

BlueImpressions

CareFirst 
Family of health care plans

Dental News & Updates

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For more information, visit carefirst.com/blueimpressions

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What's Happening?

Upcoming CareFirst Office Closings

CareFirst, CareFirst BlueChoice, and The Dental Network will be closed on the following date:

- Monday, May 27 — Memorial Day

You should expect to see higher than normal wait times following the day after a holiday. We encourage you to utilize our self-service tools, [CareFirst Direct](#) and [CareFirst on Call](#) for claim status, eligibility, and benefits.

New Dental Plans to be Offered After April 1

CareFirst has been hard at work building plan designs that fit the needs of our providers and members locally and nationally. We are pleased to announce we will offer the BlueDental exclusive provider organization (EPO) product in 2019 using our existing networks. The BlueDental EPO plan will operate much like a preferred provider organization (PPO) hybrid:

- Your office will be in-network for these patients if you participate with our non-DHMO networks
- CareFirst and BlueDental EPO members will share cost for dental treatment – that is, BlueDental EPO plans will have member copayments instead of coinsurance
- Your contracted reimbursements will be applied to claims submitted for services rendered, less the member's copayments
- No referrals will be needed for your patients to see dental specialists
- All BlueDental EPO plans will have the same member copayments by procedure for services included in the plan benefits
- Your patients will be financially responsible for services not listed on their member copayment schedule. CareFirst considers these services to be not covered and can be charged to the patient at your usual fee.

Plan limitations are similar to our other PPO plans, but as a value-added benefit, the amounts you will collect from your patients are clearly defined and outlined as member copayments. Accumulations like annual maximums and deductibles may vary among our BlueDental EPO plans, so be sure to verify benefits and access these EPO member copayment schedules via [CareFirst Direct](#) or [CareFirst on Call](#) prior to rendering care.

As always, we encourage our providers to verify benefits, view eligibility, check claim status and download remittances on CareFirst Direct at carefirst.com/carefirstdirect.

More Security, Peace of Mind for CareFirst Direct Portal Administrators

New security measures have been deployed to CareFirst Direct on the Provider Portal. These updates enhance performance and keep your account and patient information secure. The new security update requires portal administrators to review and approve new Provider Portal user access requests.

In an effort to make [CareFirst Direct](#) work for you, we may reach out to your office this year offering chairside training on CareFirst Direct Provider Portal navigation.

In addition, your office can always access our [Provider Portal user guide](#), which will help you navigate through the user access review process. User guides can be found in the Quick Reference Guides section of the Provider Portal by clicking on the Resources tab and selecting Manuals and Guides.

Later this year, CareFirst will implement a user access review policy which will require you to review and approve user access annually. Please continue to check your email regularly for Provider News and Updates so you are aware when the enhancements go live. Don't forget that you can keep up to date with us by subscribing to receive our emails and quarterly newsletters electronically. Subscribe by visiting carefirst.com/stayconnected.

2019 American Dental Association (ADA) Current Dental Terminology (CDT) Updates to CareFirst Fee Schedules, Available Online

Effective January 1, the ADA added 15 new CDT codes and deleted four CDT codes. Reimbursement information when applicable, along with the current fee schedule, is available on [CareFirst Direct](#) under the Fee Schedules tab. Please note, only your office's portal administrator can access the Fee Schedules tab.

Want Claims Paid Faster? Send CareFirst Your Organizational National Provider Identifier (NPI)

Dental Provider Networks and Credentialing collects and saves your NPI in your provider file during the credentialing process, but we are looking for your organizational NPI number. Dental practices and clinics are eligible to apply for an organizational NPI and providing your organizational NPI to CareFirst will help us process your claims faster and more efficiently.

When submitting an [electronic claim](#), you will be asked to provide your individual NPI and your organizational NPI. Without your NPI and your Tax Identification Number (TIN), your claims will be delayed, rejected or possibly processed incorrectly.

If your practice has an organizational NPI, please make us aware by completing and submitting this form. Additionally, this form can be used to notify us that your office uses the dentist's individual NPI as their organizational NPI. If you use your provider NPI as the organization NPI

and do not tell us your claims may be rejected or processed incorrectly. The form can be submitted by fax or email to:

Fax: 410-720-5080

Email: dentalcontracting@carefirst.com

For more information about dental claims submission guidelines, please visit us at carefirst.com/dentaledi.

Updates to Orthodontic Treatment in Progress

Submitting dental insurance claims with the correct tax information is vital to having your claims processed and paid accurately. This is especially true for orthodontists, whose treatment plans can span several years. Orthodontists who change their Tax Identification Number (TIN) during treatment for their patients should notify CareFirst in a timely manner, so their payment schedules can resume without much disruption.

Payments are made by CareFirst in quarterly payments for patients who are currently undergoing orthodontic treatment. The initial banding allowance of 25 percent will not be included in cases where there's a tax ID change for the office, and benefits will be limited to the remaining lifetime maximum amount.

Your new TIN should be displayed on all claims for any patients who begin orthodontic treatment on or after the effective date of change.

Your Quick Reference Guide for Implant-Related Required Attachments

CareFirst's dental implant policy applies to members whose plans allow a benefit for implant and implant-related procedures. CareFirst wants to make this process as seamless as it can be for you and your patients, so we've gathered the information you need to know regarding our implant policies, and how to make the most of your patients' benefits.

In general, your office will want to:

- Use [CareFirst Direct](#) to determine if implants and all related procedures are covered under your patient's plan. Once you're viewing your patient's Eligibility Summary, you can pull the full benefit breakdown, or type in the related implant procedures from your patient's treatment plan.
- Submit a comprehensive set of supporting documentation (treatment plan, progress notes, periodontal charting, X-rays or other images) along with the Pre-Treatment Estimate (PTE).
- Expect a clinical review by a member of the Office of CareFirst's Dental Director. This review will determine if the benefits will be granted as submitted, or if there is a less expensive

alternate treatment and benefit that can be provided. The review will look for clinical expectation of short-term success versus long-term viability, adjacent teeth that appear to be in need of full coverage restorations, and evidence of a patient whose records demonstrate that s/he is not a good candidate for an implant, along with other observations. A PTE is strongly recommended.

Implant Body Claim/PTE Submission

Often, the implant body is placed by a specialist and submitted separately from, and prior to, the claim/PTE for the implant restoration. Additional procedures performed in conjunction with the implant body placement, such as bone grafting, guided tissue regeneration (GTR), etc., may not receive benefits depending on the documented need for them that is supported by charting and imaging. Submitting a claim/PTE with a full arch set of preoperative X-rays that show the full coronal-apical length of the area into which the implant will be placed is highly recommended. Describe and chart any detailed osseous deficiencies if your office is planning to graft bone.

Implant Restoration Claim/PTE Submission

Submit the claim/PTE with the treatment plan, a periapical X-ray of the successfully integrated implant body and a panoramic X-ray or full mouth series of X-rays. If the placement of the implant body was denied, any and all services for implant restoration will be denied, as well. However, benefits for alternate restorative treatment for the teeth that are missing will be applied on the claim or PTE for the implant restoration.

Use of Alternate Benefit Funds

Although benefits may be approved for a lower-cost service, the patient can use those funds toward the fees for the implant restoration.

Supporting the Community through Innovative Programs

As a not-for-profit insurer, through our mission, CareFirst is committed to meeting the health care needs of both its members and those individuals and families within our service region who are under- or uninsured.

As such, the company funds innovative community programs throughout the region working to improve health care delivery systems, promote change on broad health initiatives and ultimately improve the long-term health of our communities. CareFirst's giving strategy targets some of the most vulnerable and underserved populations in the region and includes a wide range of funding priorities.

In 2018, CareFirst awarded nearly 38 million to support health related services and innovative programs to community-based organizations and public health programs. CareFirst continues to fund innovative programs to community-based organizations and public health programs

throughout its service area to improve the region's health care delivery systems, promote change on broader health initiatives, and ultimately improve the long-term health of the community. Below are some of the dental-facing programs and services CareFirst funded in 2018.

- **The Arc of Prince George's County**
 - \$30,000 to support the Dental Services Program which provides dental care for adults with developmental delays (Prince George's County)
- **Helping Up Mission**
 - \$50,000 over two years to support Oral Health Care and Dental Services for the homeless (Baltimore City)
- **Maryland Area Health Education Center West**
 - \$10,000 to support the October Mission of Mercy event, to provide free dental services for underserved residents of Allegany County (Allegany County)
- **Maryland Foundation of Dentistry**
 - \$15,000 to support Donated Dental Services for Maryland residents with a disability (Maryland)
- **Southern Maryland Mission of Mercy**
 - \$10,000 to support the July Mission of Mercy event, to provide free dental services for underserved residents of Southern Maryland (Charles County)
- **United Way of Central Maryland**
 - \$100,000 to support 2-1-1 MD, an information and referral service that connects callers in need of community resources including medical and dental care, substance abuse treatment and crisis support (Anne Arundel County, Baltimore City, Baltimore County, Carroll County, Cecil County, Harford County and Howard County)

Bridging the Dental Medical Gap

A Little Wisdom

Hear Dr. Cheryl Lerner, CareFirst's new dental director, share her thoughts on the convergence of oral health care and overall health care, answering your patients' benefit questions and working together to support your patients who are aging towards Medicare.

Plus she wants to hear from you, so tune in to [the video](#) to also find out how to contact her.

Identifying Children with Persistent Stuttering

Ever wonder if a child you are seeing has a speech disorder? Because of your close interactions with children, dentists are in a unique position to assess speech difficulties in kids and advise parents on the next steps to take. One of the more common speech problems affecting children is stuttering.

Almost all children stutter at some point while growing up, and this normal stuttering occurs

during periods of rapid speech development, usually from about 18 months to five years of age. When stuttering is short-lived (less than six months), it is probably of little concern. However, clues can help you detect which children actually have a problem and will persist with stuttering, perhaps into their school or adult years. In fact, there are risk factors for persistent, abnormal stuttering. Knowing these can help you identify children who would likely benefit from speech therapy. For example, the risk for persistent stuttering increases:

1. When there is a positive family history for stuttering, especially when that family member is still stuttering
2. If a child begins to stutter after three and a half years of age
3. If stuttering has been occurring for less than a few months
4. If your patient is a boy (as more girls than boys outgrow their stuttering)
5. If there are other speech issues occurring, e.g., a child is unintelligible after his/her fourth birthday

If you think you've identified a child with a speech issue, the most helpful thing you can do is suggest to the parent or guardian that they speak with their pediatrician about getting a formal evaluation by a speech therapist. Your urging the parent or guardian to pursue a professional specialist may be just the impetus that the parent needs. What we clearly know is that the earlier that intervention (i.e., speech therapy) is begun, the better the outcome.

Information sourced from: Guitar, B and Conture, EG: The child who stutters: to the pediatrician, Revised 5th edition, The Stuttering Foundation, Publication No. 0023, 2016.

Robert Sadowski, MD, MBA is CareFirst's Pediatric Medical Director. Dr. Sadowski practiced pediatric nephrology for a number of years before returning to general pediatric practice, working mostly in inner city health centers in Philadelphia and Baltimore.

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- January 13, 2019 — [Portal Administrators: You Care About Keeping Your Account and Patient Information Secure, and So Do We](#)