Fraud or Billing Irregularity?

Insurance fraud is perceived as a victimless crime; however, the estimated losses to this crime are more than $100 Billion every year. Ten percent (10%) of all claims (property & casualty, health, life, workers’ compensation) are assessed as fraudulent. Although there are no comprehensive figures indicated dollar losses in Arizona are being quantified, 10% of all health care and property & casualty claims no doubt comes to a staggering total.

We believe most dentists are honest and willing to correct any billing errors. For example, when we receive a claim for a root canal on a pontic, we do not assume that the dentist has committed insurance fraud. We assume that there was a clerical error on the claim. We will ask you to submit a copy of the treatment note as substantiation of the actual treatment rendered. The dentist is responsible for the accuracy of the treatment information submitted on the claim. If your submit an incomplete claim, we will ask you to provide the missing information that will allow us to determine if a benefit is available for your patient.

Alternatively, if you change a date-of-service to help the patient “extend their benefits”, you have committed insurance fraud because you had intent, knowledge, misrepresented information that DDAZ relied upon in paying the claim.

If you suspect fraud or abuse, please contact: kzatarga@deltadentalaz.com.

Delta Dental of Arizona (DDAZ) and National Electronic Attachment Inc. (NEA) Introduce Special Savings to DDAZ Participating Dentists

Sign up by May 31, & NEA will waive the $200 registration fee!

To get started, visit www.nea-fast.com, and enter the promotion code DDAZZ in the blue promotion code box. For more information call 800-782-5150 ext. 2.

What is NEA FastAttach™?

• NEA FastAttach™ is a simple, secure and inexpensive way to transmit radiographs, periodontal charts, and any attachment electronically.
• NEA FastAttach™ eliminates mail time and saves postage. Your document goes directly into the NEA system for DDAZ to access.
• You can transmit an unlimited number of attachments with NEA FastAttach™ for less than .67 cents per day. Submitting attachments that are not required could delay the claims process.
7th Annual

Health Care Heroes

Nominate your Dental Hero Today!

Nomination Deadline is Friday, May 16th

Health Care Heroes honors dental professionals for exemplary performance to patients, peers, and the community. The Phoenix Business Journal’s Health Care Heroes program honors individuals in the Health Care industry for exemplary performance in his/her given field. If you know of an exemplary dental professional who deserves special recognition, Delta Dental of Arizona would like to encourage you to nominate that individual. You may either nominate them by submitting the requested information on their behalf, or you may choose to nominate yourself. Please note that the nominee MUST have knowledge of this nomination.

To make a nomination, please follow these simple steps:
2. Submit a 500 word (or less) narrative that includes the following components:
   - How does the nominee go beyond his/her standard job responsibilities?
   - What accomplishments make this nominee outstanding?
   - What impact has the nominee had on the workplace and/or community?

Please note that anything beyond 500 words will be deleted from the essay before being submitted to the judges for review.
3. Submit up to two letters of recommendation from colleagues. This portion of the nomination is optional but strongly encouraged.

Please submit narratives and letters via e-mail to: rlight@bizjournals.com. Be sure that the subject line of the email reads:

Health Care Heroes – Nominee Last Name
(i.e. Health Care Heroes – Smith)
OR by US Mail to
Phoenix Business Journal
Attn: Health Care Heroes
101 N. First Avenue, Suite 2300
Phoenix, AZ 85003

If you have questions regarding Health Care Heroes, please contact Events Director, Rebecca Light at rlight@bizjournals.com or 602-308-6531.

AARP Plan Clarification

We receive many questions from dental offices regarding the AARP plan. This plan is administered through Delta Dental Insurance Company (DDIC) and not DDAZ. All claim and benefit inquiries should be addressed directly with DDIC by calling the phone number listed on the back of the members card. With the AARP Dental Insurance Plan, the member has the choice of visiting a Delta Dental PPO dentist, Delta Dental Premier dentist or any licensed dentist. The following table further explains the differences when the dental office is a Delta Dental PPO, Premier or Non-Participating dentist.

Direct Deposit EOP’s

For those Dentists or Dental offices that participate with Delta Dental of Arizona’s Direct Deposit program, please be aware that these EOP’s are only available to us for six months. After that time, we are not able to retrieve EOP’s older than 6 months. We strongly suggest that you keep copies if you feel that you may at some point need to refer back to any EOP.

Contracts

When filling out a contract, whether its for updating your filed fee’s or adding an associate etc, the contract must be completed in ink (this is a legal document) and all required attachments including an updated malpractice for all dentist on the contract must be attached. Any contract that is not complete will be sent back and this will only delay your updates.

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 - DDS contracts/appeals - Professional Relations
Press 6 - Claims status/benefits/eligibility - Customer Service
The NPI Is Here. The NPI Is Now. Are You Using It?

All dentists involved in electronic transactions must have an individual NPI. If you submit claims as an individual and receive payments in either your name or under your social security number (or other identifier unique to you as an individual), the individual NPI is the only number you’ll need.

Organizational NPIs are needed for corporations and other business entities that want payments made to their business or corporate names or under their tax identification numbers (TIN). On a claim, the organizational NPI identifies the payee, and will usually be submitted in conjunction with an individual NPI to identify the dentist who rendered treatment.

Say, for example, you and your partners own Valley Dental Center with five dentists on staff. Your office submits claims as Valley Dental Center, Inc. To continue submitting claims and receiving payments from carriers under your corporate name, you’ll need to apply for an organizational NPI. All five of the treating (rendering) dentists in your practice group should also apply for individual NPIs. Once everyone has their numbers, they should be used consistently on electronic claims to ensure efficient, accurate payment and HIPAA compliance.

Did you know...

1) When you submit an incorrect procedure code, tooth number, date of service, treating dentist or patient information and you are requesting a correction to that information submitted, DDAZ will require a copy of the patient’s chart notes to accompany the corrected claim.

2) This type information will be accepted verbally over the phone, when omitted from the original claim submission:
   a) missing tooth #; b) quadrant; c) arch; d) valid CDT code when invalid code is originally submitted; e) perio therapy history; and f) FTSS only from the parent or legal guardian.

3) Speaking with one of our Customer Service Representatives does not guarantee benefits or the payment of a claim? DDAZ strives to provide service in the most efficient and expeditious manner by offering other alternatives when accessing your patient’s benefits, eligibility and claim status information. In addition, we also offer:

   a) Updated faxback option by dialing 866 746 1834, and then selecting option # 1
   b) Dentist Connection ‘secured’ website, www.deltadentalaz.com offers benefit/eligibility/claims status options
   c) CDT Lookup feature www.deltadentalaz.com secured website where you can review rules relative to specific treatment codes.
      1). Enter the code
      2). Click on Submit for the CDT description of the code
      3). Click on the code to determine whether any attachments are required when submitting this treatment
      4). Standard Rules are displayed towards the bottom of the page
   d) No greater than 10 workday turnaround predetermination process

At Delta Dental, there’s no need to send letters or e-mails to all of our individual Delta Dental member companies notifying them of your number. You only need to report your NPI to us. We will share your information with the rest of the Delta Dental system. Simply submitting an NPI on claims will not do the trick. To report your NPI, please mail or fax us a copy of the letter you received from the NPPES when they assigned an NPI to you. Letters can be sent to:

Delta Dental Professional Relations
Fax: (602)-588-3910
or mail a copy to: P O Box 43000
Phoenix, AZ 85080-3000

Once you’ve sent us your NPI you can begin using it on claims. To ensure that claims are processed quickly and accurately, you’ll need to use a claim form that accommodates the NPI.

If you have questions, please contact our Provider Relations Department at (602) 938-3131 or (800) 352-6132, Option 5.

Did you know...

1) When you submit an incorrect procedure code, tooth number, date of service, treating dentist or patient information and you are requesting a correction to that information submitted, DDAZ will require a copy of the patient’s chart notes to accompany the corrected claim.

2) This type information will be accepted verbally over the phone, when omitted from the original claim submission:
   a) missing tooth #; b) quadrant; c) arch; d) valid CDT code when invalid code is originally submitted; e) perio therapy history; and f) FTSS only from the parent or legal guardian.

3) Speaking with one of our Customer Service Representatives does not guarantee benefits or the payment of a claim? DDAZ strives to provide service in the most efficient and expeditious manner by offering other alternatives when accessing your patient’s benefits, eligibility and claim status information. In addition, we also offer:

   a) Updated faxback option by dialing 866 746 1834, and then selecting option # 1
   b) Dentist Connection ‘secured’ website, www.deltadentalaz.com offers benefit/eligibility/claims status options
   c) CDT Lookup feature www.deltadentalaz.com secured website where you can review rules relative to specific treatment codes.
      1). Enter the code
      2). Click on Submit for the CDT description of the code
      3). Click on the code to determine whether any attachments are required when submitting this treatment
      4). Standard Rules are displayed towards the bottom of the page
   d) No greater than 10 workday turnaround predetermination process

At Delta Dental, there’s no need to send letters or e-mails to all of our individual Delta Dental member companies notifying them of your number. You only need to report your NPI to us. We will share your information with the rest of the Delta Dental system. Simply submitting an NPI on claims will not do the trick. To report your NPI, please mail or fax us a copy of the letter you received from the NPPES when they assigned an NPI to you. Letters can be sent to:

Delta Dental Professional Relations
Fax: (602)-588-3910
or mail a copy to: P O Box 43000
Phoenix, AZ 85080-3000

Once you’ve sent us your NPI you can begin using it on claims. To ensure that claims are processed quickly and accurately, you’ll need to use a claim form that accommodates the NPI.

If you have questions, please contact our Provider Relations Department at (602) 938-3131 or (800) 352-6132, Option 5.

Did you know...

1) When you submit an incorrect procedure code, tooth number, date of service, treating dentist or patient information and you are requesting a correction to that information submitted, DDAZ will require a copy of the patient’s chart notes to accompany the corrected claim.

2) This type information will be accepted verbally over the phone, when omitted from the original claim submission:
   a) missing tooth #; b) quadrant; c) arch; d) valid CDT code when invalid code is originally submitted; e) perio therapy history; and f) FTSS only from the parent or legal guardian.

3) Speaking with one of our Customer Service Representatives does not guarantee benefits or the payment of a claim? DDAZ strives to provide service in the most efficient and expeditious manner by offering other alternatives when accessing your patient’s benefits, eligibility and claim status information. In addition, we also offer:

   a) Updated faxback option by dialing 866 746 1834, and then selecting option # 1
   b) Dentist Connection ‘secured’ website, www.deltadentalaz.com offers benefit/eligibility/claims status options
   c) CDT Lookup feature www.deltadentalaz.com secured website where you can review rules relative to specific treatment codes.
      1). Enter the code
      2). Click on Submit for the CDT description of the code
      3). Click on the code to determine whether any attachments are required when submitting this treatment
      4). Standard Rules are displayed towards the bottom of the page
   d) No greater than 10 workday turnaround predetermination process

At Delta Dental, there’s no need to send letters or e-mails to all of our individual Delta Dental member companies notifying them of your number. You only need to report your NPI to us. We will share your information with the rest of the Delta Dental system. Simply submitting an NPI on claims will not do the trick. To report your NPI, please mail or fax us a copy of the letter you received from the NPPES when they assigned an NPI to you. Letters can be sent to:

Delta Dental Professional Relations
Fax: (602)-588-3910
or mail a copy to: P O Box 43000
Phoenix, AZ 85080-3000

Once you’ve sent us your NPI you can begin using it on claims. To ensure that claims are processed quickly and accurately, you’ll need to use a claim form that accommodates the NPI.

If you have questions, please contact our Provider Relations Department at (602) 938-3131 or (800) 352-6132, Option 5.
Be Sure to Disclose All Patient Discounts on Claim Forms

Do you ever discount your fees for patients? You should know the rules concerning filing claims for discounted services.

- You must indicate any discounts you gave your patient clearly on the face of the claim form or in the notes field of the electronic claim.
- The discount must be applied so that the net fee submitted to us and the net fee charged to the patient are both reduced.
- You may offer patients discount coupons for services or procedures. However, all claims submitted must reflect the discounted fees as well.

Regularly offering discounts or coupons can affect your usual fee. Failure to disclose discounts or the use of coupons is one of the unacceptable billing practices reviewed during the claim verification process. Failure to disclose discounts or coupons can result in overpayments that are recoverable. If a claim form is intentionally submitted without disclosed discounts or coupon use, it can be considered a fraudulent attempt to gain overpayment of benefits.

How to Disclose Patient Discounts

Suppose your ‘usual’ fee for a complete maxillary denture is $1,000, but you offer a patient a $100 discount. There are 2 ways to indicate the discount on the claim form. You must use ONE of the following:

Option 1: State the actual amount billed for services.
Example: Box 31: $900
Option 2: Use the ‘Remarks’ section to identify the dollar amount of the discount.
Example: Box 31: $1,000
Box 35 (Remarks): Patient is receiving a $100 discount

We have moved into our corporate facilities in Glendale, AZ. Please update your records with our new street address:
5656 W. Talavi Blvd., Glendale, AZ 85306. Please note, our P.O. Boxes and phone numbers have not changed.