surgery Policy Change for Codes D7210-D7999

In order to process claims more efficiently, a detailed narrative explaining the services provided are now required for oral surgery codes D7210-D7999. This could include treatment notes, diagnostic X-rays and/or photos.

Questions? Call the Professional Relations team at 866.746.1834, option 5.

Listing Procedure Codes on Claims Forms

As a reminder, a separate line should be used for each service provided. For example, if the dentist performed three additional X-rays, it would need to be listed on three separate lines in the Services section of the claim form. See illustration below for more information.

| RECORD OF SERVICES PROVIDED | | | | | | | | | |
|---------------------------------|-------------------------|------------------|----------------------------------|-------------------|--------------------|-------------------|-----------|------------------------------|---------|
| 24. Procedure Date (MM/DD/CCYY) | 25. Area of Oral Cavity | 26. Tooth System | 27. Tooth Number(s) or Letter(s) | 28. Tooth Surface | 29. Procedure Code | 29a. Diag Pointer | 29b. Qty. | 30. Description | 31. Fee |
| 1 | 05/01/2016 | | | 3 | D0140 | | 1 | Limited Oral Evaluation | \$50.00 |
| 2 | 05/01/2016 | | | 3 | D0220 | | 1 | Intraoral - First Radiograph | \$15.00 |
| 3 | 05/01/2016 | | | 4 | D0230 | | 1 | Intraoral - First Radiograph | \$12.00 |
| 4 | 05/01/2016 | | | 5 | D0230 | | 1 | Intraoral - First Radiograph | \$12.00 |
| 5 | 05/01/2016 | | | 6 | D0230 | | 1 | Intraoral - First Radiograph | \$12.00 |

Questions? Call the Customer Service team at 866.746.1834, option 6.

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Dentist Direct Phone Numbers

Toll free: 866.746.1834 | Local: 602.588.3982

- press **1** Faxback of eligibility & benefit information
- press **2** Automated claim information
- press **5** Professional Relations - DDS contracts/appeals
- press **6** Customer Service - Claims status/benefits/eligibility



Delta Dental of Arizona
5656 W. Talavi Blvd.
Glendale, AZ 85306

TOP OF THE LIST

Groups acquired since
February 2016 with 75+ employees

MEB Management Services

310 employees

Location: Tucson

Plan: PPO plus Premier

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Visit
everseat.com/deltadentalaz
for more information.

REIMBURSEMENT FOR NON-COVERED SERVICES

According to Arizona Revised Statutes (A.R.S.) § 20-1342.06, a patient's liability for non-covered services is between the dentist and the patient. Delta Dental of Arizona cannot limit the amount the dentist charges or determine the patient's liability for non-covered services.

The statute defines a covered service as a service for which reimbursement is available under a member's policy, regardless of whether the reimbursement is contractually limited by a deductible, copayment, coinsurance, annual or lifetime maximum, frequency, alternative benefit payment or other limitations.

Examples of covered services include:

- Age or frequency limitations
- Alternate benefit is provided based on the contract language or professional review (amalgam benefit provided toward a composite filling, filling benefit provided toward an inlay/onlay/crown, etc.)
- Considered to be a part of a more comprehensive procedure or that of Delta Dental of Arizona's processing policies (local anesthetic, crown lengthening performed on the same day as a crown, etc.)

Examples of non-covered services include:

- Procedures that are not or would never be covered under the plan (oral hygiene instructions, provisional procedures, etc.)
- Major procedures if the plan does not have major coverage
- Basic procedures if the plan does not have basic coverage
- Orthodontic procedures if the plan does not have orthodontic coverage