



Winter 2022 | Vol.16

# Dental Dispatch

News and information for network providers

## Reminders

### Where Can I Find Newsletters?

The Dental Dispatch is available for network providers in the Anthem Blue Cross (Anthem) dental networks. Visit [www.anthem.com/ca/provider/dental](http://www.anthem.com/ca/provider/dental).

### EFT Improvements

You may notice enhancements to our EFT system. Please visit [www.anthem.com/ca/provider/dental](http://www.anthem.com/ca/provider/dental) under Communications to learn more about the latest updates.

### California SB137 – Health Care Coverage: Provider Directories

Please be aware, as required by the State of California, Anthem and our affiliates must follow regulated procedures that are outlined in SB137 to maintain accurate provider directories. Our responsibility is to provide accurate dental directories to our members. For more information about SB137 and directory accuracy, please review the article within past newsletters on our website at [www.anthem.com/ca/provider/dental](http://www.anthem.com/ca/provider/dental).

## Claims Processing & Augmented Intelligence

Anthem has partnered with OverJet, Inc. to introduce augmented intelligence into claims processing beginning January 1, 2023. OverJet is a leader in the use of augmented intelligence and has partnered with payers, providers, and third-party intermediaries to incorporate augmented intelligence into dentistry.

Augmented intelligence will help expedite and optimize claims processing, by enhancing human abilities through the power of machine learning. For a list of frequently asked questions and to learn more, please visit [www.anthem.com/ca/provider/dental](http://www.anthem.com/ca/provider/dental) under Communications.

## Consolidated Appropriations Act (CAA) Provider Directory Federal Mandate

### Provider Directories – Effective 1/1/2022

As required by the Consolidated Appropriation Act (CAA) and several state laws, we must ensure our Provider Directories are accurate. Our members need the most up-to-date information to reach you, so we will reach out to our contracted providers every 90 days to verify their contact information. As a contracted provider, you must respond to the notification by providing updated contact information if it has changed. We appreciate your due diligence in keeping us informed of any changes impacting you or your office, especially those changes impacting the directory. Working together, we ensure your patients (our members) can reach you quickly while we meet our compliance obligations.

# Monkeypox – Infection Prevention and Control

Monkeypox, caused by infection with the monkeypox virus, is most commonly spread through direct contact with body fluids or sores on the body of someone who has monkeypox or with materials or surfaces that have touched body fluids or sores. The disease can also spread through respiratory secretions when people have prolonged face-to-face contact, according to the Centers for Disease Control and Prevention (CDC)<sup>1</sup>. Monkeypox often presents first in the mouth as enanthem — a rash on the tongue and mucous membranes.

According to the ADA Council on Scientific Affairs, “Use of appropriate PPE including masks and gloves, surface cleaning, and extra diligence when examining patients for symptoms and the characteristic facial rash and intraoral lesions to identify a patient early are imperative”<sup>2</sup>. Infection prevention and control recommendations for healthcare settings are provided by the CDC in the Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings (2007). Recommendations and practices described in this 2007 guideline are intended to be used when providing care for any patient in a healthcare setting, including those with monkeypox infection.

<sup>1</sup> CDC urges health care providers to be on lookout for monkeypox symptoms, including oral lesions. ADA News, August 08, 2022. <https://www.ada.org/publications/ada-news/2022/august/cdc-urges-health-care-providers-to-be-on-lookout-for-monkeypox-symptoms-including-oral-lesions>

<sup>2</sup> CDC Monkeypox Response: Transmission. CDC Newsroom, Media Statement, Thursday, June 9, 2022. <https://www.cdc.gov/media/releases/2022/0509-monkeypox-transmission.html>



## Misrouted PHI

Dental providers and facilities are required to review all member's information received from Anthem to ensure no misrouted PHI (Protected Health Information) is included. Misrouted PHI includes information about members that a provider or facility is not currently treating. PHI can be misrouted to providers and facilities by mail, fax, email, or electronic remittance.

Dental providers and facilities are required to immediately destroy any misrouted PHI or safeguard the PHI for as long as it is retained. In no event are providers or facilities permitted to misuse or re-disclose misrouted PHI. If providers or facilities cannot destroy or safeguard misrouted PHI, providers and facilities must contact Customer Service or call the number listed on the documentation received to report receipt of misrouted PHI. Dental providers and facilities should review claims and documents carefully before submitting for payment to ensure that the member ID and name listed on the claim is accurate. Taking these additional steps will help eliminate explanation of benefits being sent to the wrong member and prevent HIPAA violations.

## Tools You Need

Our dental portal—powered by Availity—makes it easy to do business with us. Availity is a multi-payer site where you can work with participating payers like Anthem.<sup>1</sup> Availity is secure and compliant with all HIPAA regulations, and there is no cost to use any of the online tools. You can check patient eligibility or view patient benefits and frequency limitations or review clinical guidelines for specific services. You can also use Availity to submit claims and attachments (for free), or view claims status attached to the provider's National Provider Identifier (NPI). Learn more at [www.anthem.com/ca/provider/dental](http://www.anthem.com/ca/provider/dental).

Availity demos are available at [apps.availity.com/Availity/Demos/Registration/index.htm](http://apps.availity.com/Availity/Demos/Registration/index.htm). For questions, call Availity Client Services at 800-AVAILITY (282-4548).

<sup>1</sup> This collaboration is allowed under the Health Insurance Portability and Accountability Act (HIPAA).

## Savings for Your Office

Our Provider Savings Program is available only to in-network providers. Special savings for your office include in-demand and costly dental materials and services like implants, dentures, orthodontic aligners, and turnkey software platforms supporting at-home patient care through teledentistry. To learn more, visit [www.anthem.com/ca/provider/dental](http://www.anthem.com/ca/provider/dental).

## Submitting Attachments

You can send supporting documentation with your claim submissions via the Availity portal. Using the dental attachments feature, you can respond to payer requests for supporting dental documentation or send dental documentation to the payer as needed.

Access dental attachments in the Availity Portal menu. Click Claims & Payments > Dental Attachments, then under Claims select Send Attachments.

Get trained in the Availity Learning Center (ALC). It is full of easy-to-read posts on a wide variety of topics, including several posts focused on attachments. Here's how to access training:

1. From [www.Availity.com](http://www.Availity.com), select Help & Training > Get Trained.
2. The ALC will open in a new browser tab, then select Catalog > Forum.
3. Select a post to review it.

## Claims Submission Tips

### Accurate and timely claims payment is a high priority

The fastest and most accurate way to have claims processed is electronically through a Claims EDI (Electronic Data Interchange) clearinghouse. When submitted electronically, paper claims are often delayed due to missing information.

To ensure accurate and timely claims processing, please confirm the following:

- Submit services on a TYPED (never handwritten) Official ADA (American Dental Association) Claim Form. We will accept official 2012, 2018, 2019 ADA forms.
- Include the Member ID Number, not the SSN (Social Security Number) of the member.
- Orthodontia claims always need the treatment length (months) indicated.
- Confirm the subscriber authorization signature is included.
- For completed services, make sure the form includes the provider's signature.
- For an adjustment or correction, or there is a grievance or appeal, PLEASE be specific and include previous, related claims number(s).

## CDT 2023 Updates

This serves as notification by Anthem that we posted 2023 Code on Dental Procedures and Nomenclature (CDT Code) updates to our website. To view the latest CDT 2023 updates, and continued annual updates, please visit us at [www.anthem.com/ca/provider/dental](http://www.anthem.com/ca/provider/dental). Under Communications, select CDT 2023 Updates Effective 1/1/2023. If you do not have access to the internet, if you have questions, or would like to request a full listing of the claims processing guidelines, please call Dental Network Professional Services at **866-947-9398**.

Remember to use the new CDT dental codes, effective January 1, 2023. The new CDT 2023 code book includes dental procedure codes and revisions to procedure code nomenclatures or descriptors. To order the new 2023 CDT code book, contact the ADA Member Service Center at **800-947-4746** or visit <http://catalog.ada.org>.

## Anthem Dental Language Assistance program for your office

### No interpreter? No problem.

In accordance with the California Language Assistance Program (CALAP), you must notify Anthem dental patients of the availability of health plan interpreter services. You must also document a patient's refusal of any needed interpreter services in his or her patient chart. Please refer to the Anthem Dental Provider Resource page or the Anthem Provider Manual for additional information on the Language Assistance Program, at [www.anthem.com/ca/provider/dental](http://www.anthem.com/ca/provider/dental).

## Quick Reference Guide

If you need help with...	For Prime and Complete	For All Other Products
Paper Claims Address	Please review the back of the member's ID card to determine the appropriate dental claims mailing address. (Address varies by group.) In the absence of an address, call the number on back of the ID card for instructions on where to submit the claim	Please review the back of the member's ID card to determine the appropriate dental claims mailing address. (Address varies by group.) In the absence of an address, call the number on back of the ID card for instructions on where to submit the claim
Electronic Claims	Follow current process or contact your clearinghouse	Follow current process or contact your clearinghouse
Customer Service	See back of patient's ID card or call <b>877-567-1804</b>	See back of patient's ID card
Grievance/Appeals <i>*Sending to a P.O. Box different than the following may result in a delay in your appeal.</i>	Attn: Dental Claims Appeals and Grievances P.O. Box 1122 Minneapolis, MN 55440	Anthem Blue Cross Attn: Corporate Appeals Dept. P.O. Box 659471 San Antonio, TX 78265
Professional Services	<b>866-947-9398</b>	<b>866-947-9398</b>
Language Assistance Program	See back of patient's ID card	<b>800-627-0004</b>
Provider Reference Manual (PPO ONLY)	<a href="http://www.anthem.com/ca/provider/dental/">www.anthem.com/ca/provider/dental/</a>	<a href="http://www.anthem.com/ca/provider/dental/">www.anthem.com/ca/provider/dental/</a>