

### Reminders

### Where Can I Find Newsletters?

The Dental Dispatch is available for network providers in the Anthem Blue Cross and Blue Shield (Anthem) dental network. You can find current and previous newsletter issues at www.anthem.com/provider/dental.

### **Emails for Your Office**

Watch your email box for periodic email updates from our provider networks team. To be sure your staff receives all updates and notifications, make sure our email address donotreply-providercomm@email. anthem.com is marked as a safe sender on your email list.

### **Grace Periods**

If you have questions regarding grace periods, contact Customer Service using the phone number listed on the back of the member's ID card.

# New EFT enrollment hub brings process enhancements and benefits to your office

To ensure compliance with a federal mandate—and to introduce improved processing efficiencies and controls—we made enhancements to our electronic funds transfer (EFT) enrollment and processing systems. We upgraded the system to make the easy-to-use portal a one-stop website. It's available to all in-network dental providers.

#### Highlights include:

- New EFT enrollment hub, EnrollSafe, brings process enhancements and benefits to providers—at no cost
- Single point-of-contact for all online provider registrations for initial electronic funds transfer (EFT) setup enrollment and any subsequent EFT setup maintenance needs
- Simplified enrollment process to improve turn-around time setup of EFT payments
- Significant improvement to fraud controls to further mitigate risks related to fraudulent payment transactions, including the use of real-time account verification

- Dedicated resources to support:
  - Provider provisioning and enrollment setup/ verification process
  - Bank account verification, including banking connectivity testing and validation
  - Compliance processes, ensuring full compliance with regulatory mandates
- Operational controls with industry best practices
- Customer Service support, available 24/7
- Best-in-class security around provider-submitted EFT enrollment data

To learn more, view the full announcement and FAQ.

# Dr. K's Corner



Dr. Mark Kahn, Dental Director has a wealth of clinical and insurance experience, including provider relations and detecting and preventing medical waste, fraud and abuse.

# Commonly Misunderstood or Misused CDT Codes for Restorative Procedure -Miscoding of Zirconia Crowns

The American Dental Association (ADA) has addressed the issue of proper coding of zirconia crowns.

- A zirconia crown is made from zirconium dioxide, a durable material that's related (key word 'related') to titanium, although it's categorized as a type of ceramic crown.
- · According to the ADA guidance:

Q: What procedure code should I report for a porcelain fused to a zirconium substrate crown?

A: This question contains a commonly made error, using the word zirconium when describing the crown's material. Dental crowns use zirconia, which is an oxide and considered chemically to be a ceramic. The applicable procedure code is D2740 crown-porcelain/ceramic.

Therefore, in the administration of benefits relative to the procedure code submitted, we follow the ADA CDT Coding and guidance:

The method of fabrication is not a consideration in code selection.

The component/brand name porcelain is not to be considered in code selection.

# Restorative Services/Desensitization D9910 and D9911

According to CDT descriptors for procedure codes D9910 and D9911, application of desensitizing medicament, the use of D9911 or 9910 in conjunction with restorative services is not appropriate. As defined by CDT:

- D9911 application of desensitizing resin for cervical and/ or root surface per tooth is the application of adhesive resin. This code is not to be used for bases, liners, or adhesives under restorations.
- The use of D9910 application of desensitizing medicament is in office treatment for root sensitivity. This code is not to be used for bases, liners, or adhesives under restorations.

## Consolidated Appropriations Act (CAA) Provider Directory Federal Mandate – Provider Directories Effective 1/1/2022

As required by the Consolidated Appropriate Act (CAA) and several state laws, we must ensure our Provider Directories are accurate. Your patients—our members—need the most up to date information to reach you. Please keep us informed of any changes impacting you or your office, especially those changes impacting the directory. We will reach out to our contracted providers as required by Federal and State laws to verify contact information. As a contracted provider, you must respond to the notification by providing updated contact information. We appreciate your due diligence in keeping us informed of any changes impacting you or your office. Working together, we ensure your patients—our members—can reach you quickly while we meet our compliance obligations.

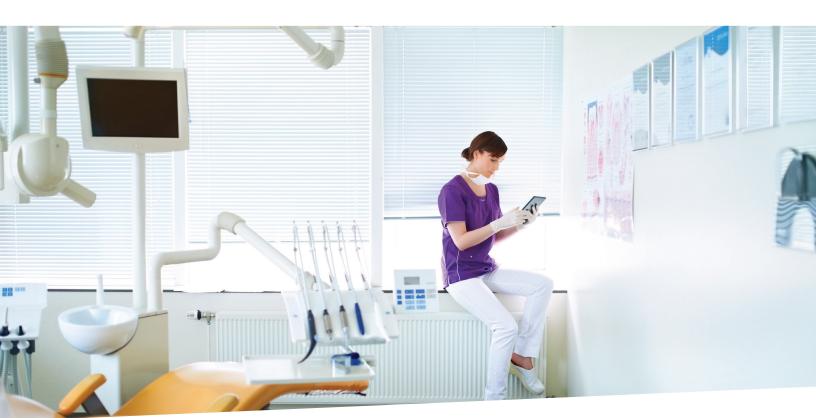
# So, What's New?

# Dental Participating Dentist Agreement Update

### All States except Texas, Illinois, Pennsylvania, and West Virginia

Your Dental Participating Dentist Agreement will contain the following language in the STATE SPECIFIC PROVISIONS section for the State of Connecticut according to CT SB 1202-C Budget Bill Sec. 96:

Notification of Material changes to the Agreement, the applicable Network Fee Schedule, Provider Manual or any other provision, attachment or addenda made part of this Agreement, shall be issued by making a good faith effort to provide notice to Dentists at least ninety (90) days in advance of the effective date of the amendment (herein referred to as "Notice"). If Dentist decides not to accept the Material change amendment, Dentist has the right to object to this amendment in writing within thirty (30) days of receipt of the amendment. If the Dentist objects and there is no resolution to the Dentist's objection either party may terminate this Agreement by providing written notice within sixty (60) days prior to the effective date of the amendment. Dentist agrees that its failure to provide such notice to Anthem Dental within the time frames described herein will constitute acceptance of the amendment by the Dentist, and such amendment shall not require a separate signature in order to be effective. For purposes hereof, a "Material Change" shall be considered a change that alters the rights of Dentist or significantly alters Dentist requirements or obligations.



# **Health Watch**

### **Opioid Prescriptions Update**

Opioid pain relievers are commonly prescribed following surgery or injury, or for health conditions such as cancer or for pain conditions such as toothache and pain associated with an abscess. While opioids can be effective treatment for managing chronic pain and other conditions when properly administered, they carry significant risk when misused or abused.

Regular monitoring and identification of early risk factors is critical to recognizing patients who are most at-risk for prescription drug abuse issues and those who need treatment. Commitment across the healthcare industry is needed to effectively fight prescription opioid abuse.

### What you can do:

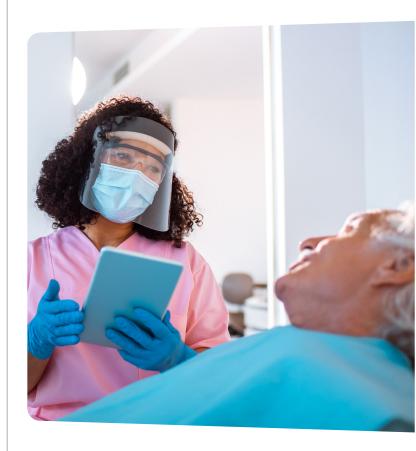
Dentists have a significant role in ensuring appropriate prescription opioids use.

The American Dental Association has adopted two statements addressing opioid prescribing: **Statement on the Use of Opioids in the Treatment of Dental Pain**<sup>1</sup> and **Statement on Provision of Dental Treatment for Patients with Substance Use Disorders**.<sup>2</sup> These statements outline opioid management considerations including the importance of:

- Registering with and utilizing prescription drug monitoring program
- Discussions with patients regarding their responsibilities for preventing misuse, abuse, storage and disposal of prescription opioids
- Consideration of nonsteroidal anti-inflammatory analgesics as the first-line therapy for acute pain management.
- Consideration of coordination with other treating doctors, including pain specialists when prescribing opioids for management of chronic orofacial pain.
- Encouragement to seek consultation with the patient's physician, when the patient has a history of alcoholism or other substance use disorder.

The Centers for Disease Control and Prevention (CDC) notes that Prescription Drug Monitoring Programs (PDMPs) are among the most promising interventions to improve opioid prescribing, inform clinical practice, and protect patients at risk.<sup>3</sup> What you need to know:

- Enroll in your local PDMPs.
- A PDMP allows providers to identify situations in which they should not be prescribing a controlled substance to a patient. This enables dentists to move towards better medication adherence and helps to curb the prescription drug abuse epidemic.
- 1 American Dental Association. Statement on the use of opioids in the treatment of dental pain. Available at: http://www.ada.org/en/about-the-ada/ada-positions-policies-and-statements/statement-on-opioids-dental-pain (Accessed June 2021).
- 2 American Dental Association. Statement on Provision of Dental Treatment for Patients with Substance Use Disorders. (Available at: http://www.ada.org/en/about-the-ada/ada-positionspolicies-and-statements/provision-of-dental-treatment-for-patients-with-substance-abuse) (Accessed June 2021).
- 3 Centers for Disease Control and Prevention, Prescription Drug Monitoring Programs (PDMPs)
  What States Need to Know (May 29, 2021), https://www.cdc.gov/drugoverdose/pdmp/index.html;
  Centers for Disease Control and Prevention, Prescription Drug Monitoring Programs (PDMPs) What
  Healthcare Providers Need to Know (February 12, 2021), https://www.cdc.gov/opioids/providers/pdmps.html



# Did you know

### Anthem Dental Language Assistance program for your office

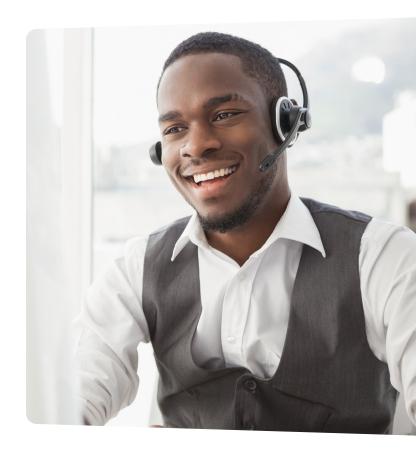
### No interpreter? No problem.

Anthem wants you to be able to communicate with your Anthem dental patients clearly and accurately.

- It's easy
- · It's free
- No advance notice required
- All languages

To utilize Anthem's language assistance services, contact us at the phone number listed on the member's identification card.

When you call, please be prepared to give the representative the Anthem's dental patient's identification number for eligibility verification, as well as your dental practice name and tax identification number. Upon verification of eligibility, the appropriate translator will be obtained and you will be connected to the "language line" for telephonic interpretation.



### **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.

### **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 #s	See back of patient's ID card or call 866-956-8607	See back of patient's ID card
Grievance/Appeals *Sending to a P.O. Box different than the following may result in a delay in your appeal.	Attn: Dental Claims Appeals and Grievances P.O. Box 1122 Minneapolis, MN 55440	Anthem Blue Cross and Blue Shield Attn: Corporate Appeals Dept. P.O. Box 659471 San Antonio, TX 78265
Professional Services	866-947-9398	866-947-9398
Provider Reference Manual (PPO ONLY)	www.anthem.com/provider/dental/	www.anthem.com/provider/dental/
Language Assistance Program	See back of patient's ID card	800-627-0004

