



DENTAL CONNECTIONS

Fall 2017



## Thank you!

Our network of participating providers is an integral part of what we do here at Blue Cross & Blue Shield of Rhode Island. Through your partnership Blue Cross Dental members have access to the quality dental care they need – when they need it. This plays an important role in improving the health of and lowering the cost of healthcare for Rhode Islanders. For that, we thank you.

In this issue of Dental Connections, you will find articles, updates, and reminders to help make administrative tasks easier when providing services to BCBSRI members.

As always, please feel free to [contact me](#) with any suggestions you have. We thank you for being an important part of what we do.

Corey McCarty  
Vice President, Consumer Segment

## What's new!

- CDT 2018: New codes and BCBSRI policy
- My Patient's Benefits enhancements
- Provider database
- 2018 Dental Direct plans
- BlueCHIP for Medicare Dental coverage update
- BlueCHIP for Medicare updates
- Medical claims submission
- Dental provider resources
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## CDT 2018: New codes and BCBSRI policy

The American Dental Association has released its 2018 update to the Current Dental Terminology (CDT). The Blue Cross Dental policy for the new coding can be found [here](#). In addition, all Blue Cross Dental clinical guidelines can be referenced on our [Dental Provider Resources page](#).

## My Patient's Benefits enhancements

We have worked with our dental claims processing partner, United Concordia Dental, to ensure your feedback was incorporated into the enhancements to the My Patient's Benefits tool on the provider portal. After soliciting feedback from participating dental offices, including two offices here in Rhode Island, we will be making changes later this year that will let you find patient-specific benefit and eligibility information easier and faster than before. A separate communication will be emailed in the coming weeks describing some of the new features and the anticipated launch timeline.

## Provider database

We're always pleased to welcome new dentists to our network to deliver outstanding care to our members. If a dentist would like to participate with Blue Cross Dental, please visit the [Become a Participating Provider page](#) on [bcbsri.com](#) and fill out the required fields to initiate the credentialing process.

If a provider who already participates with Blue Cross Dental joins your practice, or your practice information is changing, simply return a completed [Practitioner Change Form](#) along with a W-9 indicating the new office location, and we will process your request enabling you to submit claims for that dentist.

## 2018 Dental Direct plans

BCBSRI will again offer [four Dental Direct plans](#) with varying levels of coverage to meet your patients' needs. Dental Direct members interested in upgrading their plan will need to select a new plan during the 2018 Open Enrollment period, from November 1 - December 31, 2017. Members who are happy with their current plan don't have to do anything and will be automatically re-enrolled in the same plan starting January 1, 2018. Enrollment for new members is available at any time during the year and coverage will be effective the first of the month following enrollment.

As in prior years, when new members are enrolling in one of our Dental Direct plans, we will waive the waiting period(s) for new members who can provide proof of prior comparable coverage that was effective within 60 days of the new enrollment. This proof of coverage can be obtained from the prior carrier or the member's employer and provided to our sales team. Although dental customer service does not have the ability to waive the waiting period, our membership department can verify prior coverage. Please call membership at (401) 459-5550.

If you would like 2018 Dental Direct brochures to display in your office, please email [dentalbrochures@bcbsri.org](mailto:dentalbrochures@bcbsri.org) with your office name and address, as well as the quantity you would like to receive, and we will mail these directly to you.

## BlueCHIP for Medicare Dental coverage update

Beginning January 1, 2018, BlueCHIP for Medicare members (those members with the ZBM prefix on their subscriber ID) will have coverage for posterior composite fillings, enabling your office to place the filling material that best meets your patients' needs and eliminating their coverage concerns.

As a reminder, when submitting claims for these members, the ZBM prefix for the subscriber ID MUST be used in Box 15 of the 2012 ADA Dental Claim Form.

## BlueCHIP for Medicare updates

As a reminder, the Centers for Medicare & Medicaid Services (CMS) had implemented a requirement for providers who have the ability to prescribe medications to their patients. This requires providers, including dentists, to visit <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/index.html>. Select the Internet-Based PECOS link on the left-hand side of the page and choose to opt in or opt out of Medicare prior to July 1, 2018 for a January 1, 2019 effective date.

Taking no action on this mandate may cause issues for patients at the pharmacy when they attempt to fill prescriptions written by you. Please be aware that if you choose to opt out of Medicare, we are required by CMS to consider you as non-participating for BCBSRI members that have our BlueCHIP for Medicare Dental Rider (ID numbers beginning with ZBM). Those members do not have coverage for out-of-network services. Once a provider has opted out of Medicare, they must enter into a private reimbursement contract with each Medicare beneficiary to whom they render services. Opt-out affidavits signed on or after June 16, 2015 will automatically renew every two years. Please note that opt-out periods cannot be terminated early unless the provider is opting out for the first time and the affidavit is terminated no later than 90 days after the effective date of the provider's first opt-out period. Opting out of Medicare will not affect your Blue Cross Dental commercial member participating status. For more information, please refer to the [FAQs](#) that CMS has developed to help guide their process.

Also, effective January 1, 2016 CMS requires all carriers offering a Medicare Advantage network (including our BlueCHIP for Medicare Dental products) to comply with new regulations pertaining to provider directories. As a result, Blue Cross Dental will contact you quarterly through our partner VIIAD to verify the information we have on file. Please be aware that a separate letter will be sent to each location on file. Please indicate any necessary corrections to your information for this specific office and return per the directions on the form.

## Medical claims submission

As a reminder, effective October 1, 2015, all providers, hospitals, and facilities must submit ICD-10 codes when billing BCBSRI medical claims on a CMS 1500 form. Medical claims submitted with ICD-9 codes will be rejected upon request.

## Dental provider resources

When we have updates to share with your office, we will send them right to your inbox.\* However, to view past updates and previous editions of *Dental Connections* please visit our [Dental Provider Resources page](#). Bookmark this page where you will also find contact information conveniently located in one location.

\*If you would like to add anyone in your office to our email list so they can receive our updates and *Dental Connections* too, you can do that [here](#).

## Blue Cross Dental contact information

**Claims submission address:**

Dental Claims Administrator  
P.O. Box 69427  
Harrisburg, PA 17106-9427

**Claims submission address for FEP:**

Blue Cross & Blue Shield of Rhode Island  
500 Exchange Street  
Providence, RI 02903

**For claims, eligibility, and benefits:**

Monday through Friday, 8:00 a.m. to 8:00 p.m.  
For offices calling from within RI: (401) 453-4700  
Outside of RI: 1-800-831-2400

**For FEP claims, eligibility, and benefits:**

Monday, Wednesday, Thursday, and Friday: 8:15 a.m. to 4:30 p.m.; Tuesday: 9:15 a.m. – 4:30 p.m.  
For offices calling from within RI: (401) 831-0153  
Outside of RI: 1-800-377-4418

**For provider/network support:**

Stephanie Santoro, RDH, Dental Network Manager: (401) 459-5745

**For member enrollment:** (401) 459-5550 or 1-855-690-2583

You may also direct your patients who need service to our Your Blue Store<sup>SM</sup> locations. Hours are Monday and Thursday, 9:00 a.m. – 7:00 p.m.; Tuesday, Wednesday, and Friday, 9:00 a.m. – 5:00 p.m.; Saturday, 9:00 a.m. - 1:00 p.m. (during Medicare's Annual Enrollment Period only, from October 15 – December 7):

**Lincoln** – Lincoln Mall Shopping Center, 622 George Washington Highway

**East Providence** – Highland Commons, 71 Highland Avenue

**Warwick** – Cowesett Corners, 300 Quaker Lane

**Your Blue Stores main line:** (401) 459-2200



500 Exchange Street, Providence, RI 02903-2699

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