

Dental Dispatch

News and information for network providers



Quick reference guide

Please see the below chart for the most accurate contact information.

Anthem	Prime and complete	All others dental products
Paper claims address	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.	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 numbers	See the back of patient's ID card or call 866-956-8607 .	See the back of patient's ID card.
Grievances and appeals Note: Sending to a P.O. Box different than the following may delay your appeal.	Attention: Dental Claims Appeals and Grievances P.O. Box 1122 Minneapolis, MN 55440	Anthem Blue Cross and Blue Shield Attention: Corporate Appeals Department P.O. Box 659471 San Antonio, TX 78265
Professional services	866-947-9398	866-947-9398
Provider reference manual (PPO ONLY)	anthem.com/provider/dental	anthem.com/provider/dental
Language Assistance Program	See the back of patient's ID card.	800-627-0004

Introducing our new payment website

In an effort to streamline operations and enhance provider satisfaction, we are thrilled to announce the launch of our new website for payment submission related to claim overpayment refund requests.

Key features of the payment website:

- User-friendly access at **Availity.com**. You must be registered with Availity Essentials, or you can sign up.
 - How to navigate **Availity.com**:
 - Log in using your user ID and password.
 - Select your state.
 - Select payer.
 - Select **Dental Provider Claim Overpayment**. Add this your favorites for faster access.
- Secure transactions
- Active monitoring of payment processing

Active monitoring payment processing

Dedicated members of our team have been assigned to manage, review, and follow up on all payment activities. We are equipped to provide seamless support.

In the unlikely event of a payment processing error, our team will promptly contact you to inform you of the issue and ensure timely corrective measures are taken.

Stay updated

We are committed to maintaining transparent communication. Look out for communication for any updates related to the payment website.

Thank you for your continued support and trust. We are confident that this new payment website will significantly enhance your experience with us. For any inquiries or further assistance, contact DentalFinanceOperations@anthem.com.

Welcome to a new era of simplified, secure, and efficient payment processing.

Cultural competency and diversity training

This communication pertains to Colorado providers only.

Anthem is required to obtain data on both dentists and front office staff who have completed culturally sensitive and anti-bias training in 2024 in order to remain in compliance with *Colorado Insurance Regulation 4-2-80*.

For eLearning experiences, Anthem offers an on-demand provider training hub. Visit tinyurl.com/479fd7jb and select the My Diverse Patients icon. You can also type My Diverse Patients into your browser. The current continuing medical education course is offered to network providers and office staff at mydiversepatients.com.



Get all your questions answered with Provider Chat



You now have a new option to have many of your questions answered quickly and easily. With Provider Chat, providers can have a real-time, online discussion through a new digital service, available through Payer Spaces at **Availity.com**. Provider Chat offers:

- Real-time answers to your questions about prior authorization and appeals status, claims, benefits, eligibility, and more.
- An easy-to-use platform that makes it simple to receive help.
- The same high level of safety and security you have come to expect with Anthem.

For questions related to provider contracting concerns, fee schedules, and demographic updates, continue to contact Provider Network Services at **866-947-9398**.

Provider Chat is one example of how Anthem is using digital technology to improve the healthcare experience, with the goal of saving valuable time. To get started, access the service through Payer Spaces at **Availity.com**.

Do not miss important updates from us

We send care providers electronic communications, including updates to claims, benefits, provider manuals, newsletters, and more.

We send only educational communications and important marketing materials. To avoid missing crucial updates, ensure that our communications are not marked as spam or sent to your junk folder. To guarantee your staff receives all notifications from us, mark our email address as a safe sender.

CDT updates for 2025

We have posted the 2025 Code on Dental Procedures and Nomenclature updates to our website. To view the latest Current Dental Terminology (CDT) 2025 updates, and continued annual updates, visit our website. Select **Communications** > CDT Updates effected January 1, 2025.

If you have any questions or would like to request a full listing of the claims processing guidelines, call Dental Network Professional Services at **866-947-9398**.

You will use the new CDT dental codes effective January 1, 2025. The new CDT 2025 code book includes dental procedure codes and revisions to procedure code nomenclatures or descriptors.

To order the new 2025 CDT code book, contact the American Dental Association Member Services Center at **800-947-4746**.

Misrouted PHI

Dental providers and facilities are required to review all member's information received from Anthem to ensure no misrouted PHI is included. Misrouted PHI includes information about members 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 are accurate. Taking these additional steps will help eliminate explanation of benefits being sent to the wrong member and prevent *HIPAA* violations.



***Consolidated Appropriations Act* provider directory federal mandate**

As required by the *Consolidated Appropriations Act* (CAA) and state law require our Provider Directories to be current and accurate. Your patients — our members — need the most up-to-date information to reach you. As a contracted provider, you must respond to this notification by providing updated contact information.

We are excited to announce our partnership with HealthLink Dimensions to simplify the verification process with your practice. Healthlink Dimensions will send you an email with the steps required to complete the verification of your practice. Ensure that you add Healthlink Dimensions to your trusted sender list so that vital communication between your office and Healthlink Dimension is received.

We appreciate your 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.

anthem.com/provider/dental

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