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#### Reminder on third-party solutions limitations

As of September 1, 2020, Delta Dental of Oregon's Dental Customer Service department discontinued accepting benefit, eligibility and claim inquiry calls from

### Welcome to the Health through Oral Wellness Corner...

a new space dedicated to sharing helpful program tips and reminders!

### Help your patients get EXTRA BENEFITS!

### To learn how check out our new 6-minute video!

Find out how you can get **more** for your patients and your practice with the Health through Oral Wellness program!

More time with your patients, more reimbursement for preventative services, and more benefits for your Delta Dental of Oregon's Health through Oral Wellness patients!

third-party solutions. Research shows some third-party entities are not accredited with the Better Business Bureau and cannot be adequately verified.

Protecting the health information of our members is the utmost importance to us. As the HIPAA Privacy Rule states, only minimum required information should be disclosed. Many of the calls in concern were requesting information regarding multiple patients, codes, and complete claims histories. We believed these inquiries may not have met the minimum necessary verification requirement under the Privacy Rule.

Although Delta Dental of Oregon no longer provides member benefits information to third-party vendors by phone, they can continue to retrieve necessary benefit, eligibility and claim information by accessing Benefit Tracker or by utilizing our IVR FaxBack option.

Thank you for your understanding. If you should have any questions, please contact our dental customer service team at 888-217-2365.

Click here to watch

Remember to reassess your patients every 12-14 months!

Please ensure your Health through Oral Wellness patients are being reassessed within 12-14 months of their last assessment. Patients not reassessed during this timeframe are at risk of being reassigned to their standard plan benefits. We appreciate your commitment to helping your high risk patients retain the extra preventative benefits they need!

## Join us in advancing our Diversity, Equity and Inclusion (DEI) initiatives

As a company, Delta Dental of Oregon has been working for many years to forge ways that weave the pillars of Diversity, Equity and Inclusion (DEI) into everything we do.

**Diversity**: We value, respect and celebrate people of all backgrounds, identities, and abilities and actively seek to identify how uniqueness makes us better.

**Equity**: We strive to understand the underlying causes of outcome disparities and actively work toward increasing justice and fairness in our processes, procedures and systems – both within our company and within our communities.

**Inclusion**: We are committed to creating environments wherein every individual has an equal opportunity to belong and can be recognized for their inherent worth and dignity.

You are invited to please share your demographic information with us that goes beyond your name and service location. Your invitation offers you the opportunity to share your race, ethnicity, languages spoken, gender and gender identity.

Our overall goal is to reduce health disparities. In the current workforce, diversity among dentists is limited. At Delta Dental of Oregon, if it is a preference, we want to offer our members the opportunity to choose providers with whom they share other commonalities.

In order to share your information in a quick and convenient way, we have created an electronic survey that is available on our provider website. The electronic survey can be found on our website under Forms:

https://www.deltadentalor.com/provider/resources/forms-and-documents

There are two survey types:

- Provider specific survey for dentists to complete The practitioner survey is aimed at
  gathering information that is unique to each individual practitioner, such as race,
  ethnicity and gender.
- Clinic specific survey for the office staff to complete The clinic survey is aimed at gathering information that is at the clinic level, such as ADA accessibility, languages spoken by staff, and if interpreters are available. This survey would be competed for each unique physical location of your clinic(s).

We do hope that you choose to partner with us in sharing more about yourselves with both current and potential patients. While we invite you to participate in our provider DEI survey, it is **not required**. However, we do encourage you to share what you are comfortable with.

### Medicare Advantage - what does being optedout with CMS mean for you practice?

If you or your practice have opted out of Medicare, dental services performed on patients with a Medicare Advantage plan (also known as Medicare Part C) will **not be reimbursable to the provider, provider group or patient per Medicare guidelines** except in certain emergency cases.



To confirm your opt-out status and/or eligibility dates please visit <a href="CMS.gov">CMS.gov</a>. Opt-out affidavits automatically renew every two years. If a dentist filed a valid affidavit and does not want the opt-out to automatically renew at the end of the two-year opt-out period, they may cancel the renewal by notifying in writing all Medicare contractors with which the dentist filed an opt-out affidavit at least 30 days prior to the start of the next opt-out period.

We invite all CMS eligible dentists to become part of our growing Medicare Advantage network. As part of this network, your Moda Health and Summit Health Medicare Advantage patients will enjoy program benefits such as preventative first care (exams, cleanings and x-rays will not applied towards their annual maximum), allowing for their benefits to go farther throughout the year. Reimbursement for DDOR's Medicare Advantage network is based off of your office's contracted Premier fees.

To find out more about becoming a participating provider in our Medicare Advantage network, go to <u>deltadentalor.com</u> to find more details and see Delta Dental of Oregon's Medicare Advantage Benefit Grid.

### Processing policy change for ADA code D4921 (gingival irrigation)

In a recent audit performed by Delta Dental Plans Association, the governing body over all Delta Dental Member companies, Delta Dental of Oregon was found to be out of compliance with our processing policy of code D4921.

To rectify this situation and for Delta Dental of Oregon to become compliant, we have implemented a correction to how D4921 is processed as outlined below.

Delta Dental guidelines state that D4921 would be considered inclusive and therefore not be billable to the patient when billed with other periodontal services by the same provider on the same day.

The updated processing policy became **effective June 1**<sup>st</sup>,**2021**. This will apply to all claims, (initial and corrected billings, regardless for date of service) processed on or after June 1<sup>st</sup>, 2021.

If you have any questions about this policy correction, please contact us at Dental Professionals Relations by email at <a href="mailto:dpror@deltadentalor.com">dpror@deltadentalor.com</a> or call 1-888-374-8905.

Change to frequency for D2910 and D2920

#### Effective 1/1/2021:

 Re-cement or re-bond of a crown, inlay, only or veneer, by the same dentist, is limited to once per lifetime.



Benefit Tracker access is now located on our DeltaDentalOR.com and ODSCommunityDental.com webpages. Visit our updated dental websites to find everything you need to keep your practice running smoothly. If you are still accessing Benefit Tracker through ModaHealth.com, you will want to update your bookmark or shortcut to continue to have uninterrupted access.

Provider Handbooks
Dentist Handbook (PDF)

503-265-5720 | dpror@deltadentalor.com | DeltaDentalOR.com

Delta Dental | 601 S.W. Second Avenue, Portland, OR 97204

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