

DENTAL DISPATCH

NEWS AND INFORMATION FOR NETWORK PROVIDERS

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SIMPLIFYING CREDENTIALING: THE TIME IS NOW!

UniCare's credentialing department is now using the American Dental Association (ADA®) credentialing document retention service – powered by CAQH ProView® – the electronic solution and industry standard trusted by more than 1.4 million providers for capturing and sharing self-reported professional and practice information. This credentialing document retention service is fully electronic and was developed to save you and your staff the time it takes to complete the lengthy paper forms needed for each healthcare organization with which you are affiliated. Learn more by visiting: www.ADA.org/credentialing.

Getting started

Prior to filling out your profile, prepare by reviewing the dental credentialing application checklist http://www.ada.org/CredentialingChecklist and gather all required documentation.

Maintaining your self-reported information

If you have used CAQH ProView before, we recommend you access your profile by visiting **www.ADA.org/godigital**. Take note of the important items below to ensure you successfully complete your profile:

- Add new documents to replace any expired ones.
- Leave no gaps in your work history for the most recent five years, or list the
 reasons for any gaps as appropriate (ex: leave of absence, maternity leave, illness, etc.)
- Ensure that a current copy of your liability insurance is attached to your CAQH profile.
- If you only authorize specific organizations access to your profile, please add UniCare.
- CAQH recommends you attest to your profile every 120 days to ensure other insurers
 you are contracted with can access your profile to start the credentialing process.

CAQH ProView FAQs

Do I need to be an ADA member to participate?

No, any U.S. practicing dentist can participate. If you are a non-member and would like to get started, learn more by visiting **www.ADA.org/credentialing**.

Does it cost anything to use CAQH ProView? There is no cost for dentists to use CAQH ProView.

YOUR ONLINE DENTAL CLAIMS, ELIGIBILITY AND BENEFITS WEBSITE HAS CHANGED!

Over the past few years during conventions, workshops, phone calls and office visits, you shared ways we could make your lives easier. We heard you! Based on your input, we launched a brand new dental provider website. We are phasing out the websites you previously used to submit claims (UniCare.com and SecureTrack). All the functions from these sites are now consolidated into the new dental web portal — powered by Availity — including enhancements and upgrades, making it easier to do business with us.

Our goal is to help you reduce administrative time and expense, deliver greater access, better options and new features, and give you the information you need to serve your patients.

How will these changes make your life easier?

- Use one secure website for all your office needs.
- The majority of your questions about treating and obtaining cost estimates for your patients can now be answered on the new web portal. New enhancements will reduce calling and waiting for information that will now be at your fingertips!
- Obtain faster and more complete information about claims and patient eligibility.
- You only need to visit one location to submit your claims and attachments – you no longer have to visit multiple websites.
- All of your patients' records and claims history are in one place, reducing your time spent searching through paper or multiple websites.
- · Attachments can be submitted online.
- Register multiple users in your office, making it easy for staff to have all the information they need any day of week.

To register, visit www.availity.com/dentalproviders. Already registered? If so, now is the time to make sure your tax IDs and other important information are registered on the new web portal. For registration assistance, call Availity Client Services at 1-800-AVAILITY (282-4548). Assistance is available Monday through Friday from 7 a.m. to 6:30 p.m. Central Time (excluding holidays).

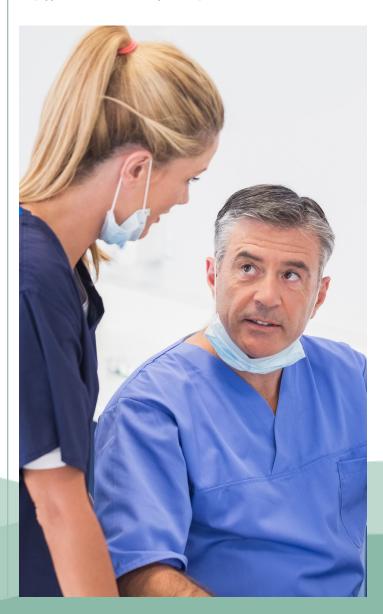
Get up to speed quickly with training opportunities on the new portal.

Visit www.availity.com/dentalproviders and select the Register button in the upper right corner. After you register, log in to the Availity provider portal and click Help & Training | Get Trained to access recorded demonstrations. There use keywords such as dental, claims, or eligibility to search for in-depth product training. The portal training also includes continuing education from national industry experts.

Still have questions?

If you have questions about changes to your office information or how your practice is listed in the directory? Contact UniCare's team at **866-947-9398**, Monday through Friday from 7 a.m. to 5 p.m. Central Time (excluding holidays). More information is available at

http://www.UniCare.com/dentalproviders.



DR. K'S CORNER



Dr. George Koumaras is the national dental director, who is responsible for clinical and dental policy, dental and medical integration initiatives, fraud, waste and abuse, grievance and appeals, and professional review.

PRE-PAYMENT REVIEW PROGRAM AND THE IMPACTS TO YOUR PRACTICE by George Koumaras, Dental Director

Our Dental Special Investigations Unit (SIU) is announcing the implementation of a pre-payment review (PPR) program. PPR is a program for providers who have been identified either through claims analysis and/or audit results. The PPR program ensures payment integrity, which protects our members and stakeholders. PPR utilizes comprehensive review to prevent claims from being paid improperly. The accuracy and correctness of the claims and appropriateness of the service(s) will be determined based on the review of requested and required supporting clinical documentation. Providers will be notified by letter when they have been placed into the PPR program. The goal of PPR is to educate and work with providers on proper coding to prevent disputes and inappropriate claims payment.

What is payment integrity?

Payment integrity means a claim is paid correctly and the payment is made to the appropriate party. The payment cannot be in error or duplication, and must be absent of wasteful or abusive practices.

What happens if I am placed on PPR?

You will be notified by letter of the effective date, the specific CDT codes under review and the required documentation to determine payment for those codes. Once all required documentation is submitted with the claim, the claim will be reviewed and either approved or denied. If the claim is denied, you have the right to appeal.

Will PPR delay payment of my claim?

No. Once all required documentation is submitted the claim will be processed within the required time frame.

How long will I be on PPR?

You will remain on PPR for 12 months. At 12 months an analysis will be conducted of your claim submissions for the codes initially placed onto PPR. The analysis will determine if you will be removed from the program or extended for an additional 12 months. In either case, you will be notified by letter of your removal or continuation in the Pre-Pay Review program.

DENTAL CLINICAL POLICY ANNOUNCEMENT: UTILIZATION MANAGEMENT

Where to Find the Review Policy

The Dental Policy committee is pleased to announce the creation and posting of our clinical and administrative policies. Where appropriate, dental directors utilized these polices during the utilization review decision-making process.

Relevant policies can be found on our dental provider resources website: www.UniCare.com/dentalproviders

Providers should periodically check the website for updates as dental clinical policies may be revised from time to time. Should you have general questions relating to dental clinical policies, please feel free to contact us at (866) 947-9398.



APPROPRIATENESS OF CARE

As one of the nation's largest dental carriers, UniCare is committed to the continuous improvement of our dental programs. Our products are designed to meet the needs of our members and your patients. As a provider serving our members, we rely on you to ensure they are using their dental benefits effectively to achieve optimal oral health. Our UniCare team gathers and evaluates member claims data to help identify dental practice patterns that differ between dentists.

In January 2018, our dental Utilization Review (UR) department launched an initiative directed at improving the patient care experience, while providing increased value to our members as it is applicable to the administration of benefits. UniCare Dental UR is focused on certain dental procedures in all areas of dentistry, which may change over time. For example, these areas may include diagnostic, restorative, endodontic, periodontic, prosthodontic, and oral surgery categories. The end goal is ultimately to help improve our members' care experience.

Definition of the Appropriateness of Care

As it applies to appropriateness of care, dental services are:

- Patient care decisions that are based on the patient's unique oral health condition/s and needs while avoiding the risk of developing future disease.
- Provided to a patient for the purpose of evaluating, diagnosing and/or treating a dental injury or disease or its symptoms.
- Use of the least invasive procedures that preserve and conserve natural tooth structure when treating oral disease.

- In accordance with the generally accepted standards of dental practice.
- Dependent on group contract provisions, cosmetic services may not qualify for benefit coverage even though the services may be clinically appropriate.

Our Utilization Management/Utilization Review department now has an enhanced review process that includes reviewing for Appropriateness of Care. Claims have not been reviewed for prognosis, necessity or appropriateness of care in the past. Review for Appropriateness of Care has always been part of your contract with UniCare and is now being reviewed more closely. You can submit an appeal and ask to speak to a dental director regarding the reasons for the denial if it has been maintained. If you decide to appeal a decision, please provide all relevant clinical information, not initially submitted, that justifies the procedure including a letter of rationale for the treatment rendered. To submit an appeal please follow the appeal process on your Explanation of Benefits (EOB).

The Utilization Management (UM) department dental directors created a list of submission requirements for several dental procedures. These also include criteria, coding, discussion, definitions and general information. Our clinical guidelines to assist your practice, can be found on our website: www.UniCare.com/dentalproviders

If you have any questions regarding a decision or an appeal, contact the customer service number located on the back of your patient's ID card.



THE ROLE OF DENTISTS IN IDENTIFYING AND TREATING SUBSTANCE MISUSE

When it comes to a total approach to health care we know that dentists play a key role. In fact, individuals with chronic conditions such as diabetes are at high risk for periodontal disease. Many members who go to the dentist for a check-up due to a dry mouth or an aching tooth are experiencing an undiagnosed diabetic condition. Fortunately we know today that controlling blood glucose is key to maintaining good oral health. As part of a regular check-up, dentists can identify diabetes as a potential problem and recommend medical follow-up. But, as part of the overall care team do you also watch for signs and symptoms of drug/alcohol misuse as well?

Oral health problems are very common with people who misuse drugs and alcohol. There are many contributing factors:

- Drugs and alcohol have direct impact on a patient's teeth and gums. For example, opiates, amphetamines and alcohol reduce saliva production, while cocaine can erode the surface of the tooth. Suffice to say, exposing the human body to drugs and alcohol is serious business.
- Ironically, use of substances may actually be masking the pain of tooth or gum problems. For example, opiates may suppress pain to the point where the individual simply ignores the signs of tooth decay or periodontal disease.
- The impact of a poor diet, including erratic and irregular eating patterns, cannot be underestimated either. Studies have shown that 21% of alcoholics are malnourished, which can contribute to gingival and periodontal diseases. In addition people who use drugs or alcohol often consume sugary drinks, snack foods and refined carbohydrates.
 These patterns can lead to a higher rate of decay and plaque.
- Many individuals misusing substances simply do not take care of their teeth. And as you are well aware, poor oral hygiene is a known contributor to poor oral and overall health.

So what can you and your office staff do?

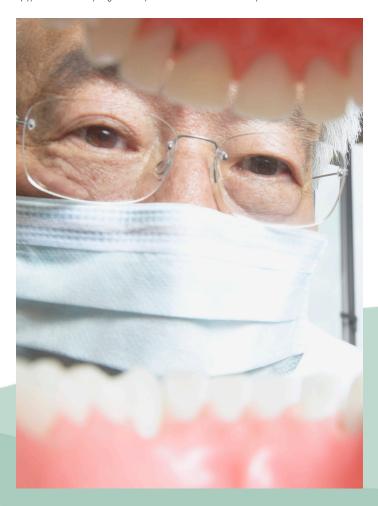
Similar to recognizing the signs and symptoms of diabetes, dentists are well positioned to do the same for drug and alcohol misuse. For many dentists this can start in the waiting area and exam rooms, which should be stocked with brochures and displays to help patients understand the impact of substance abuse on their health. A thorough patient history

which includes a discussion on use of drugs and alcohol is recommended as well. This helps build the relationship between you and your patient. It also fosters an atmosphere of good health, where honest dialogue is encouraged.

Perhaps most importantly, during an exam you may see a variety of symptoms which could mean your patient is struggling with drugs or alcohol warranting medical intervention. Recommending they reach out to their medical doctor, or an Employee Assistance Program, can be a great first step towards helping them achieve better overall health.

Wondering what else UniCare's dental programs can do to help with overall health? Contact your UniCare provider representative today!

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3808011/ https://www.nidcr.nih.gov/OralHealth/Topics/Diabetes/ http://alcoholrehab.com/drug-addiction/substance-abuse-and-oral-health/



HEALTH WATCH - LOOK AT WHAT NEW HAMPSHIRE IS DOING!

NEW HPV TOOLKIT AVAILABLE FOR <u>NEW HAMPSHIRE</u> DENTAL OFFICES

Dental care teams play an important supporting role in cancer prevention and early detection. Human papillomavirus (HPV) can cause a variety of cancers, including oropharyngeal cancer. Among cancer cases attributable to HPV in New Hampshire, oropharyngeal cancer is the most commonly diagnosed, especially in men. Unfortunately, the number of oropharyngeal cancer cases attributable to HPV is increasing in our state among both men and women.¹ Recent research has demonstrated the HPV vaccine's ability to prevent oral HPV infection and, likely, HPV-attributable oropharyngeal cancers. , However, only 51.2% of New Hampshire 13-17 year-olds have completed this important vaccine series.

The HPV vaccine is licensed for 9-26 year-old females, 9-21 year-old males, and some higher-risk 22-26 year-old males. Research has found the vaccine provides the strongest protection when it's given to younger adolescents, which is primarily why it's recommended to be given to 11-12 year-olds. Children in this age range generally see their primary care providers less frequently than their dental health provider, and they generally have longer-term relationships with their dental health providers. For these reasons, it's important that dental professionals feel comfortable with the following:

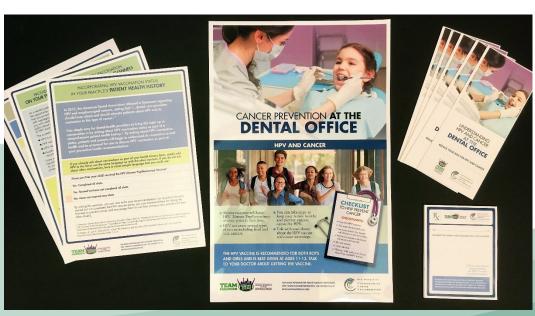
- asking patients and parents about whether they have completed the HPV vaccine series,
- · recommending they receive the HPV vaccine, and
- referring them to their primary care providers to answer any questions and to get the vaccine.

To support New Hampshire dental professionals in these efforts, an HPV toolkit* has been developed that includes:

- 1) Sample questions to incorporate into your patient health history form
- 2) Script/talking points to help you recommend the HPV vaccine to parents and patients
- 3) Referral slips to help you refer patients to their primary care providers for the HPV vaccine
- 4) Brochures for parents and patients wanting additional information
- 5) Poster to display in your waiting room, exam rooms, or restrooms to educate patients about the connection between HPV and cancer
- 6) Sample educational messaging to incorporate into your practice's website and social media platforms

If you are interested in accessing these materials, please complete this brief order form and questionnaire. If you have any questions about the toolkit, please call **603-653-9960**.

*The development of this toolkit was led by Live HPV Cancer Free (a New Hampshire-based working group dedicated to increasing HPV vaccine rates in the state) and Team Maureen, in collaboration with the New Hampshire Comprehensive Cancer Collaboration, the New Hampshire Dental Society, the New Hampshire Dental Hygienists' Association, the New Hampshire Oral Health Coalition, and several New Hampshire-based dental practices.



New Hampshire Department of Health and Human Services, HPV-Associated Cancers in New Hampshire, 1999-2003 Data Brief. 2016: Concord, NH.

Beachler, D. C., Kreimer, A. R., Schiffman, M., Herrero, R., Wacholder, S., Rodriguez, A. C., ... & Jimenez, S. (2015). Multisite HPV16/18 vaccine efficacy against cervical, anal, and oral HPV infection. Journal of the National Cancer Institute, 108(1), dlysoz.

Chaturvedi, A. K., Graubard, B. I., Broutian, T., Pickard, R. K., Tong, Z. Y., Xiao, W., ... & Gillison, M. L. (2018). Effect of prophylactic human papillomavirus (HPV) vaccination on oral HPV infections among young adults in the United States. Journal of Clinical Oncology, 36(3), 262.

Walker, T.Y., et al., National, Regional, State, and Selected Local Area Vaccination Coverage Among Adolescents Aged 13-17 Years - United States, 2016. MMWR Morb Mortal Wkly Rep, 2017. 66(33): p. 874-882.

Petrosky, E., et al., Use of 9-valent human papillomavirus (HPV) vaccine: updated HPV vaccination recommendations of the advisory committee on immunization practices. MMWR Morb Mortal Wkly Rep, 2015, 64(11): D. 300-4.

Wagner, R. and A. Villa, Oral human papilloma virus infections and the role of the dental professional. Journal of the Massachusetts Dental Society, 2017. 65(4): p. 12-15.

IN THE NEWS

HUMAN PAPILLOMA VIRUS (HPV) EDUCATION

The human papilloma virus (HPV) is the most common sexually transmitted disease in the United States, with 14 million new cases each year. HPV is now associated with 9,000 cases of head and neck (oropharyngeal) cancers each year in the United States, according to the Centers for Disease Control (CDC).

Because dental health professionals are better suited to be a line of protection against HPV and cancer (more likely to have the opportunity to perform an oral cancer screening exam), there is an educational campaign to increase dentists' knowledge about human papilloma virus identification and prevention activities, such as the HPV vaccine, according to research published in the January 2018 issue of The Journal of the American Dental Association. The findings indicate areas for interventions, including creating awareness of trusted informational sources, improving HPV knowledge, understanding the multiple appraisal factors and enhancing communication skills of dentists with patients.

The HPV vaccination is recommended by the CDC for girls and boys at age 11 or 12. Vaccination convenience has improved, with only two doses needed for most patients under the age of 15. There is wide access to the HPV vaccination. Options include primary care physicians and walk in clinics. Additionally most UniCare pharmacy benefits cover HPV vaccination at local pharmacies, which are often available on nights and weekends. Since pharmacy vaccination coverage for Medicaid members varies by state, it's recommended that patients check their coverage.





NEW PRODUCT LAUNCH

In order to be competitive and to grow our dental membership, we introduced two new products into the market. Because of the new products, we needed to refine and amend some of the language to your Participating Dentist Agreement. What does this mean for you? Here are the top things you need to know to help you navigate your way through the new product launch:

- The new product names are Essential Choice and Consumer Choice
- The new product ID cards have the Prime or Complete Network indicated on the card
- New amendments affect providers with the Participating Dentist Agreement 100/200/300/Prime/Complete
- Your fee schedule has not changed with this amendment
- · There are some cosmetic procedures that may now be covered
- We mailed each provider, at each location of participation, a Notice of Amendment to Contract
- The new contract became effective October 1, 2017

This is an exciting time for our dental networks. Please watch for further improvements and new information about Essential Choice and Consumer Choice. If you have questions, please do not hesitate to contact us at **866-947-9398**.

PROVIDER DIRECTORIES: ENSURE ACCURATE INFORMATION

Have you ever received a call from a patient asking for an appointment with a dentist that left your practice three years ago? The issue of inaccurate provider directories has been a newsworthy topic. To ensure that our members can find you, please visit our up-to-date online provider directory to verify the information that we have listed for your office.

Updating your dental practice information when changes occur will assist us in processing your dental claims accurately and timely. We are able to relay correct information to dental members (your patients), regarding who they should call to make dental appointments, your practice's contact information and where you're located.

Notify us whenever there is a change in:

Location – Adding a new practice, demographic changes to existing practice (phone, fax, e-mail, physical address, office, etc.), or closing an office. (Please check with us that we have your correct billing/mailing address.)

Name – Dentist/legal/DBA name changes.

License – Include the treating dentist license number as issued rather than a shortened version.

Tax Identification Number (TIN) – Complete and submit a W-9 form along with a letter or Tax ID change form requesting the TIN change, the effective date of the TIN change, and any other office changes. Please provide a list of what networks the change will effect. If you are unsure of your network participation, please feel free to contact Professional Services by calling 866-947-9398.

National Provider Identifier (NPI) – Be sure we have your individual NPI as well as the clinic NPI. *Please note: This is not only for when you submit your claims electronically. In some states, due to new mandates, NPIs are being required for all claims submissions!

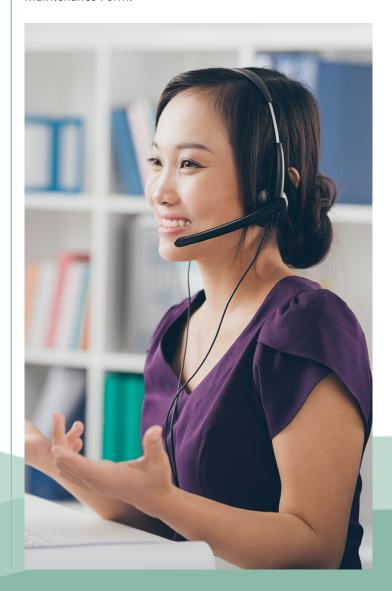
Ownership change – Provide the practice name, date of purchase and W9 if the TIN is not currently on file. Please include a list of dentists associated with this TIN and with what networks they currently participate.

Adding/removing associates – If an associate retires, leaves, or a new associate is added to your practice.

The Standardized Provider Maintenance Form is a fillable PDF form, available on our website:

www.unicare.com/dentalproviders, or by contacting
Dental Network Professional Services to email, or fax it to
you. We have forms for all of types of changes listed above.
You will fill out and submit a General Office Information Form
with each change (only one General Office Information Form
is needed if submitting multiple changes). This may be
submitted to us via fax, email or mail.

If changes are required, please contact us at **866-947-9398** to update information as necessary, or you can complete and submit your change using our new Standardized Provider Maintenance Form.



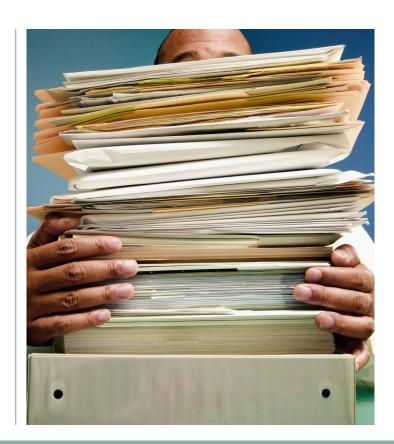
IN THE NEWS

MISROUTED PHI

Dental Providers and Facilities are required to review all member's information received from UniCare to ensure no misrouted PHI (Protected Health Information) is included. Misrouted PHI includes information about members that a Provider or Facility is not currently treating. PHI can be misrouted to Providers and Facilities by mail, fax, email, or electronic remittance.

Dental Providers and Facilities are required to immediately destroy any misrouted PHI or safeguard the PHI for as long as it is retained. In no event are Providers or Facilities permitted to misuse or re-disclose misrouted PHI. If Providers or Facilities cannot destroy or safeguard misrouted PHI, Providers and Facilities must contact Customer Service or call the number listed on the documentation received to report receipt of misrouted PHI.

Dental Providers and Facilities should review claims and documents carefully before submitting for payment to ensure that the member ID and name listed on the claim is accurate. Taking these additional steps will help eliminate explanation of benefits being sent to the wrong member and prevent HIPAA violations from occurring.



FFICE QUICK GUIDE

If you need help with	For Prime and Complete	For All Other Products
Paper Claims Address	Please review the back of the member's ID card to determine the appropriate dental claims mailing address. (Address varies by group.) In the absence of an address, call the number on back of the ID card for instructions on where to submit the claim.	Please review the back of the member's ID card to determine the appropriate dental claims mailing address. (Address varies by group.) In the absence of an address, call the number on back of the ID card for instructions on where to submit the claim.
Electronic Claims	Follow current process or contact your clearinghouse	Follow current process or contact your clearinghouse
Customer Service #s	See back of patient's ID card	(800) 627-0004
Grievance/Appeals	Attn: Dental Claims Appeals & Grievances P.O. Box 1122 Minneapolis, MN 55440	Appeals: First Level Appeals Review P.O. Box 659471 San Antonio, TX 78265
Professional Services	(866) 947-9398	(866) 947-9398



ARE YOU PROPERLY LISTED IN OUR DIRECTORY?

See inside for more information.

COMING UP

— **Save the Date!** We will be at the Greater New York Dental Meeting in November 25 - 28.

Stop by our booth #4012 and say "Hi". We hope to see you and your staff there.

Our Fall/Winter 2018 Dental
 Dispatch Newsletter will be
 available in December 2018.

