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The Incisor

INSIDE

2Northeast Delta Dental to
offer plans with Office Visit
CopaymentsNew Orthodontic
Information on
Northeast Delta Dental's
Web Page**3**Long-time Participants
RecognizedConsultants' Corner—
A Friendly Reminder**4**

New Participating Dentists

Office Changes or Updates

Dr. Thurston J. Carpenter
Memorial Golf Tournament

Insert

Northeast Delta Dental
Clinical Documentation
RequirementsOral Surgery Review to End
October 1, 2012

Tom Raffio
President & CEO
Northeast Delta Dental

Health Care Reform Update

It is no longer news that the Supreme Court issued its ruling on the constitutionality of the Patient Protection and Affordable Care Act (ACA) just before the July 4th holiday. Because the mandate was upheld, Northeast Delta Dental's work on exchanges and our direct to consumer (DTC) efforts have been largely unaffected. Our advocacy efforts continue in each of our three states to see that a full range of dental plans are offered on the exchanges. And, as before, we continue to use the anticipated market shake-up to sell directly to more consumers.

Front burner issues in Northeast Delta Dental's advocacy work with Maine, New Hampshire, and Vermont state regulators include requesting a requirement that all carriers price and offer dental products separately from health plans. Another is asking the states to maintain the current system of separate deductibles and cost-sharing for health and dental plans.

Under the ACA, products sold in the individual and small group markets could have merged deductibles and cost-sharing. The host of tribulations flowing from that would include providers needing access to a joint system of all medical and dental carriers' real-time, cost-sharing information for patients so that the proper amount would be collected from patients at the time of service. All regulators with whom we have raised this issue have been appreciative of our analyzing the unintended consequences of these ACA provisions, and they recognize the formidable challenges merging deductibles and cost-sharing would present.

Please visit our corporate website, www.nedelta.com, for regular updates on our health care reform efforts.

Residential Mortgage Services Purchases PPO Dental Benefits

Northeast Delta Dental is pleased to announce that Residential Mortgage Services, a direct mortgage lender with multiple offices throughout Maine, New Hampshire, Massachusetts, and Connecticut, has selected Delta Dental Plan of Maine as its dental benefits administrator effective October 1, 2012. This group's over 250 enrolled subscribers and their dependents will be enrolled in a plan utilizing Northeast Delta Dental's PPO network.

Claims payment to all providers, including Premier network providers, will be based on the PPO network allowances. Residential Mortgage Services was a past client of Northeast Delta Dental, and they expect to increase their enrollment throughout the coming year as they are expanding their operations. They were excited to see the growth in our PPO network and the value it will provide their employees, as well as themselves as an employer. Please welcome these new patients into your practice.

Northeast Delta Dental to Offer Plans with Office Visit Copayments

Responding to customer requests, effective October 1, 2012, Northeast Delta Dental will begin offering certain dental benefit plans that include an Office Visit Copayment (OVCP). The plans will first be available in the Individual and Small Group markets, and will later be available to any group customer wishing to add such a provision.

The OVCPs will generally range from \$10 - \$20 per office visit, and may be collected from the patient at the time of service. When applicable, OVCPs will be displayed online through Northeast Delta Dental's Benefits Look-up tool under "Exceptions for Your Plan."

What does this mean to Member Dentists? The following Q&A should answer most of your questions.

Q. How does the OVCP work?

A. Plans with an OVCP will work in much the same way as many of today's medical plans do; i.e., the OVCP is the patient's responsibility and is typically paid at the time of service. The OVCP will apply whenever an office visit produces a claim for which services are payable, and benefits are available, under an eligible patient's policy.

Q. Are there times when the OVCP does not apply?

A. Yes, the OVCP will not apply in the following situations:

- for multi-visit procedures for which no additional charge is allowed under a patient's policy, such as crowns and root canals (the OVCP will apply on the first office visit only).
- for visits producing claims for services not covered under a policy, claims for services for which the patient has not satisfied any applicable waiting period, or claims for services received when the patient is not eligible for coverage or has no remaining annual maximum.
- for duplicate claims or duplicate or disallowed services.
- for services covered under the orthodontic benefit class.

Q. Do I have to collect the OVCP at the time of service?

A. No, you do not have to collect the OVCP at the time of service. However, regardless of whether or not the OVCP has been collected, Northeast Delta Dental's final payment will be reduced by the OVCP amount, and the OVCP will appear as part of the patient's responsibility on the Explanation of Benefits.

If you have additional questions, please contact our Customer Service Department at 800-832-5700.

New Orthodontic Information on Northeast Delta Dental's Web Page

Recently, an insurance coordinator from one of our participating orthodontic offices called with feedback regarding the orthodontic benefits on www.nedelta.com. She suggested we add the orthodontic payment schedules that vary from the standard on the "My Benefits" page.

Northeast Delta Dental's standard orthodontic payment schedule for eligible patients is 25% of the benefit paid in the first month, followed by automatic monthly installments to the end of the treatment time or 24 months, whichever occurs first. The patient must remain eligible during the treatment period to receive the monthly installments.

Dental office staff are now able to confirm this information on the "My Benefits" page of www.nedelta.com. The same page displays the lifetime orthodontic maximum amount, the remaining orthodontic benefit, and the orthodontic payment schedules that vary from the standard. These orthodontic payment schedules are listed in the "Exceptions for Your Plan" on the first page.

Exceptions for Your Plan

- Covered Orthodontic treatment receives one lump sum payment at banding for individuals in active treatment.

Maximums and Deductibles



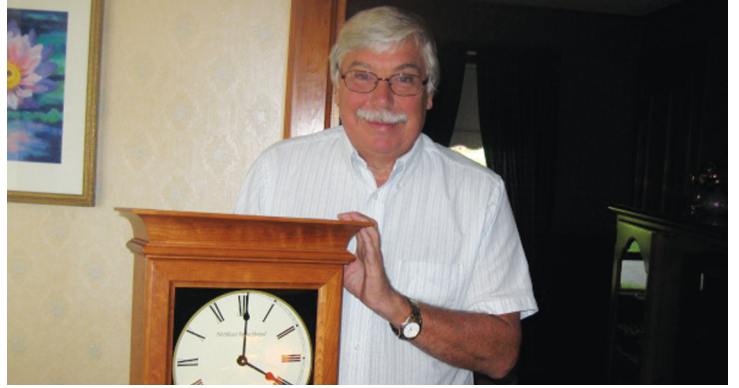
I extend a hearty thank you to our dental office friends for the feedback and suggestion. We appreciate the gift!

- Cathy Frankel, Manager, Customer Service

Long-time Participants Recognized



Dr. Richard Vachon of Manchester, New Hampshire, was presented with a handcrafted clock in celebration of his 35 years of participation with Northeast Delta Dental.



Dr. Donald Dennison of Bridgton, Maine, was presented with a handcrafted clock in honor of his 35 years of participation with Northeast Delta Dental.



Dr. Angela Scarfarotti of Biddeford, Maine, was presented with a handcrafted clock to celebrate her 35 years of participation with Northeast Delta Dental.



Dr. James Brackett of Hanover, New Hampshire, chose a \$450.00 donation to the Arkansas Children's Foundation in honor of his 45 years of participation with Northeast Delta Dental.



Consultants' Corner A Friendly Reminder

Please submit the most current radiographs available for the consultants to review.

Don't forget to place a date on all radiographs submitted, along with the right and left sides clearly indicated.

These simple steps will help expedite the review and your reimbursement. Thank you.

New Participating Dentists

We are pleased to announce that the following dentists have joined Northeast Delta Dental's networks in Maine, New Hampshire, and Vermont:

Maine

David Wicks DDS
Anna Czechowski DMD
Tamar Diamond DMD
Michelle Mazur Kary DDS
Toby Clarkson DMD
Jean-Paul Boudreau DMD
Gary Ferguson DMD
James Moshier DMD
Keely O'Connell DDS

Richard Yeaton DDS
Danielle Hinton DMD

Vermont

Philippe Charlebois DMD
Michael Gelfman DDS
Robert Miller DDS
David Jette DDS
James Freeman DDS

New Hampshire

William Blatt DMD
Pasquale Nappo DMD
Nicholas Papapetros DMD
Michael Balfour DDS
Akhtar Khan DMD
Roland Bryan DDS
Lee Ann Cote DMD
Alexis Fraser DMD
Diana Carrillo DDS
Elizabeth Franco DMD
Xing Fan DMD
Victor Stetsyuk DMD



Office Changes or Updates

Please contact the Provider Services department at 800-537-1715, extension 1100, for any dentist and/or office changes or updates. These include, but are not limited to:

- New and/or change of physical or payment address(es)
- New and/or change of phone number(s)
- A dentist joining or leaving an office
- Closing of an office or practice
- Tax information changes
- New and/or changed NPI information
- Retirement
- Sale or purchase of a practice
- License status updates

Please be sure to notify the Provider Services department of all changes/updates **in advance** to ensure proper claims payment.

15th Annual

Dr. Thurston J. Carpenter Memorial Golf Tournament

Friday, September 28, 2012
The Woodstock Inn & Resort Golf Club
Woodstock, Vermont

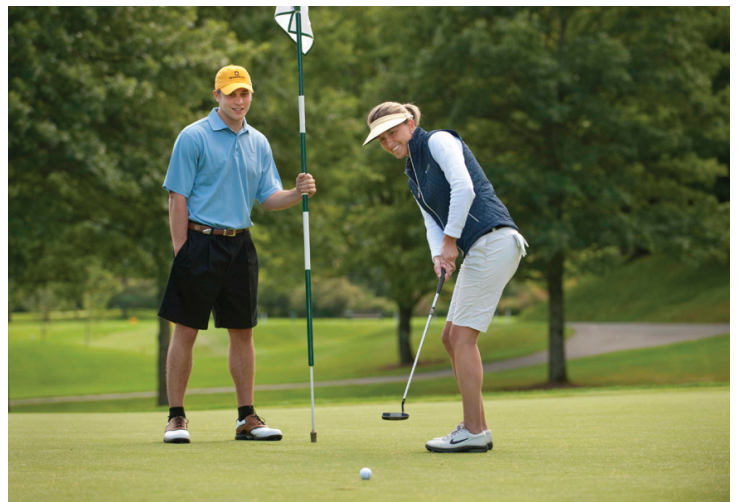
The Woodstock Inn & Resort Golf Club, named one of the world's "top 100 golf resorts" (*Golf Magazine*), boasts an 18-hole masterpiece designed by legendary course architect, Robert Trent Jones, Sr.

Featuring a chance to win a new vehicle
with a hole-in-one

**Proceeds benefit the
Northeast Delta Dental Foundation**

Entry fee is \$160 per person or
\$600 per foursome.

For more information, please contact
Patti Capone at 603-223-1348 or
pccapone@nedelta.com.



Please post for staff reference

NORTHEAST DELTA DENTAL CLINICAL DOCUMENTATION REQUIREMENTS

Quality radiographs and legible written documentation are necessary to make an accurate benefit determination. Non-diagnostic radiographs and illegible written documentation will be returned, and benefit determination will be delayed. On occasion, Northeast Delta Dental's professional reviewers will request diagnostic or post-operative radiographs concerning other procedures, not listed below, to assist them in their benefit determinations. Post-treatment reviews and requests for radiographs will also be made on a random basis to verify treatment.

RADIOGRAPHS

Northeast Delta Dental now scans all radiographs. Please mount and date the intraoral radiographs, particularly the complete series, before sending them to Northeast Delta Dental for review. It is also essential to indicate "Left" and "Right" on all radiographs. Please indicate the dentist's name and address and the patient's name.

RADIOGRAPHS BEING SUBMITTED FOR PREDETERMINATION OR PAYMENT

Unless previously predetermined, all claims for the procedures below will require charting, clinical notes, and/or x-rays as indicated.

If more than one quadrant is predetermined, it is not necessary to submit charting and x-rays with each claim for payment. Simply fill in the date(s) of service on the original Predetermination Voucher, or a photocopy of it, or make a note on the claim indicating the predetermination number. (You may use the COMMENTS section on electronic claims to indicate this information.)

INDIVIDUAL CONSIDERATION

Remember to include a brief narrative on a claim when a higher fee is being charged due to circumstances, reflecting additional time and/or materials. Without calling this to our attention, your submitted fee will be reduced to your fee on file.

Northeast Delta Dental's professional reviewers may require radiographs or other documentation before approving payment where individual consideration of a higher fee is requested.

RADIOGRAPHICALLY EVIDENT?

If a condition is not radiographically evident to you, it may not be evident to our professional reviewers. Please make note of any existing conditions which can only be seen clinically, so that our professional reviewers can make benefit determinations based on all the facts the first time through.

All required clinical documentation may be submitted as electronic attachments. For more information, please contact Tesia-PCI at 800-724-7240 or info@Tesia.com.

The following procedures routinely require submission of diagnostic radiographs and periodontal charting for benefit determination purposes:

- D4260** Osseous surgery (including flap entry and closure) - per quadrant - four or more teeth
- D4261** Osseous surgery (including flap entry and closure) - per quadrant - one to three teeth
- D4263** Bone replacement graft - first site in quadrant
- D4264** Bone replacement graft - each additional site in quadrant
- D4274** Distal or proximal wedge procedure (when not performed in conjunction with surgical procedures in the same anatomical area)

The following procedures routinely require submission of periodontal charting only for benefit determination purposes:

- D4210** Gingivectomy or gingivoplasty – per quadrant - four or more teeth
- D4211** Gingivectomy or gingivoplasty – per quadrant - one to three teeth
- D4240** Gingival flap procedure, including root planing - per quadrant - four or more teeth
- D4241** Gingival flap procedure, including root planing - per quadrant, one to three teeth

The following procedure requires clinical notes and x-rays; or a photo, if available. Procedure is not covered when performed on the same date of service as a crown or restoration:

- D4249** Clinical crown lengthening - hard tissue

Oral Surgery Review to End October 1, 2012

Effective October 1, 2012, Northeast Delta Dental will no longer require routine submission of radiographs and clinical notes for oral surgery procedures. When we initiated this review, our stated intent was to improve the accuracy of coding for submitted oral surgery procedures and to create a common understanding between Northeast Delta Dental and our participating dentists regarding the descriptions used in the current edition of the American Dental Association Current Dental Terminology (CDT). We will continue to monitor oral surgery and other claims using a focused review process. Individual dentists whose coding practices fall outside benchmark norms may continue to have claims reviewed.

To make the claims review process work efficiently and accurately, please consider the following recommendations and requirements for clinical documentation:

- **Provide clinical documentation with sufficient information to support the claim.** Clinical notes provided to review a claim should accurately describe the procedure and be consistent with the current CDT codes. Example: A clinical note that states “surg ext #1” with an ambiguous radiograph does not provide sufficient clinical information to approve a claim for CDT code D7210 (surgical removal of erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated).
- **Write legibly if using handwritten notes.** Your staff may have learned to decipher your handwriting, but illegible notes simply delay the adjudication of claims. Electronic dental records avoid this issue entirely.
- **Avoid non-standard abbreviations.** Abbreviations rarely contribute to the clarity of clinical notes and when unfamiliar to our consultants, may slow the review of your claim.
- **Do not submit separate narratives or alter clinical notes when submitting claims for review.** Since the clinical documentation written at the time the service is provided should stand on its own, there is usually no reason to submit a narrative separate from the clinical record. When you must amend a clinical note to more accurately describe the procedure, create a separate entry in the clinical record with the date the amendment was made. For minor corrections to handwritten notes, you may line through, initial and date the changes. A note that has been altered to appear to be the original entry with the same date of service will not be accepted.
- **Avoid the use of checklist forms.** Offices are increasingly using checklist forms to record clinical procedures that in many cases make it more difficult to review claims accurately and efficiently. A thorough and legible clinical narrative remains the gold standard when submitting claims for review.
- **Sign or initial all entries.** All entries submitted for claims adjudication should be signed or initialed by the treating provider, especially in offices where patients may see multiple providers for their care.

The claim review process is an essential part of Northeast Delta Dental’s obligation to our subscribers and group purchasers. We want to perform this function with the least possible administrative burden for our participating dentists. Please get in touch with me if you wish to learn more about our consultant review process or have suggestions for how we can improve it.

Shannon E. Mills, DDS, Vice President, Professional Relations and Science