



MASSACHUSETTS

Blue Cross Blue Shield of Massachusetts is an Independent Licensee of the Blue Cross and Blue Shield Association

dentalfocus

Fall 2010

Collaborate ♦ Partner ♦ Support
Focusing on Members' Health

The Value of Dental Blue—for Members, Providers, and BCBSMA

When we go to a grocery store, we select a particular store or items that we believe have value. We determine value according to price, reputation of the product, taste, health benefits, or any other items that we feel is important in making a purchasing decision.

Your Dental Blue® patients do the same thing. They value the Blue Cross Blue Shield brand because of the large provider network and the services covered under their plan. They select your office because of the value they place in the care that you provide to them.

Blue Cross Blue Shield of Massachusetts (BCBSMA), also look at ways to increase the value of our products for members. Since BCBSMA provides coverage for both medical and dental services, we look at ways to increase value not just from a dental perspective, but also from a medical perspective.

For example, this year we expanded our Total Health Solution program to include extra dental benefits for members with a previous diagnosis of oral cancer. We plan to follow the research and continue to offer benefits that make sense, based on a member's medical history, and not penalize providers in the process.

Why Dental Blue Is Distinct

Health plans that do not cover, or have any knowledge of, their members' medical conditions may only look to control allowances paid to dentists. While this may increase economic value to the member, it may decrease the satisfaction of their network providers. Usually, there is a tradeoff—one group benefits at the other group's expense.

At Dental Blue, we believe there are ways to increase value so that all parties benefit. A good example is

our Total Health Solution, which we introduced to our member three years ago. We believe research that has shown a link between oral and overall health, and that you—our provider network—can play a role in helping our members and your patients to have optimal health.

Why Our Total Health Solution Benefits Everyone

With Total Health Solution, members win because they receive extra dental benefits to control infection or inflammation that may have an effect on their heart disease or diabetes, or on a woman's risk of having a low-birth-weight baby. Because of BCBSMA's access to the member's medical history, we can communicate the additional benefits directly to the member. These members are automatically enrolled and receive additional benefits outside of their annual maximum, with no deductible or copayment.

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Andrew Dreyfus Is New CEO of BCBSMA

Andrew Dreyfus recently assumed the role of BCBSMA's new President and Chief Executive Officer. Over the past five years, Dreyfus served as Executive Vice President for Health Care Services, and was previously President of the BCBSMA Foundation. Prior to joining BCBSMA, Dreyfus was an Executive Vice President at the Massachusetts Hospital Association and held senior positions in the Massachusetts Executive Office of Human Services and the Executive Office of Consumer Affairs and Business Regulation.

"I want to thank the Board for giving me the privilege to lead such a highly regarded company during this critical time in health care. Making health care more affordable is, and will continue to be, our company's highest priority," said Dreyfus.



Dreyfus succeeded Bill Van Faasen, who had served as interim President and CEO since March 2010. Van Faasen was recently named Chairman of BCBSMA's Board of Directors. ♦

Dependent Care Coverage: Extension to Age 26 for Dental Blue Plans

The Patient Protection and Affordable Care Act (PPACA), enacted on March 23, 2010, requires plans that provide coverage to dependents to offer coverage to all adult children up to age 26, regardless of the dependent's Internal Revenue Service tax qualification status, marital status, student status, or employment status.

Although the mandate does not apply to dental plans, BCBSMA will be applying the dependent coverage provisions to our Dental Blue plans to make plan administration easier for our accounts.

This change will be effective on account anniversaries beginning January 1, 2011.

Dental accounts with 100 or more employees will have the option to decline this change in eligibility by informing their account executives. ❖



Educating Medicare Advantage Members on Oral and Overall Health

One of the largest growing segments of the U.S. and Massachusetts population is the group aged 65 and older. As of 2006, 13% of the Massachusetts population was 65 or older; this number is expected to increase to 21% by 2030.

As patients get older, their dental needs change. For example, the

2009 Status of Oral Disease in Massachusetts indicates that 16% of this population is without teeth and 44% have lost six or more teeth.

That's why we educate our Medicare Advantage members about taking the steps necessary to protect their oral health.

Our outreach addresses:

- ▶ Dental issues these patients may encounter as they get older
- ▶ The connection between oral and overall health, including the impact of medications on oral health
- ▶ How to communicate effectively with their dentists. ❖

Breaking Down Barriers Between Providers and Patients with Hearing Loss

An important component of good patient care is effective communication between providers and patients. But what happens when your patient is deaf or has hearing loss?

The Massachusetts Commission for the Deaf and Hard of Hearing (MCDHH) estimates that more than 500,000 people ages three and older in Massachusetts have some degree of hearing loss, and approximately 13,000 are unable to hear or understand speech.

To help health care providers, businesses, and other organiza-

tions improve their effectiveness in interacting with this population, MCDHH provides a range of free professional and educational in-service trainings and presentations. These trainings cover a variety of topics, including:

- ▶ Communication Access in Medical Settings – Includes a discussion of site-specific accommodations and communication technology
- ▶ Assistive Technology – Includes visuals and equipment demonstrations
- ▶ Accommodation Assessment – MCDHH can visit your office

and suggests ways to enhance the experience of deaf and hard of hearing patients.

For More Information

For a full list or to request information on scheduling training at your office:

- ▶ Go to www.mass.gov/dph/oralhealth
- ▶ Click on the **For Providers** tab at the top of the screen
- ▶ Select **Communicating with Deaf & Hard of Hearing** (listed under the "Online Services" heading). ❖

Medicare Participating Dentists: Fraud, Waste, and Abuse Training Required By December 31

The Centers for Medicare & Medicaid Services (CMS) requires all Medicare Advantage (MA) and MA Prescription Drug Health Plans to have in place a compliance training and education program, including Fraud, Waste, and Abuse (FWA) training. Medicare participating dental providers must complete FWA training annually. As a reminder, be sure to complete your 2010 FWA training by December 31, 2010.

To assist you in completing this training, BCBSMA has worked with HealthCare Administrative Solutions (HCAS) and its member health plans to assist in streamlining the training process. A website was created that includes a free, online FWA training program for all member health plans to use. Once completed, you only need to attest once per year.

How to Access the Training and Attestation Link Online

To access the 25-minute training on the HCAS website and attest to its completion:

- ▶ Go to www.hcasma.org.
- ▶ Select the **Solutions** tab at the top of the home page, then click on **Medicare Training**.
- ▶ After completing the training, click on the link that reads **ATTESTATION - Attest that you have completed the training**.
- ▶ Print the system-generated confirmation message and retain it for your records. Once you've attested, you'll see the following message: "Your information has been recorded. Thank you."

For questions, please call your Dental Network Manager at **1-800-882-1178**. ❖

Are You Using the Current Version of the ADA Claim Form?

BCBSMA requires that you submit dental claims to us using the most current version of the *ADA Dental Claim Form*, dated 2006 on the bottom left-hand side of the form.

The 2006 form includes designated boxes for your National Provider Identifier (NPI); using older versions of the claim form may lead to claim processing delays or claim denials.

How to Order

To order a supply of the 2006 forms, go to www.adacatalog.org or call **1-800-947-4746**.

You can also download a copy of the form from our BlueLinks for Providers website. Log on to www.bluecrossma.com/provider and click on **Resource Center> Forms>Dental Claims & Request Forms**.

For Electronic Billers

If you bill electronically and do not have the current version in your system, please contact your practice management software vendor for more information. ❖

Get Connected at Yankee Dental

Save the date for Yankee Dental Congress 36, **January 26–30, 2011**, at the Boston Convention & Exhibition Center. The program will include:

- ▶ The latest dental products and materials to keep your office on the cutting edge
- ▶ The Periodontal and Endodontic Fast Track Series, which offers a new lecture and speaker during every hour-long session
- ▶ Ritz-Carlton Customer Service (back by popular demand)
- ▶ Live patient demonstrations and classes
- ▶ Yankee's first High-Tech Playground and Dental Office Design Pavilion with the latest in technology and design
- ▶ Team Development Day with a session on going paperless in your office
- ▶ Entertainment, including a Mardi Gras-style Carnival, a fashion show and luncheon, Cocktails with Clinton (host of the popular TV show "What Not to Wear"), and a Beatles tribute band from Las Vegas.

Registration is now underway. For more information and to learn about Yankee's new group discount, go to www.yankee-dental.com.

We hope to see you there! ❖

Attention Oral Surgeons: How to Bill for Impacted Wisdom Teeth

Scenario

You're a BCBSMA-contracted oral surgeon and have removed impacted wisdom teeth from a BCBSMA member in your office. How should you code your claim?

Coding the CMS-1500 Claim Form

Bill diagnosis 520.6 (disturbances in tooth eruption) in Block 24E and place of service 3 for your office.

For Completely Imbedded Bony Impacts

If the member's teeth were completely imbedded in the bone, bill procedure code D7240.

24. A DATE(S) OF SERVICE		B	C	D		E	F	G	H	I	J
From	To	Place of Service	EMG	PROCEDURES, SERVICES, OR SUPPLIES		DIAGNOSIS POINTER	\$ CHARGES	DAYS OR UNITS	EPSDT Family Plan	ID QUAL.	RENDERING PROVIDER ID #
MM DD YY	MM DD YY			CPT/HCPCS	MODIFIER						
09 01 10	09 01 10	3		D7240		520.6	800 00	4			1234567890
09 01 10	09 01 10	3		D9220		520.6	100 00	1			1234567890
09 01 10	09 01 10	3		D9221		520.6	90 00	2			1234567890

For Partially Imbedded Bony Impacts

For teeth partially imbedded in the bone, bill procedure code D7230.

24. A DATE(S) OF SERVICE		B	C	D		E	F	G	H	I	J
From	To	Place of Service	EMG	PROCEDURES, SERVICES, OR SUPPLIES		DIAGNOSIS POINTER	\$ CHARGES	DAYS OR UNITS	EPSDT Family Plan	ID QUAL.	RENDERING PROVIDER ID #
MM DD YY	MM DD YY			CPT/HCPCS	MODIFIER						
09 01 10	09 01 10	3		D7230		520.6	800 00	4			1234567890
09 01 10	09 01 10	3		D9241		520.6	100 00	1			1234567890
09 01 10	09 01 10	3		D9242		520.6	90 00	2			1234567890

Billing for Anesthesia and Sedation

For:	Bill:	And:	With:
General anesthesia	D9220 (for the first half-hour)	D9221 (for each additional 15-minute increment)	Appropriate units
Intravenous sedation	D9241 (for the first half-hour)	D9242 (for each additional 15-minute increment)	Appropriate units

Always Check Benefits and Eligibility

Since benefits may vary depending on a member's specific benefit design, we encourage you to verify medical benefits and eligibility using one of our technologies, such as Online Services.

View Our Online Presentation for Oral and Maxillofacial Surgeons

Our *2010 Oral Surgery Presentation* for oral and maxillofacial surgeons shows you how our technologies—PaySpan Health, Emdeon DPS, and Online Services—can help save you time and enhance your ability to collect reimbursement faster and more easily.

To access the presentation, log on to our website at www.bluecrossma.com/provider. Then click on **Resource Center>Training & Registration>Course List** and select **2010 Oral Surgery Presentation** from the Dental menu. ❖

Training Update: How Our Electronic Technologies Can Work for You

If you just started using our provider website or if you want to learn more about how our technologies can save you time and money, try one of our *BlueLinks for Providers* or *Emdeon DPS* webinars.

You can attend a webinar from your desk; all you need are a telephone and an Internet connection. To register for a session, log on to www.bluecrossma.com/provider and select **Resource Center**>

Training & Registration> **Course List**, then choose the appropriate course from the Dental menu. Registered participants will receive an e-mail with access instructions prior to the session. ❖

Name of course:	Course description:	Date and time:
<i>BlueLinks for Providers</i>	<ul style="list-style-type: none"> Demonstration of our secure, personalized website 	<ul style="list-style-type: none"> December 1, 2010 1:30 - 2 p.m. January 5, 2011 1:30 - 2 p.m. February 2, 2011 1:30 - 2 p.m.
<i>Emdeon DPS: Online Web Tool</i>	<ul style="list-style-type: none"> Demonstration of this multi-payer website that you can use to access eligibility and benefits and claim status (only for BCBSMA members) Learn tips, techniques, and best practices. 	<ul style="list-style-type: none"> December 2, 2010 1:30 - 2 p.m. January 6, 2011 1:30 - 2 p.m. February 3, 2011 1:30 - 2 p.m.

Important Correction to NPI Article in the Summer Issue of *Dental Focus*

In the Summer 2010 issue of *Dental Focus*, on page 6, we published questions and answers to explain the correct use of National Provider Identifiers (NPIs) on the ADA claim form. While the information in the article itself was accurate, the illustration showing the proper location of the Type 1 and Type 2 NPIs was labeled incorrectly. We apologize for this error.

The sample claim form below shows the correct use of the Type 1 and Type 2 NPIs. The Type 1 (individual) NPI should be placed in both Box 49 and Box 54 when the Billing Dentist is the same as the Treating Dentist. When using a Type 2 (organizational) NPI, it should always appear in Box 49 under the Billing Dentist or Dental Entity section.

We have updated the online version of Summer 2010 *Dental Focus* with the correct illustration.

To access the updated version, go to www.bluecrossma.com/provider and click on **News**> **Dental Focus**>**Past Issues**, then select **Summer 2010**. ❖

Sample ADA Claim Form

BILLING DENTIST OR DENTAL ENTITY (Leave blank if dentist or dental entity is not submitting claim on behalf of the patient or insured/subscriber)			TREATING DENTIST AND TREATMENT LOCATION INFORMATION		
48. Name, Address, City, State, Zip Code			53. I hereby certify that the procedures as indicated by date are in progress (for procedures that require multiple visits) or have been completed.		
49. NPI			X _____ Signed (Treating Dentist)		Date
50. License Number		51. SSN or TIN		54. NPI	
52. Phone Number () -		52A. Additional Provider ID		55. License Number	
				56A. Provider Specialty Code	
				56. Address, City, State, Zip Code	
				57. Phone Number () -	
				58. Additional Provider ID	

Type 2 NPI (Organizational)

Type 1 NPI (Individual)

CDT Code Changes Have Been Approved for 2011-2012

The Code Revision Committee of the American Dental Association (ADA) meets twice each year to review requests submitted by individuals or organizations that would seek CDT code changes, such as the addition of new codes, the deletion of current codes, or changes to existing codes. Codes are updated to reflect procedures that adequately help to maintain patient records and support the dental claim submission process.

The approved changes for the 2011-2012 cycle consist of eight new CDT codes and 18 codes with changes to the code's descriptor or nomenclature. No code deletions were approved in this cycle.

Dental Blue will be incorporating the CDT changes into our *Dental Procedure Guidelines and Submission Requirements*, effective January 1, 2011. Your Dental Network Manager will also incorporate 2011 CDT updates into our spring regional office presentations.

Criteria for CDT Code Changes

The change criteria, which can be found on the ADA website at

www.ada.org, look at the following questions:

- ▶ Is the procedure currently taught in an accredited dental school, or in an accredited post-graduate program?
- ▶ Is the procedure currently accepted dental therapy?
- ▶ Does the procedure apply to treatment provided by generalists and specialists without differentiation?
- ▶ Does the procedure endorse or reflect a product-specific technique?

The Change Process

The code set is updated every two years to reflect current research, improvements in technology and materials, and overall patient practice patterns in dentistry. The ADA, specialty organizations, general and specialty dentists, hygienists, payers, and others who have an interest in the dental claim submission process all have the chance to submit requests for review. Suggestions for code additions should represent a distinct procedure that is part of current dental practice, is not currently included

in the code set, and is not a component of a larger dental procedure. Suggested revisions should address unclear or ambiguous areas. Deletions should address existing codes that are no longer considered relevant in contemporary dental practice.

All dentists and their staff should feel empowered to submit requests for changes they feel will improve the documentation and recording of the treatment process. They should also familiarize themselves with current CDT codes and use them appropriately.

Resources

The CDT 2011-2012 codebook is available through the ADA catalog at www.adacatalog.org or by calling 1-800-947-4746. Additionally, the ADA website has more information on the code review and request submission process. ❖

The Value of Dental Blue—for Members, Providers, and BCBSMA

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Providers also win because they are able to provide additional benefits to these members, without the need to collect a copayment. As a result, the members' dental benefits are reserved for other necessary dental treatment.

By integrating medical and dental claims data and by providing extra dental benefits for our members in

situations where it makes sense, the outcome is a healthier member—that makes Dental Blue a winner as well.

Addressing the needs of members, providers, accounts, and the dental plans collectively can be a challenge; however, BCBSMA is committed to developing programs where everyone comes out ahead.

Questions?

For more information about our Total Health Solution, including our Enhanced Dental Benefits toolkit, please call your Dental Network Manager at 1-800-882-1178. Or, call our Dental Director, Dr. Robert Lewando, at 617-246-9784. ❖

Highlights of New Board of Registration in Dentistry Regulations

The practice of dentistry has changed markedly over the last decade. Reflecting recent changes, the Board of Registration in Dentistry (BORID) has approved new regulations, which went into effect August 20, 2010. These include changes to past regulations and the addition of new regulations that are now in effect. Here are some important items to note:

- The number of CEUs required for a dentist to maintain active licensure remains at 40 per-two year cycle; the number of CEUs that a dental hygienist must take remains at 20 per two-year cycle. The CEU's must be obtained during the two calendar years preceding January 1 of the year of the expiration of the license. During the licensing cycle, dentists may use five CEUs under the "general attendance" category while dental hygienists may use four CEUs. All records showing proof of continuing education should be kept for three years. At renewal, all dentists and dental hygienists must have documentation of continuing education for infection control and documentation demon-

strating current certification in American Red Cross Cardio-pulmonary Resuscitation/ Automated External Defibrillation for the Professional Rescuer or current certification in the American Heart Association Basic Life Support for Healthcare Providers (BLS).

- Any provider who holds an anesthesia permit is required to have advanced cardiac life support (ACLS) documentation at a minimum. Further requirements could be required, depending on the level of the anesthesia permit issued.
- All dental records, including radiographs, should be kept for a minimum of seven years after the last patient encounter, or three years from when the patient has reached the age of majority, whichever is later.
- All licensees and dental auxiliaries providing dental services to a patient, or assisting a dentist in the direct care or treatment of a patient, must wear a name tag with the individual's name and professional title and function.

- Any practice employing a non-owner dentist needs documentation of appointment of a dental director that is responsible for implementing the policies of the office and making sure the office is in compliance with all local, state and federal regulations.

- Any dental office administering local anesthesia must have an automated external defibrillator and be familiar with its use.

These regulations are just a few of the changes to the new document. It is the responsibility of everyone involved in the care of dental patients to read, understand, and comply with these new regulations found at the website listed above.

To view the complete list of BORID regulations, go to <http://www.mass.gov/dph/boards/dn>. ❖

BCBSMA Requires a Social Security Number for Initial Credentialing

Our Dental Network Managers are often asked why a Social Security number (SSN) is required on an initial application for enrollment in our Dental Blue products.

BCBSMA requires this information so that we can:

- Verify your information in credentialing and contracting
- Assure we properly align your appropriate NPI number with the corresponding tax ID number (TIN) or SSN in our database.

We understand concerns about sharing sensitive information, and ensure you that BCBSMA has systems in place to protect your personal information. If you have any questions, please call your Dental Network Manager at 1-800-882-1178. ❖



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ROUTING BOX

Date received: _____

Please route to:

- Dentist
- Office Manager
- Dental Hygienist
- Dental Assistant
- Other: _____

Not registered for our website? [Go to www.bluecrossma.com/provider](http://www.bluecrossma.com/provider) and click on **Register Now.**

Scheduling an Office Visit with Your Dental Network Manager

Do you have billing questions you can't resolve over the phone? Or, perhaps you need help with the registration process for our technologies, such as BlueLinks for Providers or Emdeon DPS. Your BCBSMA Dental Network

Manager is available for onsite education visits and can help answer claims or billing-related questions, demonstrate technology tools to help your office improve its efficiency, and explain our procedures and policies. ❖

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