DentaQuest

DIGEST

General Newsletter
Summer 2012

In This Issue...

Cultural Diversity Pointers	*1*
Evidence Based Dentistry	*2*
Explaining Treatment as it is Rendered	*2*
Medical Necessity	*2-3*
Understanding EPSDT	*3*
Prevent Member Fraud	*4*
Electronic Authorizations and Claims	*4*
Need Assistance?	*4*
Enroll in Direct Deposit!	*5*
Members with Limited English Proficiency	*5*
The Importance of six month recalls	*6*
Reminder for Members with Primary Insurance	*6*
Member and Provider Satisfaction Surveys	*7*
Contact Information	*8*

Cultural Diversity Pointers

Medical professionals and patients can play a role in eliminating racial and ethnic disparities in health care. Open-mindedness and an understanding of commonalties and differences are keys to resolving the issue.

Robert C. Like, MD, MS, Director of the Center for Healthy Families and Cultural Diversity, UMDNJ-Robert Wood Johnson Medical School, reminds health care providers that:

- As clinicians, we need to "check our own pulse" and become aware of personal attitudes, beliefs, biases and behaviors that may consciously and unconsciously influence our care of patients as well as our interactions with professional colleagues and staff from diverse racial, ethnic and sociocultural backgrounds.
- Every clinical encounter is cross-cultural. Developing partnerships with our patients and maintaining "cultural humility" can help us to learn and better understand the historical, familial, community, occupational and environ mental contexts in which our patients live.
- It should be understood there is no "one" way to treat any racial and ethnic group, given the great sociocultural diversity within these broad classifications. Instead, we need to have a framework of interventions that can be individualized and applied in a patient- and family-centered fashion.
- Clinical and preventive care needs to be evidence-based, flexible, authentic and ethical. We need to appropriately tailor our interventions to patients, families and communities.
- Cookbook approaches about working with patients from diverse sociocultural backgrounds are not useful and instead risk potentially dangerous stereotyping and overgeneralization. Important intergenerational differences exist and diversity is often greater within groups than between them.
- It is important to understand not only patient and community barriers to care, but also physician and health care system barriers to care. To eliminate racial and ethnic disparity, health care providers and organizations need to become more culturally and linguistically competent.
- We need to challenge and confront racism, sexism, classism and other forms of prejudice and discrimination that occur in clinical encounters as well as in society-at-large.

Evidence-based Dentistry - What is it?

The American Dental Association (ADA) defines Evidence-Based Dentistry (EBD) as:

"...an approach to oral health care that requires the judicious integration of systematic assessments of clinically relevant scientific evidence, relating to the patient's oral and medical condition and history, with the dentist's clinical expertise and the patient's treatment needs and preferences."

Three aspects of this definition – scientific evidence, clinical expertise and patient needs and preferences – are the necessary components in any clinical decision, as none alone are sufficient to ensure optimal oral health outcomes. Further, it is the ADA's position that EBD is not "cookbook" dentistry, a rigid methodological evaluation of scientific evidence that dictates what practitioners should or should not do or a cost containment tool promulgated by third-party payers.

DentaQuest supports the ADA's definitions of what EBD is and is not. Our mission is to improve the oral health of the residents in the regions we serve. EBD is one of many approaches that move us collectively toward that goal.

As a service to you and your staff, we hope to share information regarding current issues in EBD and other helpful resources in future issues of the Digest. As always, we welcome your questions and feedback.

For additional resources on EBD, please access the following web sites:

American Dental Association	http://www.ada.org/prof/resources/topics/evidencebased.asp
Center for Evidence-Based Dentistry	http://www.ihs.ox.ac.uk/cebd/
Center for Evidence-Based Medicine	http://www.cebm.utoronto.ca/

The Importance of Explaining Treatment as it is Rendered

A recent member satisfaction survey indicated that members prefer to have dentists explain their treatment as it is being rendered. While time constraints hinder long discussions, it is in the dentist's best interest to have the patient understand the treatment as it occurs.

Explain the treatment and discuss behavioral expectations pertaining to children and answer any questions before the patient is reclined in the dental chair. Take time to describe the sounds, smells and feelings they'll be experiencing during treatment, as this can go a long way toward establishing trust in the doctor.

A relaxed patient who is confident that treatment is progressing according to plan is easier to treat than one who is tense and wondering about what's going to happen next. By inviting patients into the treatment process through easy-to-understand explanations, both patients and dentists benefit.

Medical Necessity

Medicaid only pays for services it considers to be medically necessary for diagnosing and treating a dental condition. What a dental professional considers medically necessary from a clinical perspective may not match what Medicaid considers medically necessary from a reimbursement perspective and the dentist needs to be aware of the difference. The fact that a dentist prescribes treatment does not make it a compensable benefit under Medicaid.

To prove medical necessity for any dental service, whether required for prior authorization or for retrospective/prepayment review, the following documentation should be available and present in the patient record:

Medical Necessity (cont.)

1. Diagnostic dental x-rays should be labeled right or left and note the date x-rays were taken (including duplicates).

2. Patient complaints, symptoms, clinical observations, assessments and x-ray findings should be documented in the patient's record.

3. The dental professional signature or initials should accompany all patient treatment note entries.

4. All referrals should include the name of the referred provider, date, reason for the referral and the referring dentist's name.

5. All treatment provided must be written legibly in the patient record. If it is not legible, it may not be compensable by DentaQuest. Bill for services actually provided. Also, space maintainers, crowns, dentures and bridges should be billed on the day they are delivered and not the date the impression was taken. If billed services do not have adequate supporting documentation, DentaQuest will recover payment from a future remittance.

Complete documentation in the patient record ensures the delivery of appropriate care. Please follow this general rule: Document, Document, Document.

Understanding EPSDT

What are EPSDT services?

Early and periodic screening, diagnostic and treatment (EPSDT) services are those required under the Medicaid program for most individuals under age 21. EPSDT services include periodic screening, vision, dental, and hearing services, as well as other necessary health services.

Under the Medicaid program, states are required to develop individual periodicity schedules to ensure EPSDT services are provided at the appropriate stage in a child's oral health development. Periodicity schedules help you make clinical decisions concerning preventive oral health interventions, including anticipatory guidance and preventive counseling.

Many states choose to follow the American Academy of Pediatric Dentistry's (AAPD) periodicity schedules. DentaQuest outlines the AAPD's recommendations for dental care in the office reference manual. Please remember that this schedule serves as a guide and can be modified to meet individual needs.

How you can help raise EPSDT visits

The EPSDT program focuses on prevention and promoting healthy habits starting at a young age. You play an important role in ensuring Medicaid children have the best chance for a future free of dental disease.

Here are a few tips on how you can help increase EPSDT visits:

- Stress the importance of establishing a dental home. A dental home promotes continuous and comprehensive care. Educate your patient's parent or guardian on the benefits of visiting the same general or pediatric dentist.

- Establish a recall schedule. Educate parents and guardians on the importance of six-month preventive visits. If you do not have your own system for recall visits, we suggest at minimum mailing appointment reminders and making reminder phone calls 48-72 hours in advance of an appointment.

- Review the periodicity schedule. Learn more about the periodicity schedule by visiting the AAPD's website: http://www.aapd.org/media/Policies_Guidelines/G_Periodicity.pdf.

Prevent Member Fraud

Have you ever encountered a case in which your office staff verified a member's history and then had the claim denied for 'exceeding benefit limitations' for a date of service just prior to the member's scheduled visit to your office? Have you ever extracted a member's tooth and then had the service denied due to 'previously extracted tooth'?

Both of these could be examples of member fraud. Unfortunately, it is a well-known fact that some government dental program members share their identification cards with others, allowing ineligible individuals to receive free dental treatment. An effective way to prevent these activities is to request a photo ID along with the member's card. This approach may not only protect your office from incurring an unpaid service, it may also assist in appropriately utilizing taxpayer dollars. If you suspect a member is committing any form of fraud, please contact DentaQuest's Fraud Hotline at 800.237.9139. All hotline calls remain confidential.

Electronic Authorizations and Claims

As a reminder, you can easily submit claims and authorizations to DentaQuest using our website: www.dentaquestgov.com.

First time users

If your business is not already registered, access the self registration web site at www.dentaquestgov.com/selfreg/register.aspx to register and create a super user account.

Note: On the homepage of the self-registration web site, you can access a detailed training manual that outlines the process.

Once registered, follow the instructions below for **Registered Users**.

Registered users

Once you have entered our website at www.dentaquestgov.com :

1. Click on the "Dentists" link.
2. Select your state and click "go".
3. On the next screen, click on "ProviderQuest Web Portal".
4. Enter your username and password.
5. Click on the **Claims/Pre-Authorizations/Referrals** menu on the left margin of the homepage.
6. Click on **Dental Claim Entry** to enter a claim or click or **Dental Pre-Auth Entry** to enter an authorization.

To access the **Provider Portal User Guide** with detailed instructions for all functions of the web portal, click on the **Related Documents** link on the web portal homepage.

If you prefer to send an email, click on the "Contact Us" section on www.dentaquest.com and select "Provider Email Page".

Need Assistance?

Help Is Just a Click or Call Away!

This is to remind you that you can receive 24-hour service, 7 days a week, by accessing our website at www.dentaquestgov.com. Use our website to check member eligibility and history or to submit claims and authorizations free of charge. Should you need additional assistance or wish to use our interactive voice response system, please contact us at the toll free number listed in your office reference manual.

As always, thank you for partnering with us to provide needed dental care to our members.

ENROLL IN DIRECT DEPOSIT!

DentaQuest now offers dentists the option to receive payment via direct deposit. This exciting new feature results in quicker payment turnaround times as funds are deposited directly into your banking account.

Enrolling in direct deposit is simple. Just follow these easy steps:

- Complete and sign the electronic transfer form 2010 which can be found under Related Documents on our new web portal: https://govservices.dentaquest.com/
- Include a voided check (your request will not be processed without a voided check)
- Please ensure the writing is legible to prevent any delays in the implementation of your direct deposit funding
- Return the electronic transfer form and voided check to DentaQuest

For your convenience, we're giving you two options to return your enrollment form and voided check:

- Via fax – 262.241.4077
  or
- Via mail – 12121 North Corporate Parkway, Mequon, WI 53092 ATTN: Provider Enrollment

Please allow up to six weeks of the receipt of your paperwork for your direct deposit process to be implemented. You will receive a bank note one check cycle prior to your first direct deposit payment.

In the future, it will be important that you notify DentaQuest of any changes to your bank account such as routing or account numbers, the bank you use, or other relevant information via a change form. The change form can be found in the office reference manual under Related Documents once you have logged on to your web account. Please allow 2-3 weeks notice to implement new banking information. DentaQuest can not be held responsible for delays in funding if you do not notify DentaQuest in writing of any banking changes.

As an additional benefit, you'll be able to access your remittance statements on the provider web portal. This is a fast and easy way to verify your payments. Please note that by signing up with direct deposit, you will not have the option to receive paper remittances.

We are excited to offer you this benefit and hope you take advantage of this program. Should you have any questions, please contact your provider service department at 888.875.7482.

Meeting the needs of individuals with Limited English Proficiency

Recipients of government-sponsored dental programs are generally more diverse in terms of race and ethnicity than those associated with commercial dental plans. They often present cultural and language differences that may complicate delivery of effective care.

DentaQuest and its providers are required to make accommodations to meet the needs of members with Limited English Proficiency (LEP). LEP individuals do not speak English as their primary language and have a limited ability to read, speak, write, or understand English.

We contract with Certified Languages International (CLI) to accommodate non- English speaking members. This professional language company specializes in phone interpreter services and provides translation in more than 150 languages. Their representatives are experienced in medical and insurance terminology. If a member contacts our call center and prefers to speak in their language, we will place a conference call to CLI who will in turn provide immediate translation services during the course of our call.

To learn more about LEP, take a self-assessment test or access state specific resources, please visit www.lep.gov.

Overcoming Language Barriers

Communicating diagnosis and treatment information can be challenging, especially when crossing a language barrier. When communicating with a member for whom English is not a primary language, please consider the following:

1. Language capacity. Please let us know languages your practice can accommodate. It helps us appropriately direct members for care.
2. Translation. If translation is needed, family members can often act as translators. Local service agencies and community centers also offer translation services.
3. Written documentation. If you offer services requiring out of pocket fees, such as cosmetic services, it is beneficial to communicate financial responsibility and pricing information to patients in their primary language.

The Importance of Six Month Recalls

Establishing a dental home ensures the delivery of repetitive, dependable dental care. Especially for young children, this is critical to establishing good lifelong oral hygiene habits. Preventative treatment such as prophylaxes, fluoride treatment, and oral hygiene instruction promotes pain-free dental health. Six month recall appointments are important because early signs of disease can be detected and treated.

As a dental provider, please encourage your patients to come back to your office for their six month recall. If you do not have your own system for recalling patients, here are some suggestions:

- Mail appointment reminders.
- Make reminder phone calls 48-72 hours in advance of an appointment.
- Adjust office hours to best accommodate your patient population.
- Hang posters around the waiting room listing the benefits of visiting the dentist every six months.
- Remind patients at the beginning of an appointment that they will need to schedule their six month recall before leaving that day.

Imagine the impact you will have on the oral health of your patients by reminding them about the importance of regular dental check ups. Children and adults who visit the dentist on a regular basis benefit from healthier teeth and gums.

Reminder for Members with Primary Insurance

Please remember that protecting each member's personal health information is very important.

If you are submitting claims to DentaQuest and including a copy of an EOB from the member's primary insurance carrier, please make sure it only contains information for that member.

If there are other members listed on the EOB, please blacken out the appropriate areas so their public health information is not visible.

ANNUAL DOCUMENTS

To receive a copy of the 2012 Q2 and UM annual documents, please contact us at 800.341.8478

MEMBER SATISFACTION SURVEYS

The member satisfaction surveys were conducted by telephone during 2010 and completed using member eligibility data provided by the plans. The results for the surveys across all states in which we administer dental benefits were as follows:

Overall, how satisfied are you with your dentist?.....94% very and somewhat satisfied

Overall, how satisfied are you with the dental care that
(you/your child) has received in the past 12 months?.....93% very and somewhat satisfied
Overall, how satisfied are you with your dental plan?.....92% very and somewhat satisfied

In your opinion, did the dentist or dental staff do everything they could to help
(you/your child) feel as comfortable as possible during the visit?.....95% yes

Did the dentist or dental staff explain what they were doing
while treating (you/your child)?.....78% always

Did the dentist or dental staff give you advice on how to avoid dental problems?.....89% yes

In general, how would you rate the overall condition of
(your/your child's) teeth and gums today?.....80% good or very good

DentaQuest will work with the individual plans, particularly where deficits were noted to improve member satisfaction.

PROVIDER SATISFACTON SURVEYS

The annual provider satisfaction surveys were completed during 2010 and conducted via written survey. The overall results for the surveys across all states in which we administer dental benefits were as follows:

Satisfaction with DentaQuest.....80% satisfied

How likely are you to continue begin a provider for DentaQuest in the coming year?.....89% will continue

Overall, would you say that DentaQuest compares to over Dental Plans?.....83% the same or better

Usefulness and clarity of Office Reference Manual.....73% good or better

Accuracy of payments.....74% good or better

Ability to obtain accurate information from customer service
call center representative.....70% good or better

Payments received within the agreed upon time frame.....69% good or better

Consistency in applying authorization criteria.....62% good or better

Ability to obtain timely information from customer service
call center representative.....67% good or better

Turnaround time of authorization process.....63% good or better

Ease of using the Provider Web Portal.....84% good or better

Speed of answer when calling DentaQuest's customer service call center.....60% good or better

Ease of using the Interactive Voice Response (IVR) phone system.....70% good or better

DentaQuest

CONTACT INFORMATION

DentaQuest Provider Service

800.341.8478

- Press 1 for Automated Eligibility (via IVR System)
- Press 2 for Benefits, Eligibility and History
- Press 3 for Claims and Payment Options

Via Email

- Electronic Claims Setup and Questions
  ddusa_providerrelations@dentaquest.com
- Claims Payment Questions
  denclaims@dentaquest.com
- Eligibility or Benefit Questions
  denelig.benefits@dentaquest.com

Utilization Review

800.294.9650
ddusa_um@dentaquest.com

Provider Relations

800.341.8478

Provider Web Questions

888.560.8135
www.dentaquest.com