

NEWS dental care

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- Doctor
- Office Manager
- Biller
- Hygienist

BCBSM offers a helping hand through MIChild

BCBSM is committed to making sure Michigan residents have the health care coverage they need. As part of that commitment, BCBSM takes its role in MIChild very seriously.

MIChild is a program run by the Michigan Department of Community Health that offers health and dental care statewide to uninsured children whose families meet defined income guidelines. The coverage is affordable, and those who are eligible and enroll

can select the health and dental coverage they want from one of seven health and three dental insurers. There are approximately 33,000 MIChild members statewide.

By supplying this coverage to children, we all work to help keep kids healthy. In addition, more children in MIChild means more children covered by private insurance, and that helps ensure prompt, predictable payment.

To enroll in MIChild, parents should submit an application available from michigan.gov/michild* or call 888-988-6300. For brochures and other materials you can supply to potential MIChild candidates, as well as more information on the program, visit bcbsm.com/michild.

**BCBSM does not control the content of this Web site or endorse its general content.*

MIChild dental benefits explained

MIChild dental benefits provide coverage up to a \$600 annual benefit maximum. Covered dental benefits include:

- Two routine exams and cleanings per year
- Two fluoride treatments per year for children younger than 14
- Bitewing X-rays once per year
- Dental sealants on first and second molars
- Fillings
- Space maintainers for children younger than 14
- Stainless steel crowns

- Pulpotomy for primary teeth
- Simple extractions

Oral surgery is covered under the patient's medical coverage, not dental coverage.

MIChild BCBSM Traditional Plus Dental program members have identification cards with group number 31295. Benefits are covered 100 percent when they are provided by BCBSM participating or network providers.

For specific benefit information on a MIChild patient, please call CAREN+ at 800-482-4047, and enter the child's contract number.

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A nonprofit corporation and independent licensee of the Blue Cross and Blue Shield Association

Orthodontic payment clarified

In the January 2006 issue of *Dental Care News*, we announced a change to a BCBSM procedure. Instead of processing monthly orthodontic visits, we now make full payment on the total treatment code.

In response to questions from some dental offices, we would like to clarify that we make the full orthodontic payment up to the BCBSM allowed amount, minus the patient's copayment and deductible, up to the member's lifetime benefit maximum. If you participate with BCBSM on an orthodontic claim, you cannot charge the patient more than our approved amount.

NPI accepted on electronic claims

BCBSM now supports a “dual-acceptance” environment for electronically submitted dental claims. This means our systems can accept your national provider identifier as long as there is a corresponding tax identification number submitted with it on the electronic claim.

Providers who have multiple group practices should bill as they do today, and include the NPI.

In this dual-acceptance environment, claims are processed with the tax ID. At this time, the NPI is being used for informational purposes only, to track your identifier for future claims processing verification. Electronic claims submitted with only an NPI will be rejected.

The dual-acceptance environment does not apply to paper claims. You should continue to follow your current process when submitting paper claims.

Remember that NPI enrollment does not replace provider enrollment activities with BCBSM for new and existing dental care providers.

For additional NPI information, including instructions on how to apply for your NPI, visit cms.hhs.gov/NationalProviderStand*. For BCBSM-specific communications, visit bcbsm.com/providers/hipaa/index.shtml.

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Something new: ID cards to display DenteMax name

BCBSM is working to make it easier for you to identify our members with coverage through the DenteMax network. You'll begin to see the DenteMax name on the back of BCBSM member identification cards as group renewal dates trigger the printing of replacement cards. (See the sample ID card printed below.) DenteMax providers who see the network name will know to extend all DenteMax benefits to these patients.



Billing Reminders

- Please do not send X-rays to BCBSM unless we request them. Under our new policy, a nonpayment message will advise you to send X-rays and other documentation if we determine that a claim requires them. See the April 2006 issue of *Dental Care News* for details.
- Remember also that we no longer return X-rays. Please be sure to send duplicate X-rays to us, when requested, and keep the originals in your patient files.
- BCBSM accepts paper claims for dental services only on the current 2002, 2004 ADA form. We will also accept the new 2006 ADA claim when it becomes effective Jan. 1, 2007.

Implant coverage expanded

BCBSM is pleased to announce expanded coverage for groups that currently offer dental implant benefits.

Coverage now includes procedure codes D6056 (prefabricated abutment, includes placement) and D6057 (custom abutment, includes placement). Abutments are connective pieces placed in implants that do not have connectors designed as an integral part of the implants or the implant crowns.

These codes are payable per individual tooth for members of groups that offer implant placement benefits. This policy does not affect payment for crowns placed over the implants.

Codes change for obstructive sleep apnea orthotics

HCPCS procedure code S8260 (oral orthotic for treatment of obstructive sleep apnea) was deleted effective March 31, 2006. The two replacement codes, E0485 and E0486, are explained below.

Procedure Code	Type of Service	Nomenclature	Effective Date
E0485	G (DME/P&O)	Oral device/appliance used to reduce upper airway collapsibility, adjustable or non-adjustable, prefabricated, includes fitting and adjustment	Jan. 1, 2006
E0486	G (DME/P&O)	Oral device/appliance used to reduce upper airway collapsibility, adjustable or non-adjustable, custom fabricated, includes fitting and adjustment	Jan. 1, 2006

When billing, use the CMS-1500 claim and report one of the above procedure codes. Be sure to include the corresponding ICD-9-CM diagnostic codes.

See the January 2004 issue of *Dental Care News* for general coverage guidelines and documentation requirements.

NEWS bites

- Ford Motor Company members now have online access to information about their dental coverage. Members can view information such as: claim status (including current and previous claims for the past two years) and claim payment, summary and details.
- The wait is almost over. Dental offices will soon be able to access claim, eligibility and status information online. Watch for a special edition of *Dental Care News* in November announcing how to sign up for web-DENIS, the Blues online information system.
- CAREN+ now features interactive voice response technology, as reported in the July 2006 issue of *Dental Care News*. However, you can still use your touchtone telephone keypad to enter the contract number and birth date.
- Obstetricians, gynecologists, family practitioners and nurse midwives are distributing coupons for a free, extra dental cleaning (procedure code D1110) to pregnant women. When patients call for an appointment, please verify that they have BCBSM dental coverage. See the July 2006 *Dental Care News* for more information.
- CDT-2007 codes are coming. There's no time like the present for you to become familiar with these codes, which become effective Jan. 1, 2007. Call the American Dental Association at 800-947-4746 to order your manual.

New features improve electronic claim processing

If you submit your dental claims electronically, you can include notes at the claim or service level in an 837 transaction beginning Oct. 16, 2006. Replacement or void claims can also be billed electronically using claim frequency type code 7 (replacement) or 8 (cancel/void), along with a previous document control number.

Please refer to the ANSI ASC X12N 837 & 835 Health Care Claim & Health Care Claim Payment/Advice Companion Document located at bcbasm.com/providers/systems/pdf/dental_edi_837den.pdf.

To file your dental claims electronically, use one of these clearinghouses:

- Affiliated Network Services LLC
 - Capitol Billing
 - Claims Processing Service Inc.
 - Electronic Services
 - Healthware
 - Netwerkes
 - Professional Alliance
 - Tesia PCI
-
- BCBSM will close for these holidays:
 - Nov. 7 (Election Day)
 - Nov. 23-24 (Thanksgiving)
 - Dec. 25-26 (Christmas)
 - Jan. 1-2 (New Year's)

Continuing education offered

Don't miss the upcoming continuing dental education program held jointly by Blue Cross Blue Shield of Michigan, OraPharma Inc. and DENTSPLY Professional. It will be held in Grand Rapids and Southfield.

The course satisfies the **new pain management continuing education requirement** for dentists and hygienists. Attendees will earn three hours of CE credit.

Topics: "Periodontal Disease and the Perio/Systemic Link"
Cosponsored by OraPharma Inc.

"Assessing Anesthetic Options for Non-Surgical
Periodontal Therapy"
Cosponsored by DENTSPLY Professional

Speakers: Larry Sweeting, D.D.S., Certificate in Periodontics
Doreen Smeltzer, R.D.H., M.A.Ed.

When: Monday, Oct. 23, 2006
Registration 12:30 p.m., program 1- 4 p.m.

Where: BCBSM Steketee Building
86 Monroe Center N.W.
Grand Rapids

When: Tuesday, Oct. 24, 2006
Registration 5:30 p.m., program 6 - 9 p.m.

Where: BCBSM Metro Service Center Auditorium
27000 W. 11 Mile Road
Southfield

Advance registration is recommended. To register, please call the BCBSM department of health care education at 800-921-8980. For more information or directions, please call 248-448-7203 or go to bcbsm.com/directories/maps/mapsearch.shtml.

BCBSM is approved by the Academy of General Dentistry as a provider of continuing dental education. Our AGD sponsor number is 209448.

Inci-dental-ly...

It's easy to order the *Guide for Dental Care Providers* or to be put on our mailing list for *Dental Care News*. On your office letterhead, tell us how many CD-ROM provider manuals or newsletters you need.

Have you moved to a new office? Just give us your name and new address, along with the old address.

Please fax this information to our database administrator at:
313-225-7709

Or mail it to: Database Administrator
Provider Communications — Mail Code 0205
Blue Cross Blue Shield of Michigan
600 E. Lafayette Blvd.
Detroit, MI 48226-2998

BCN AdvantageSM dental coverage detailed

As announced in the October 2005 issue of *Dental Care News*, Blue Care Network offers an HMO Medicare Advantage product that includes BCBSM basic dental coverage when provided by a DenteMax network dentist. BCN Advantage covers one dental exam, one regular cleaning and one set of bitewing X-rays per calendar year.

Periodontal maintenance (procedure code D4910) is not a benefit under the current BCN Advantage plan. However, if your patient is in periodontal maintenance and D4910 is rejected by BCBSM, you may submit a status claim to request consideration for an alternate benefit for procedure code D1110.

Noncovered benefits (such as a crown) can be billed only at the DenteMax-approved amount.

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