

NEWS dental care

Share the "News" with your office!
Please read, check your box,
and pass it on!

- Receptionist
- Doctor
- Office Manager
- Biller
- Hygienist

Blue Dental: Change is good

Have you heard? Blue Cross Blue Shield of Michigan's dental program is changing. While change is good, it can also be unsettling, so we're taking this opportunity to address some concerns you might have.

First, we've heard there's some confusion about the connection between DenteMax, Blue Dental and BCBSM. Here are the details:

- **BCBSM** is an insurer that provides health coverage, including dental, to groups and individuals. Dental plans are developed and underwritten by BCBSM.
- **Blue DentalSM** is the umbrella term for BCBSM's dental plans. You may have seen the name in our new dental advertising campaign. When consumers think of dental coverage, we want them to think of Blue Dental.
- **DenteMax** was purchased by BCBSM in 2002. It is a wholly-owned BCBSM subsidiary, but it is not an insurance company. DenteMax offers its services as a dental network manager to insurance companies and, in a few cases, to large groups that self-fund their dental care.

The company has a national network of dentists who, by contract, have agreed to a fixed fee schedule as their maximum allowable charges for patients with dental benefit plans using the DenteMax network.

It is vitally important for dental offices to confirm benefits with a patient's dental plan administrator before providing treatment. Some dental carriers have restrictions ranging from time and frequency limitations for standard plan types, to fee and provider restrictions for PPO, HMO or exclusive provider organization dental plans. Since plans change and patients now have more choices, dental offices should check patient coverage at each visit — even for longtime patients.

BLUE DENTAL

continued on page 3

JULY 2007 In this issue ...

Blue Dental SM	1
Dental products	2
Electronic claims	3
Making the link.....	4
NEWS bites	2
NPI	3
Participating with BCBSM.....	4
Web-DENIS for dentists	1

The next issue ...
OCTOBER 2007



Blue Cross
Blue Shield
of Michigan

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

Applying for web-DENIS is easier than ever

We've created a web-DENIS application and Use and Protection Agreement just for dentists. If you haven't taken advantage of online access to BCBSM eligibility, benefit and claim status information, now is the time to do so.

After logging in to bcbsm.com:

- Click on *I am a Provider*.
- Under *News & Updates*, look for web-DENIS and *Provider Secured Services users* and click on *Learn how to sign up*.
- Find *It's easy to sign up for Provider Secured Services*. Both documents [Download the *Dental Secured Access application (PDF)* and *Use and Protection Agreement (PDF)*] are located under the number 1 in the *Dental Providers* section.
- Complete both the application and the agreement.
- Mail them to BCBSM at Mail Code L830, 53200 Grand River Ave., New Hudson, MI 48165, or fax them to 248-486-2214.

Blue DentalSM products offer variety

Last issue, we told you about some new Blue Dental products. As our product menu continues to grow, we offer the following summary of all our products for your reference.

Reminder: If you agree to participate on a claim for any Blue Dental product, you must accept BCBSM's approved amount as payment in full.

Product	Features
Traditional* <small>*BCBSM no longer sells this product, but coverage remains in effect for some groups.</small>	Member chooses any licensed dentist. BCBSM's payment is the same for participating and nonparticipating claims.
Traditional Plus An open access Traditional dental plan with a PPO network feature	Member chooses any licensed dentist without incurring additional out-of-network costs.
Traditional Plus Preventive Our preventive-only plan	Covers preventive (Class I) services only. Member chooses any licensed dentist without incurring additional out-of-network costs.
Community Dental Our PPO dental plan	Members who use a DenteMax network dentist have lower copayments.
Exclusive Dental An exclusive provider organization, or EPO, dental plan	Covers treatment only when provided by a DenteMax network dentist. (Emergency care may be covered outside the network.)
Blue Dental ChoiceSM A voluntary** dental plan <small>**Employer offers plan at group rates; employee pays premiums.</small>	Members can purchase dental coverage through their employers at a group rate. To keep the product affordable, non-network dentists are paid at the network rate, so the approved amount is lower .
Flexible Blue Dental Individual dental coverage	In- and out-of-network coverage for Class I and Class II services. See the April issue of <i>Dental Care News</i> for more details.
Personal Dental Individual EPO dental coverage	Covers treatment for Class I, II and III services only when provided by a DenteMax network dentist. (Emergency care may be covered outside the network.) See the April issue of <i>Dental Care News</i> for more details.
BCN AdvantageSM Preventive dental coverage for BCN HMO Medicare patients	Covers one oral exam and one cleaning every year and X-rays every two years. Treatment covered only when provided by a DenteMax network dentist; DenteMax network providers give members discounts on non-Medicare covered dental services.
FEP Dental plans Two options for federal employees	FEP Standard Option Dental Member chooses any licensed dentist. Members who use a DenteMax network dentist have lower out-of-pocket costs. Not all dental services are covered. FEP Basic Option Dental Basic services are covered when provided by a DenteMax network dentist. (Emergency care may be covered outside the network.)

- Our **2007 provider outreach information fairs** are continuing. See the April issue of *Dental Care News* for a schedule of upcoming fairs and registration information. Due to unforeseen circumstances, the July 17th fair in Alpena has been canceled.
- BCBSM will close Sept. 3 for Labor Day



Have you reported your NPI to BCBSM?

If you have not yet reported your national provider identifier to BCBSM, you still have time. However, we urge you to do so as soon as possible.

To register your NPI:

1. Go to our Web site, **bcbsm.com**, and click on *I am a Provider*.
2. In the *News & Updates* section, click on *NPI – Get It, Report It, Register It*.
3. Click on *How do I submit my NPI to BCBSM?*

4. Choose either the NPI Excel collection template or download the *Individual or Group Enrollment Form*.

For electronic submitters: After you report your NPI as indicated above, you must also register your NPI with our EDI clearinghouse.

Please remember the NPI used on your electronic claims should be that of your billing entity. At this time, when you send us an electronic claim for payment, please include both your NPI and tax identification number to

ensure payment. Also, since we do not currently require NPIs on paper claims, continue to put your tax ID or Social Security number (whichever number you are registered with at BCBSM) in field 51.

If you have other questions, please call the NPI hot line at 800-588-9121 or contact your dental field consultant. If you have questions about BCBSM EDI clearinghouse registration, contact our EDI help desk at 800-542-0945.

Internet tool improves claim submission, payment processes

In our continuing effort to make it easier to do business with the Blues, we offered dentists the capability to submit claims through the Internet in 2006. The advantages of submitting electronic claims are providing great payoffs for dental practices.

One of the many dental providers using the Internet claim submission tool is Gustafson and Morningstar, located in Royal Oak. The office manager, Candy Christie (see photo below), has been using the tool to submit claims since April 2006.

Christie, who previously submitted only paper claims, approached the opportunity to go virtually paperless with great enthusiasm.

The Internet claim submission tool "makes it much more efficient to manage a high volume of claims," she said. "We receive our payments much quicker. Patient information errors are identified immediately. And, the administrative cost and time of submitting claims has been drastically reduced. I also like getting informational updates once I have logged on to the Internet claim submission tool."

If you are currently submitting paper claims and would like the opportunity to use the Internet claim submission tool, please call our Electronic Data Interchange help desk at 800-542-0945.



BLUE DENTAL

continued from page 1

In the case of membership cards like the Macomb and Oakland county programs, the membership ID card clearly indicates that it is not an insurance program and that the individual is fully responsible for all fees. There is no benefit plan administrator to contact in these cases.

We have heard concerns that all dentists will be forced to join the DenteMax network. Not to worry: Blue Dental plans will continue to honor and follow the rules set forth under Public Act 350, which governs how BCBSM does business. Under P.A. 350, BCBSM has a unique per-claim arrangement. Under this arrangement, which was in part negotiated by the Michigan Dental Association, dentists may participate with BCBSM on a per-claim basis. This allows dentists the freedom to selectively participate with BCBSM.

What it means to participate

Blue Cross Blue Shield of Michigan does not require dentists to sign participation contracts. Instead, Michigan Public Act 350 — the law that regulates BCBSM — gives Michigan dentists the option to participate with BCBSM on a claim-by-claim basis.

Participation

When you want to participate on a claim:

- Have the patient sign field 37 of the 2002, 2004 or 2006 American Dental Association claim form.
- We send payment directly to you.
- You may not bill the patient for charges that exceed our

approved amount. You agree to accept our payment as full reimbursement, except for any copays, deductibles or charges for services the member selects but that are not covered benefits under his or her certificate or benefit plan description (includes annual benefit maximum).

Your participation decision is final for each claim. Once a claim has been submitted and processed, you cannot resubmit the claim to change the payment direction to the member for the services billed.

Dentists who belong to the DenteMax network participate on all claims. Even if an alternate

benefit is given by BCBSM, network dentists can balance bill only up to the approved DenteMax fee for the original treatment procedure. This agreement applies to all DenteMax dentists, both in Michigan and outside the state.

Reminder: If you agree to participate on a claim for **any** Blue DentalSM product, you must accept the approved amount and may not balance bill the member, even if the product pays at a lower approved amount.

Nonparticipation

If you do not want to participate:

- Please inform the patient before providing services.
- Leave field 37 of the ADA claim form blank.
- The patient pays you for the services provided.
- You may bill the patient for charges that exceed our approved amount.
- BCBSM pays the patient directly for covered services received at the program approved rate.
- You will not receive a notification voucher from BCBSM.

Making the link



2007 free dental cleaning program includes smokers

As part of our ongoing effort to educate members about the connection between good oral health and overall health, BCBSM recently kicked off its 2007 coupon campaign for those who have diabetes or heart disease. **This year, we also offer free dental cleaning coupons to smokers.**

Again this year, we used our BlueHealthConnection[®] and medical claims data to identify members being treated for diabetes or heart disease and sent each of them a coupon for a free dental cleaning. This year the coupon is valid for one of these procedures:

- D1110, prophylaxis, adult
- D4910, periodontal maintenance

As explained in the "Instructions for dentist" on the back of the coupon, be sure the member has **current** BCBSM dental coverage before beginning the cleaning and accepting the coupon. Also, the offer is for use only by the member to whom it is addressed. (That is, the individual being treated for heart disease or diabetes.) The coupon should not be used by a family member, or the claim will be returned to you as not payable. The expiration date for the coupons is Dec. 31, 2007.

The new coupon program also uses information gathered when BCBSM medical and dental subscribers take our online health risk appraisal and identify that they smoke. These members receive information about our smoking-cessation program, "Quit the Nic," and a coupon for a free dental cleaning.

Dental Care News

A quarterly publication for dentists produced by Blue Cross Blue Shield of Michigan

Co-editor: Dan Artman
Phone: 313-983-1690
E-mail: dartman@bcbsm.com

Co-editor: Susan Neill-Olson
Phone: 248-448-8104
E-mail: solson@bcbsm.com



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