

BlueDHMO – New Plan Launched

We are pleased to announce the launch of BlueDHMO, a Dental Health Maintenance Organization (DHMO) plan offered as a part of the Provider Choice network and the 1m family of plans.

BlueDHMO works in much the same way as our other DHMO plans:

- You should see no disruption to your interactions with CareFirst.
- You will receive eligibility reports along with capitation for members assigned to your practice.
- Your patients are responsible for procedures not listed on their member copayment schedule.

Plan limitations are similar to our other DHMO plans, but as a value-added benefit, this plan includes higher member copayment amounts for you to collect.

As always, CareFirst encourages you to verify benefits at the time of service. Your office will have the ability to verify benefits through [CareFirst Direct](#) or [CareFirst on Call](#) for members who have these plans.



Holiday Closings

CareFirst, CareFirst BlueChoice and The Dental Network will be closed on the following dates.

Thursday, Dec. 24	Holiday
Friday, Dec. 25	Holiday
Thurs., Dec. 31	New Year's Eve <i>office closes at 12:00 p.m.</i>
Friday, Jan. 1	New Year's Day
Monday, Jan. 18	Martin Luther King's Birthday
Monday, Feb. 15	President's Day

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CareFirst BlueCross BlueShield Dental Seminar Series

The Oral Systemic Nexus – Are you ready for action?

Join us on Friday, April 1, 2016, for an informative presentation by [Marjorie Jeffcoat, DMD](#), a practicing periodontist, Professor and Dean Emeritus at the University of Pennsylvania School of Dental Medicine.

Seminar attendees will learn:

- The association between periodontal treatment and preterm birth
- The association between periodontal treatment and type II diabetes
- Osteonecrosis of the jaws: is it associated with oral bisphosphonate therapy?

Date: Friday, April 1, 2016

Time: 8:00 a.m. to 1:30 p.m. (Registration and Continental Breakfast 7:00 a.m. to 7:45 a.m.)

Location: CareFirst Conference Center at Canton Crossing
1501 S. Clinton St., 17th Floor
Baltimore, MD 21224

Fee: Free for CareFirst in-network dentists, physicians and their staffs
\$250 for out-of-network dentists and physicians
\$125 for professional staff employed by out-of-network dentists and physicians

Cost includes continental breakfast, parking and a Continuing Education Certificate

Credits: Five (5) AGD-PACE CE credit hours

Target Audience: Dentists, Dental Hygienists, Physicians and Nurses

Parking: Parking is available in the lot opposite the building. Attendee must present the issued parking ticket at the seminar for validation.



Mail, email, or fax the [registration form](#) by March 15, 2016 to:

CareFirst BlueCross BlueShield
1501 S. Clinton St.
Baltimore, MD 21224

Attn: Rosa Nagle

Fax: 410-781-0770

DentalDepartmentFax@carefirst.com



CareFirst BlueCross BlueShield is designated as an Approved PACE Program Provider by the Academy of General Dentistry. The formal continuing dental education programs of this program provider are accepted by the AGD for Fellowship, Mastership and membership maintenance credit. Approval does not imply acceptance by a state or provincial board of dentistry or AGD endorsement.

The current term of approval extends from 1/1/2014 to 12/31/2017.
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CareFirst Direct Security Enhancements

To protect the privacy of our members (your patients) and your office's personal information, CareFirst's Provider Portal ([CareFirst Direct](#)) has updated its password requirements and security measures for all accounts, resulting in the following changes:

- **Enforced password history constraint:** Use of any of the previous five passwords is not allowed.
- **Increased password minimum length:** From 6 characters to 8 characters.
- **Inactive account disable after 90 days:** Accounts that are inactive for 90 days are automatically disabled. When an account is disabled, users can re-enable the account via the Office Manager or CareFirst Service Desk.
- **Inactive account terminated after 180 days:** Accounts that are inactive for 180 days are automatically terminated. When an account is terminated, it cannot be re-enabled or re-used; providers will be asked to set up a new account.

Please note that these changes may require your office staff to utilize [CareFirst Direct](#) more regularly to maintain proper access.

If you have any problems logging into CareFirst Direct, the CareFirst Service Desk is available to assist, Monday through Friday from 7:00 a.m. to 6:00 p.m. at 1-877-526-8390.

DHMO Platform Conversion Progress Report

What Does it Mean for You?

In March 2015, CareFirst began migrating customer service and claims processing for our Dental Health Maintenance Organization (DHMO) plans to a new operations system. The upgraded system is fully integrated with [CareFirst Direct](#) and [CareFirst on Call](#), providing easier access to eligibility, benefit verification and claim status details for your DHMO patients.

We appreciate your patience as we continue the migration of DHMO member data throughout the remainder of the year and into 2016.

As we move towards our 2016 completion date, we will keep you updated on any changes impacting how you do business with CareFirst. If you have any questions, please contact your [Dental Provider Representative](#).



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2016 Forms Updates

We have updated some of our forms for 2016. You can view the most current versions of these documents at www.carefirst.com/providerforms > Dental Forms.

- [Dental Reference Guide for Required Attachments](#)
- [Required Documents for Dental Credentialing](#)
- [Dental Claims and Service Reference Guide](#)
- [FEP BlueDental Implementation Guide](#)



Printable resources for your office

- Download our updated [Provider Link List](#) and share it with your office for easy access to the information that you need.
- Download our new [Membership ID Quick Reference Guide](#) for an at-a-glance look at member ID cards.
- Check out our other Reference Guides available at www.carefirst.com/providerguides > Dental.

Current Dental Terminology Changes for 2016

The chart below lists the American Dental Association (ADA) Current Dental Terminology (CDT) 2016 added codes effective Jan. 1, 2016 and applicable CareFirst's clinical policy and/or CareFirst's dental processing guidelines.

Additions for 2016 include:

CDT 2016	ADA NONMENCLATURE	DENTAL POLICY
D0251	Extra-oral posterior dental radiographic image.	Not covered.
D0422	Collection and preparation of genetic sample material for laboratory analysis and report.	Not covered.
D0423	Genetic test for susceptibility to diseases – specimen analysis.	Not covered.
D1354	Interim caries arresting medicament application temporary crown (fractured tooth).	This service is limited to one application per tooth surface per lifetime, only if there is no history of any other type of restoration on the surface reported. Service will be considered inclusive if billed with other restoration.
D4283	Autogenous connective tissue graft procedure (including donor and recipient surgical sites) – each additional contiguous tooth, implant or edentulous tooth position in same graft site.	Procedure is used in conjunction with D4273 when more than one tooth position in the same graft site is involved. CareFirst considers two contiguous grafts as a single site.
D4285	Non-autogenous connective tissue graft procedure (including recipient surgical site and donor material) – each additional contiguous tooth, implant or edentulous tooth position in same graft site.	Procedure is used in conjunction with D4275 when more than one tooth position in the same graft site is involved. CareFirst considers two contiguous grafts as a single site.
D5221	Immediate maxillary partial denture – resin base (including any conventional clasps, rests and teeth).	This service is subject to the 5-year contractual limitation.
D5222	Immediate mandibular partial denture – resin base (including any conventional clasps, rests and teeth).	This service is subject to the 5-year contractual limitation.
D5223	Immediate maxillary partial denture – cast metal framework with resin denture bases (including any conventional clasps, rests and teeth).	This service is subject to the 5-year contractual limitation.
D5224	Immediate mandibular partial denture – cast metal framework with resin denture bases (including any conventional clasps, rests and teeth).	This service is subject to the 5-year contractual limitation.
D7881	Occlusal orthotic device adjustment.	This service is used for the treatment of temporo-mandibular joint disfunction not covered by dental contracts. A benefit for this service may be available under the member's medical contract.
D8681	Removable orthodontic retainer adjustment.	This service will be considered inclusive to comprehensive orthodontic treatment.
D9223	Deep sedation/general anesthesia – each 15 minute increment.	This service is used in conjunction with covered eligible oral surgical procedure. General anesthesia or IV sedation must be administered by a dentist who has a permit to administer conscious sedation or general anesthesia.
D9243	Intravenous moderate (conscious) sedation/analgesia – each 15 minute increment.	This service is used in conjunction with covered and when required with eligible oral surgical procedure. General anesthesia or IV sedation must be administered by a dentist who has a permit to administer conscious sedation or general anesthesia.
D9932	Cleaning and inspection of removable complete denture, maxillary.	Benefit for this service will be limited to two times per benefit period. Patient must be fully edentulous.

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Additions (continued)

CDT 2016	ADA NONMENCLATURE	DENTAL POLICY
D9933	Cleaning and inspection of removable complete denture, mandibular.	Benefit for this service will be limited to two times per benefit period. Patient must be fully edentulous.
D9934	Cleaning and inspection of removable partial denture, maxillary.	Benefit for this service will be limited to two times per benefit period.
D9935	Cleaning and inspection of removable partial denture, mandibular.	Benefit for this service will be limited to two times per benefit period.
D9943	Occlusal guard adjustment.	A benefit for this service is only available to members covered under Affordable Care Act (ACA) contracts, limited to once every six months but not within the first six months of placement – age limitation may apply.

The chart below lists the American Dental Association (ADA) Current Dental Terminology (CDT) 2016 deleted codes effective Jan. 1, 2016 and applicable CareFirst's clinical policy and/or CareFirst's dental processing guidelines.

Deletions for 2016 include:

CDT 2016	ADA NONMENCLATURE
D0260	Extra-oral – each additional radiographic image.
D0421	Genetic test for susceptibility to oral diseases.
D2970	Temporary crown (fractured tooth).
D9220	Deep sedation/general anesthesia – first 30 minutes.
D9221	Deep sedation/general anesthesia – each additional 15 minutes.
D9241	Intravenous moderate (conscious) sedation/analgesia – first 30 minutes.
D9242	Intravenous moderate (conscious) sedation/analgesia – each additional 15 minutes
D9931	Cleaning and inspection of a removable appliance.

Additional changes for 2016 include:

- 43 nomenclature revisions
- 12 descriptor revisions



In Case You Missed It

Hopefully you are already signed up to receive our communications. We send our important messages about your participation with CareFirst, upcoming events, and other updates for your practice. In case you missed some of our recent news, click on the icon to review the latest news.

If you don't already receive email updates from CareFirst, register to receive them now at www.carefirst.com/stayconnected. Remember to select "Dental" as your area of practice.

And while you're there, make sure others from your practice are registered to receive our updates as well. The more the merrier!

CareFirst Members' Rights and Responsibilities

Members have a right to:

- Be treated with respect and recognition of their dignity and right to privacy.
- Receive information about the Health Plan, its services, its practitioners and providers, and members rights and responsibilities.
- Participate with practitioners in making decisions regarding their health care.
- Discuss appropriate or medically necessary treatment options for their conditions, regardless of cost or benefit coverage.
- Make recommendations regarding the organization's members' rights and responsibilities policies.
- Voice complaints or appeals about their plan or the care provided.
- Provide, to the extent possible, information that the Health Plan and its practitioners and providers need in order to care for them.
- Understand their health problems and participate in developing mutually agreed upon treatment goals to the degree possible.
- Follow the plans and instructions for care that they have agreed on with their practitioners.
- Pay member copayments or coinsurance at the time of service.
- Be on time for appointments and to notify practitioners/providers when an appointment must be canceled.

More information regarding Member Rights and Responsibilities and policies and procedures regarding participation in our plans are available in your Dental Provider Manual, online at www.carefirst.com/dentalmanual.

Help us with our New Year's Resolutions

Your feedback is requested.

Tell us what you liked about this issue – or give us a suggestion for improvement in the coming year – send us a message to newsletter.editor@carefirst.com.



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CareFirst 
The CareFirst BlueCross BlueShield
family of health care plans

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