CDT-2007/2008 procedure codes now accepted

The American Dental Association has published the Current Dental Terminology CDT-2007/2008 manual, which contains the most recent revisions to the Code on Dental Procedures and Nomenclature. Please use these codes for services provided from Jan. 1, 2007, through Dec. 31, 2008.

Changes include the addition of 23 new codes, deletion of three codes and revisions to 31 codes.

The 23 new codes include the following of particular interest:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>D0145</td>
<td>Oral evaluation for a patient under three years of age and counseling with primary caregiver</td>
</tr>
<tr>
<td>D0273</td>
<td>Bitewings – three films</td>
</tr>
<tr>
<td>D1206</td>
<td>Topical fluoride varnish; therapeutic application for moderate to high caries risk patients</td>
</tr>
<tr>
<td>D1555</td>
<td>Removal of fixed space maintainer</td>
</tr>
<tr>
<td>D6092</td>
<td>Recement implant/abutment supported crown</td>
</tr>
<tr>
<td>D6093</td>
<td>Recement implant/abutment supported fixed partial denture</td>
</tr>
<tr>
<td>D9120</td>
<td>Fixed partial denture sectioning</td>
</tr>
</tbody>
</table>

The three deleted codes are:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>D1201</td>
<td>Topical application of fluoride (including prophylaxis) – child</td>
</tr>
<tr>
<td>D1205</td>
<td>Topical application of fluoride (including prophylaxis) – adult</td>
</tr>
<tr>
<td>D6971</td>
<td>Cast post as part of fixed partial denture retainer</td>
</tr>
</tbody>
</table>

To order a copy of the CDT-2007/2008 manual, call the ADA at 800-947-4746 or visit the ADA Web site at adacatalog.org**.

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

Send your NPIs to us on bcbsm.com

As we move closer to May 23, 2007, when electronic submitters need to begin using their national provider identifier for HIPAA standard transactions, we hope that you have taken the time to obtain your NPI.

If you have your NPI, please communicate it to BCBSM so there will be no delay in claim processing. We offer two ways to report your NPI to us:

- Submit your NPI on the BCBSM/BCN Group Enrollment and Change Form. Go to bcbsm.com, click on the “I am a Provider” tab, click on Enrollment, and under “Physicians and Professionals,” choose Dentist from the drop-down box.
- Submit your NPI information on the Excel templates available on bcbsm.com. The templates are based on the national standard provided by the Workgroup for Electronic Data Interchange, or WEDI™, but they have been modified by BCBSM for ease of doing business.

The templates are downloadable from the site and come with instructions. All you have to do is select the form that is appropriate

NPI continued on page 4
Making the link

Research on the connection between good oral health and overall health continues to uncover links between the two. Because of our access to both medical and dental data, Blue Cross Blue Shield of Michigan is in a unique position to advise our members about conditions that show links between their health and good dental care. Recent campaigns include:

• Offering coupons for free dental cleanings to our members who have diabetes and heart disease, and to pregnant women, to educate them about the benefits of good oral hygiene
• Sending birthday cards to subscribers whose children turn 3 years old to encourage a visit to the dentist as a start of lifelong good dental habits
• Revising Class II benefit payment for periodontal maintenance. We’ve reversed the announcement made in the January 2006 Dental Care News and continue to pay 100 percent of the cost of periodontal treatment. Unlike our competition, we’re keeping periodontal maintenance — procedure code D4910 — in Class I to reinforce the message that BCBSM is concerned about the overall health of our members.

Watch this space for further news about how we’re making the link between medical and dental health.

Billing Reminders

Full orthodontic payment applies to cases in progress

In the January 2006 Dental Care News, we announced our new policy of making full orthodontic payment on total treatment claims.

This policy also applies to orthodontic cases in progress or to patients who obtain BCBSM orthodontic coverage after treatment begins.

BCBSM now pays the balance of any unpaid orthodontic benefits for members who were with another insurance carrier and changed to BCBSM while in treatment.

• On paper claims, please indicate your treatment fee and the entire amount paid by the prior carrier using American Dental Association procedure code D8999 (used for a procedure that is not adequately described by a code) and a description of the procedure.

• On electronic claims, submit an 837 transaction with procedure code D8999.

Please include a note the claim is for “remaining benefits due to carrier change” and provide the monthly fee and number of remaining treatment months. BCBSM will pay the remaining benefits minus any applicable deductible or copay, subject to the member’s lifetime benefit maximum.

Use preparation date except for immediate denture

BCBSM requires that you use the preparation date as the date of service when you submit claims for crowns, bridges, partials and dentures. There is one exception: Please use the seat date for an immediate denture so that your extractions are paid correctly.

If a service is not completed or delivered after you have been paid for the claim, be sure to contact Provider Inquiry for instructions on how to return payment to us.

Reminder: Send X-rays on request

As you know, BCBSM changed its dental X-ray policy in 2006. Please do not send X-rays to us unless we request them. This change applies to:

• Paper claims
• Focused Review program claims
• Electronic claims

You should send X-rays and other documentation only in response to nonpayment messages 045, 125, 419, B465, X426 and X509.

For paper claims, these messages instruct you to submit a new claim with X-rays and documentation to the following address:

Blue Cross Blue Shield of Michigan
P.O. Box 1633
Detroit, MI 48231-1633

Please note that all X-rays, including those submitted with status inquiries and coordination of benefits claims, must be sent to P.O. Box 1633.

X-rays or documentation sent to P.O. Box 0049 will be destroyed.
Blue Cross Blue Shield of Michigan offers an array of dental programs to meet customer requests for flexible, cost-effective product designs.

Typically, dentists can choose to participate with BCBSM on a per-claim basis. DenteMax dentists automatically participate by being in the network. Some products require that members visit a DenteMax network provider for treatment to be covered.

The chart below lists all BCBSM dental programs currently offered, participation options, and special product features and requirements.

<table>
<thead>
<tr>
<th>BCBSM Dental Programs</th>
<th>Non-network May participate</th>
<th>DenteMax Always participate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Traditional</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td><strong>Our payment for participating and nonparticipating claims is the same under the Traditional dental plan. BCBSM no longer sells this product but coverage remains in effect for some groups.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Traditional Plus</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Traditional Plus Preventive</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Community Dental</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>FEP Standard Option Dental</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Blue Dental Choice&lt;sup&gt;SM&lt;/sup&gt;</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Blue Dental Choice payment levels will be lower than the BCBSM maximum approved allowance for non-network dentists.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The following products require the member to seek treatment from a DenteMax provider. Services performed by non-network dentists are not payable.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exclusive Dental</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Personal Dental</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>FEP Basic Option Dental</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>BCN Advantage&lt;sup&gt;SM&lt;/sup&gt;</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

Please contact Provider Inquiry for more information.

**NEWS bites**

- Dec. 31, 2006, was the last day for pregnant women to receive a coupon for a free, extra dental cleaning. Those who received coupons have six months from the date of issue to use them. When patients call to schedule their free cleansings, please verify that they have BCBSM dental coverage. See the July 2006 Dental Care News for more information.

- The Blues are enhancing security measures to further safeguard our members’ protected health information. When you call CAREN+ at 800-482-4047, choose “dental” as the type of service you provide (just like you do now). CAREN+ will then ask you to say your authentication ID (tax identification number) to verify the caller is a health care provider, before providing patient information.

- As announced in July, Affiliated Network Services offers real-time eligibility verification through the ANS clearinghouse. Dental offices that submit claims electronically through ANS can verify member eligibility using the 270/271 eligibility transaction. Call ANS at 800-417-6693, ext. 234, or visit ANS on the Web at ANSDirect.com<sup>*</sup> to find out how to take advantage of real-time eligibility verification. The Web site also provides information about a special ANS program for Academy of General Dentistry members for submitting electronic claims and associated transactions.

- BCBSM will be closed Jan. 15, 2007, in observance of the Martin Luther King holiday.

<sup>*</sup>BCBSM does not control this Web site or endorse its general content.
Continuing education offered

**Topic:** “Tobacco Use in Michigan: What Can We Do About It?”  
**When:** Thursday, Jan. 18, 2007, 8:15 a.m.— 4:30 p.m.  
**Where:** BCBSM Lyon Meadows Conference Center, Michigan Room 53200 Grand River Avenue, New Hudson, Mich.  
**Sponsors:** Michigan Department of Community Health  
University of Michigan Health System  
American Lung Association of Michigan  
Blue Cross Blue Shield of Michigan  
**Credits:** Six hours

**Topic:** “Preventive Dental Care in the 21st Century”  
**When:** Thursday, March 22, 2007  
Registration 5:15 p.m., program 6–8 p.m.  
**Where:** BCBSM Metro Service Center Auditorium  
27000 W. 11 Mile Road, Southfield, Mich.  
**Sponsors:** BCBSM and OMNI Preventive Care, a 3M ESPE company  
**Credits:** Two hours

Advance registration is recommended. To register, please call 800-921-8980. For more information or directions, call 248-448-7203 or go to [bcbsm.com/directories/maps/mapsearch.shtml](http://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.

**Internet claim submission**

Tired of submitting paper claims? Then contact us about submitting your claims via the Internet — for free! BCBSM’s Internet claim tool allows direct data entry or accepts a file download from practice management systems that can generate a 2002, 2004 American Dental Association claim print image file.

To enroll for this service, call the BCBSM Electronic Data Interchange Help Desk at 800-542-0945 and select option 4.

web-DENIS is here!

As announced in the special edition of Dental Care News sent to you in December, web-DENIS, BCBSM’s electronic inquiry system for health care providers, now includes dentists! Web-DENIS gives you online access to patient eligibility, benefit and claim status information.

Web-DENIS is a free service available to Michigan dentists and to out-of-state dentists who belong to the DenteMax network. Simply complete and mail the web-DENIS application and the Use and Protection agreement included with the December issue.

**Corrections**

We’d like to clarify the following instructions for completing the web-DENIS Secured Access Application. In the “Dental Provider Code number” field:

- Michigan dentists should provide their BCBSM PIN number
- Out-of-state DenteMax dentists should provide their billing tax ID number

Also, please note the following changes to page 2 of the December 2006 Dental Care News:

- The article entitled “Your user ID – use it or lose it!” should refer to your password. **User IDs do not expire,** but passwords expire every 30 days.
- To access the Guide for Dental Providers (Step 5):
  - Scroll down to the “What’s New” section.
  - Click on **Click here** under the heading, “Guide for Dental Care Providers now available.”