🛆 DELTA DENTAL

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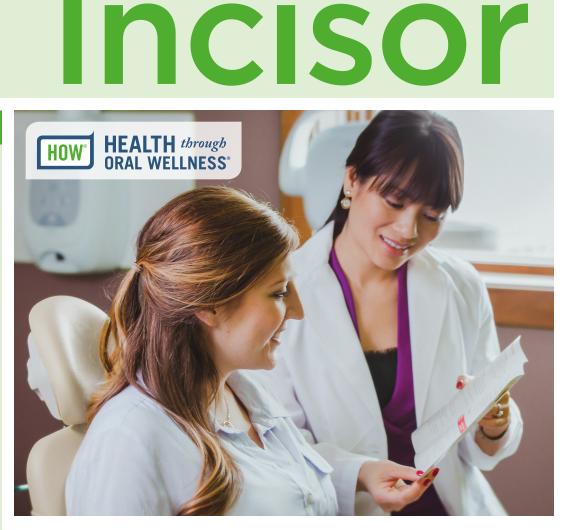
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"I understand I need it, but is it covered?"

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- Dental benefits, like treatment plans, are most effective when they are personalized and linked to evidence-based benefits and care.
- Our industry-leading Health through Oral Wellness* [HOW*] program can help you create a patient-centered clinical experience that builds patient satisfaction and loyalty.
- Using our free state-of-the-art risk assessment tool can enhance your practice and qualify eligible patients for additional preventive benefits*.
- The HOW* program can help you improve patient acceptance of treatment, patient oral and overall health, and your bottom line.

At Northeast Delta Dental, we understand that some patients need more dental care than others. That's why we offer HOW[®].

For more information, contact a member of Provider Services at 1-800-537-1715 x1100.

*Additional preventive benefits are subject to the provisions of your patient's Northeast Delta Dental policy

Affordable Care Act Update

The Affordable Care Act's online health insurance marketplaces' open enrollment period came to a close at the end of January. While final enrollment numbers are not yet available, early reports released on January 29 suggest that nationwide 11.6 million people had signed up for or renewed health plans on state and federal exchanges, with a further surge of enrollments expected prior to January 31. This rate puts enrollment on a pace to match or exceed totals for 2015, when 11.7 million Americans enrolled for health plans through exchanges.

The enrollment trend in Maine and New Hampshire is similar, with enrollment numbers looking to match or exceed last year's. In both states, roughly 20 percent of those enrolling are doing so for the first time. The increase in first-time enrollments may be due to the increase in penalties for non-compliance with the individual mandate, which requires most individuals to maintain minimum essential healthcare coverage or face a financial penalty for noncompliance.

Vermont's enrollment figures have been held back by problems with the state-run exchange, Vermont Health Connect. Throughout its first two years, the exchange suffered from technology problems that caused significant backlogs in processing consumer requests to make changes to their policies. By the fall of 2015, Vermont Health Connect reported that it had significantly reduced its backlog. However, technology problems returned during the 2016 open enrollment period. As of late January, Vermont Health Connect had a backlog of 5,700 customer change requests on an exchange servicing 33,000 enrolled consumers. Further, Vermont Health Connect's third party biller was holding nearly \$6 million in funds owed to insurers. Vermont Health Connect is hopeful that a software upgrade will address these issues. Until these issues are resolved, the House Health Care Committee has decided to bring Governor Shumlin's health care reform team in to testify at weekly hearings to determine whether the state should move to the federal exchange. There has been no indication from Governor Shumlin that he is willing to make such a move at this time.

In 2014, the New Hampshire State Legislature and Governor passed the New Hampshire Health Protection Plan (NHPP), approving Medicaid expansion under the Affordable Care Act for the two-year period during which the federal government paid 100 percent of the cost of expansion. With that two-year term ending December 31, 2016, lawmakers have proposed a bill to reauthorize the NHPP to maintain Medicaid coverage for the more than 45,000 New Hampshire residents covered under the expanded program. The drive to reauthorize the NHPP has been given added impetus by the state's opioid epidemic.

The proposed NHPP reauthorization, which has the support of the Business and Industry Association and others, would finance the drop in federal funding through voluntary contributions from hospitals and insurers. The reauthorization plan proposes work requirements for some recipients and imposes emergency room copays to discourage costly overuse of emergency room services. The House Health, Human Services and Elderly Affairs Committee voted 17-1 to support the two-year reauthorization in early February.

Maine remains one of 20 states that has not expanded Medicaid under the Affordable Care Act. Although some legislators have proposed a bill to expand Medicaid in Maine, Governor LePage has promised to veto it.

Quick Tips for Expediting Your Claims

- Don't forget to submit claims using the 2016 CDT procedure code set for dates of service on or after January 1, 2016! Procedure codes that were deleted by the ADA will be returned to the office to be corrected and resubmitted.
- 2. Northeast Delta Dental has updated our Clinical Documentation Requirements to accommodate the 2016 CDT procedure code set. This document is included in this issue of the Incisor, and is posted on the provider page of our website, **NortheastDeltaDental.com**. Claims submitted without the required documentation will be returned to the office for resubmission. Should you have any questions about clinical documentation necessary for claims submission, please contact Professional Relations at 1-800-537-1715.
- 3. In order to expedite processing of your claims, please do not split claims for treatment completed on the same date of service. Be sure to list all treatment completed on the same date of service on the same claim. This will also ensure that the office visit copay will only be taken once per date of service for patients whose dental benefit plan includes an office visit copay. Submitting multiple claims for the same date of service results in an office visit copay being taken on every claim.

American Heart Association's Fit-Friendly Worksites Program

Northeast Delta Dental is committed to providing physical activity and wellness opportunities for employees and was recognized as a 2015 Gold Level Recipient of the American Heart Association's Fit-Friendly Worksites Recognition program in January 2016.

The Fit-Friendly Worksites Program is a catalyst for positive change. Worksites throughout the nation can be part of the initiative, making the health and wellness of their employees a priority.

For more information on the Fit-Friendly Worksites initiative, or to learn more about how your office can be recognized for your health and wellness initiatives, visit the American Heart Association's website **here**.



Vermont Dentists Benefit from the Vermont Educational Loan Repayment Program

Delta Dental Plan of Vermont recently awarded a community match grant to two Vermont dentists for the 2015-2016 year. For five years, Delta Dental Plan of Vermont has contributed to the success of the Vermont Educational Loan Repayment Program for Dentists by awarding matching grants. The University of Vermont College of Medicine Area Health Education Centers (AHEC) administers the program on behalf of the State of Vermont.

Through recruitment and retention, the goal of the program is to ensure a stable and adequate supply of dentists to meet the oral health care needs of Vermont citizens and especially to increase access for the Medicaid population. It provides repayment of educational loans for dentists serving in designated shortage areas or in documented special need areas in the state. Recipients must sign a service agreement contract and practice a minimum of 20 hours per week at designated sites.



Cheyanne E. Warren, DDS

Dr. Warren of Stowe, Vermont practices general dentistry and dental surgery at The Health Center in Plainfield. The Health Center is a practice engaged in dentistry, family medicine, mental health, and diagnostic radiology, with services available to Medicare and Medicaid patients and other vulnerable populations. Dr. Warren is a Vermont native who is committed to practicing in Vermont. Her educational background includes earning a Masters of Biochemistry, a Doctor of Dental Surgery, and completing Advanced Education Study in General Dentistry, all at Virginia Commonwealth University in Richmond, Virginia. During her advanced studies and residencies, Dr. Warren provided dental services as a volunteer in week-long missions to underserved Virginia communities and at the Charlottesville Free Clinic.

Dr. Warren's many interests include playing the piano, long-distance running, skiing, fly fishing, cycling, soccer, and water sports. She met her husband, now a Marine Corps reservist, while he attended The United States Naval Academy. They have an infant son.

Ronald St. John, DMD

Dr. Ronald St. John of Newport, Vermont practices general dentistry in Island Pond. Dr. St. John earned a Bachelor's degree in biology at the University of North Florida in Jacksonville and a Doctor of Dental Medicine degree from the University of Florida College of Dentistry in Gainesville. He first practiced dentistry at Birchwood Dental Centre in Newport, Vermont, where he received many referrals from North Country Hospital. He now practices dentistry at Island Pond Health and Dental Center, a Federally Qualified Health Center. This health center serves a significant number of Medicaid and Medicare patients in a rural, underserved region of Vermont's Northeast Kingdom. Dr. St. John and two of his dental hygienist colleagues participate in Vermont Head Start's Tooth Tutor program.

Dr. St. John is an avid hockey fan and enjoys crosscountry skiing, cycling, and hiking. He and his wife have two teenage sons.



Visit www.vtahec.org for more information about the Vermont Educational Loan Repayment Program for Dentists.

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.

The following procedures routinely require submission of a pathology report for benefit determination purposes:

- **D0472** Accession of tissue, gross examination, preparation & transmission of written report
- D0473 Accession of tissue, gross & microscopic examination, preparation & transmission of written report
- **D0474** Accession of tissue, gross & microscopic examination, including surgical margins, preparation & transmission of written report
- **D0475** Decalcification procedure
- **D0476** Special stains for micro-organisms
- **D0477** Special stains, not for micro-organisms
- **D0478** Immunohistochemical stains
- **D0479** Tissue in-situ hybridization, including interpretation
- D0480 Accession of exfoliative cytological smears, microscopic examination, preparation & transmission of written report
- D0481 Electron microscopy
- **D0482** Direct immunofluorescence
- **D0483** Indirect immunofluorescence
- D0486 Laboratory accession of transepithelial cytologic sample, microscopic examination, preparation & submission of written report
- **D0502** Other oral pathology procedures, by report
- D7285 Biopsy of oral tissue hard
- D7286 Biopsy of oral tissue soft
- D7288 Brush biopsy transepithelial sample collection

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

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
- $\textbf{D4241} \quad \text{Gingival flap procedure, including root planing per quadrant one to three teeth}$

The following procedure requires diagnostic radiographs, clinical notes and 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

The following procedures routinely require submission of clinical notes and diagnostic radiographs:

D4274 Distal or proximal wedge procedure (when not performed in conjunction with surgical procedures in the same anatomical area) **D7251** Coronectomy - intentional partial tooth removal

The following procedures have benefit limitations that require additional clinical documentation for review by the dental consultants:

- 1. Any "Unspecified" procedure codes ending in two nines (99) are by report and subject to review. Clinical notes, a narrative and radiographs (if applicable) are required to assist the dental consultants in determining if the procedure can be approved for benefits.
- 2. Charges for more than two quadrants of osseous surgery (D4260) performed on the same date of service are disallowed. Documentation is required regarding the appointment time and circumstances necessitating the number of quadrants of osseous surgery being performed. This is in addition to the standard requirement for clinical notes and pre-operative radiographs for osseous surgery submissions.
- 3. Charges for more than two quadrants of periodontal scaling and root planing (D4341) performed on the same date of service are disallowed. Periodontal charting and documentation are required regarding the appointment time and circumstances necessitating the number of quadrants of scaling and root planing being performed.
- 4. Charges for more than one hour of general anesthesia (D9223) or IV sedation (D9243) performed on the same date of service are denied. Documentation is required regarding the circumstances necessitating more than one hour of general anesthesia and/ or IV sedation being performed on the same date of service.

Attention Office Managers: Take Charge of Your Career with New England Dental Office Managers!

The New England Dental Office Managers (NEDOM) Study Group was created to be different from the rest. We wanted a study group that focused on subjects that were relevant to the administrator's needs within the practice. We bring in top educators in the dental field to present on hot topics within the dental industry. It's also a great way to meet many talented and knowledgeable dental office administrators and to create lifelong friendships. Dental Practice Administration is not just a job, it's a career!

We have an amazing schedule set up for the Maine chapter of NEDOM 2016. Dr. Mitch Couret and Eleanor Vien of Northeast Delta Dental updated us on "What's New at Northeast Delta Dental?" on February 5. All office administrators in New England are welcome to register to attend. Visit <u>www.NEDentalManagers.com</u> for more information.

NEDOM - Maine Chapter - Meeting Schedule:

March 4, 2016 from 8:30am to 10:30am - Kelly Lynch from Platinum Practice Solutions will present "10 Knows To Get To Yes!" Meeting will be held at Husson University, Room 106, 340 County Road in Westbrook, Maine. **April 15, 2016** from 8:30am to 10:30am - Kim Anania from KMA Human Resources Consulting will present "Dealing with Difficult Employees." Meeting will be held at Husson University, Room 162, 340 County Road in Westbrook, Maine.

September 30, 2016 from 8:30am to 10:30am -Marcia Richter will present "What to Expect from Insurance Carriers in the Future." Meeting will be held at Husson University, Room 106, 340 County Road in Westbrook, Maine.

October 28, 2016 from 8:30am to 10:30am -Blake Cohen from Summit Dental Partners will present "Co-payment Calculations." Meeting will be held at Husson University, Room 106, 340 County Road in Westbrook, Maine.

November 2016 (Date, time and meeting location to Be Announced) - (Informal Meeting) Ask the Consultant Q & A, plus round table discussion with Stacey Peters from BSP Practice Solutions.

We're currently accepting new members. Visit <u>www.NEDentalManagers.com</u> to join today!

> - Angela M. Donovan, CDPMA Guest Contributor

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

Brian Boynton, DMD Phyllis Wagstaff, DMD Arthur Medina, DDS Peter Larrabee, DMD Elias Chatah, DMD David Bukala, DMD Jon Ryder, DDS

New Hampshire

Tej Shah, DMD Michelle Valpiani, DMD Yasmine Basseghi, DMD Azeez Swarup, DMD Steven Rayes, DDS Shannon Arndt, DMD Marium Qureshi, DMD Shaina Darmont, DDS Nils Hjorth, DMD Archana Selvaraj, DMD Valitsinee Pattanaprommas, DMD John Haze, DMD

Nathan Decker, DMD Elise Vincelette, DMD Christopher Blount, DDS Peter Albanese, Jr., DMD Phebe Winters, DMD Jeffrey Sloan, DDS

Vermont

Margaret Stone, DDS Steven Rayes, DDS Eric El Masri, DMD Scott Pelok, DDS Stephane Goulet, DMD

Office Changes or Updates

Please contact the Provider Services department at 1-800-537-1715, 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.