Provider ALERT!

September 2010

Guidelines for Faster Dental Claims Payment

Incomplete or missing information on submitted claims can cause delays in processing. Applying the following guidelines will help you submit a completed, thorough claim form:

- **2006 Claim Form**
  The 2006 ADA Claim Form is Blue Cross of Idaho’s standard form and enables us to take advantage of automated processes that provide more efficient handling of your claims. A PDF copy of the form is available on the Blue Cross of Idaho website for your convenience.

- **Major Restorations – Prior Placement Date (Items 43 – 44)**
  When submitting any major restoration, if the procedure is an initial placement, mark **NO** in item 43. If replacing an existing dental prosthesis, mark **YES** in item 43 and enter the prior placement date in item 44. Please confirm your software settings don’t assign default values to items 43 and 44.

- **Accident Related Services – (Items 45 – 47)**
  If the treatment is a result of an accident, mark the appropriate box in item 45 and complete the fields in items 46 and 47. These three fields are essential for correct claim handling and help us coordinate any additional benefits your patient may have under a Blue Cross of Idaho medical plan so you don’t have to submit multiple claims.

- **Other Coverage Information (Items 4–11)**
  Blue Cross of Idaho verifies other insurance carrier information before paying claims. Confirm other primary insurance carrier information with the subscriber, enter the information in items 4 – 11 and attach the EOB from the primary insurance carrier to the claim. EOBs may be attached to electronic claims via the National FastAttach™ application. Please advise subscribers to call us if there are questions concerning the order of benefits.

- **Periodontic Codes – Tooth Numbers vs. Quadrants (Item 27)**
  Submit procedure codes indicating one to three teeth per quadrant (D4231, D4241, D4261, D4342) with the actual tooth number(s) treated within the quadrant. Treatment for tooth numbers outside the same quadrant should be listed on the claim as separate procedures.

  Submit procedure codes indicating four or more teeth per quadrant (D4230, D4240, D4260, D4341) with the appropriate tooth range. If you treated the full quadrant, use the quadrant indicators as noted below.

  (Procedure codes submitted not following the noted guidelines will be rejected.)

<table>
<thead>
<tr>
<th>Quadrant</th>
<th>UR</th>
<th>Lower right quadrant</th>
<th>LR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upper left quadrant</td>
<td>UL</td>
<td>Lower left quadrant</td>
<td>LL</td>
</tr>
</tbody>
</table>