



News For Network Dentists and Staff

December 2011

Dear Doctor,

For years, we have been working with you to ensure that Delta Dental of Massachusetts members receive high quality dental care. We could not accomplish this without our valued participating dentists.

In October, Delta Dental of Massachusetts implemented a new claims processing system to enhance our ability to create efficiencies and offer great self-service options. While many aspects of our transition have gone exceedingly well, not surprisingly, we have encountered some challenges during the transition to this new system. We would like to take this opportunity to update you on what has been addressed already and what issues are still ongoing with this major initiative.

#### In This Issue

**Consolidated Explanations of Benefits (CEOBs)**

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### Claim Processing

Some claims have experienced delays in processing. We have added staff to work through the backlog to get caught up as quickly as possible. Please know that over 85% of our claims have been processed and paid. Some details around the delayed claims:

### Consolidated Explanations of Benefits (CEOBs)

We have received some helpful feedback about the new layout of the CEOBs, and will be increasing the font size on the document to improve readability and changing the way the document is organized to make it easier to find the information you need.

- Coordination of benefits claims are being processed, but with some initial delays. We are working to get these caught up and processed. To speed up the processing of these claims, please be sure to mark the COB box on the claim form and to include any payor EOBs, etc. with the claim submission.
- Some claims have been delayed due to provider data for many dental offices. Under our new system we use the treating (type 1) and billing (type 2) NPI coupled with the service office address as our first option to match the submitted claim to our provider files. ([Click here to see an example](#)) If we do not match on the NPI and address we default to the first and last name of the treating dentist. If any of this information is not on the claim, or this information is different than the information in our records, the claim is suspended for manual research. Thank you to all who have updated your forms to ensure timely processing of your claims.
- We can no longer accept claim forms older than 2006. If you are still using old claim forms, please update to a version that is 2006 or newer. An example is located under [Forms on the Dentists section of our website](#).
- You can view the status of your claims that have been

entered into our system by [logging in to the web portal](#) and selecting the *Claim/Pre-Estimate Status* option. [Please see this diagram for an explanation of the status categories.](#) (Link opens a PDF file)

- As happens each year, members enrolled through BTU, the Boston Teachers Union and the Boston Teachers Union Paraprofessionals were placed on hold in early September. BTU provided their annual eligibility update in record time this year. Unfortunately it arrived on 10/28 in the midst of our conversion process. Due to unexpected technical challenges we were not able to complete the required eligibility adjustments for this group until early December which delayed claims processing and payments. The claims for BTU members were released for processing over the weekend of 12/5.

## Customer Service

Questions surrounding our new website, new Consolidated Explanation of Benefits forms, and other associated issues have caused an increase in calls to our customer care center. We have added staff and we are working hard to get all calls answered in a timely manner.

As a reminder, our customer care center is open from 8:30 a.m. - 8 p.m. Monday-Thursday and 8:30 a.m. - 4:30 p.m. on Friday. If your staff needs to call, we recommend calling after 5 p.m. if possible, when wait times generally tend to be shorter.

**Please consider using these self-service options to greatly reduce any possible inconvenience from call wait times.** You can obtain the information you need, when you need it without having to wait for a representative by using one of our Self Service Options:

### On the IVR at 800-872-0500:

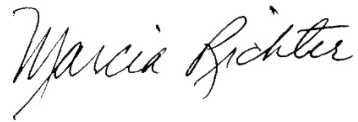
- Member Eligibility and Benefit Information
- Member Claims History
- Remaining Annual Maximum and Deductible
- Faxback Benefit Summaries

### On our [website](#):

- Member Eligibility and Benefit Information
- Member Claims History
- Remaining Annual Maximum and Deductible
- Detailed Claim Status for all your claims (See included diagram for further details.)
- Member Service History indicates when prior procedures were performed
- Ability to view both secure (specific to a dental practice) and general documents (documents pertinent to all dentists)
- Copies of CEOBs for your dental practice

Correcting these issues is and will remain a high priority. The end result will be a system that offers improved service to you by providing the best technology available in dental benefits administration. We are dedicated to keeping you informed of what is happening with this project, and will continue to provide updates as they become available.

Sincerely,



Director, Professional Relations

12/23/11

**You are receiving this e-mail because you signed up as a super user on the Delta Dental of Massachusetts web portal. We will only use this address to periodically send you important updates and announcements about Delta Dental service. We will never share your address with any other outside organization.**



Try it FREE today.

This email was sent to claudia.arnoff@deltadentalma.com by [marcia.richterpc@deltadentalma.com](mailto:marcia.richterpc@deltadentalma.com) | [Update Profile/Email Address](#) | Instant removal with [SafeUnsubscribe™](#) | [Privacy Policy](#).

Delta Dental of Massachusetts | 465 Medford Street | Boston | MA | 02129

**ADA Dental Claim Form**

**ADA DENTAL** P.O. Box 248 Customer Service  
Pittsboro, NC 27569 919-437-4500

1. Type of Transaction (Check all that apply)  
 Payment of Advance Services  Payment for Professional Procedures  
 PREST/Pre-Set

2. Procedure - Procedure Number

3. Insurance Coverage (Check all that apply)  
 a. Group/Plan Name, Address, City, State, Zip Code

4. Policy Number

5. Date of Birth (MM/DD/YYYY) 6. Gender 7. Race/Ethnicity (Check all that apply)  
 Other  Hispanic or Latino  Asian or Pacific Islander  American Indian or Alaska Native  Unknown

8. Date of Procedure (MM/DD/YYYY) 9. Date of Procedure (MM/DD/YYYY)  
 Pre-Set  Advance  Payment  Other

10. Office Name (Check all that apply) 11. Office Address (City, State, Zip Code)

12. Office Phone Number (City, State, Zip Code)

13. Office Fax Number (City, State, Zip Code)

14. Office Email Address (City, State, Zip Code)

15. Office Website (City, State, Zip Code)

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**BILLING DENTIST OR DENTAL ENTITY** (Leave blank if dentist or dental entity is not submitting claim on behalf of the patient or insured/subscriber)

48. Name, Address, City, State, Zip Code

49. NPI

51. SSN or TIN

52. Phone Number

53. National Provider ID

48. Please include the billing office information. This may be the same as box 56.

49. If applicable please provide your Type 2 NPI. If you don't have a Type 2 please leave blank

**TREATING DENTIST AND TREATMENT LOCATION INFORMATION**

53. I hereby certify that the procedures as indicated by date are in progress (for procedures that require multiple visits) or have been completed.

X \_\_\_\_\_  
Signed (Date)

54. NPI

55. License Number

56. Address, City, State, Zip Code

56A. Provider Specialty Code

57. Phone Number ( )

54. Please include your Type 1 NPI

56. You MUST include the name of the treating dentist (not dental hygienist)

## Status Category

- In Process** - Claim has been received by Delta Dental but not yet adjudicated
- Adjudicated** - Claim has been processed for payment or estimate has been provided
- Finalized** - Either a check or EOB has been produced for this claim



### Claim/Pre-Estimate Status List

This page displays a list of claims submitted for a specific patient/subscriber according to the search criteria. Click on the Claim Number to access claim detail information. If available, click on the View CEOB link to view benefit information for a claim. Click on the member name to view member detail information. Click on the provider name to view provider detail information. Click CEOB Search to initiate a CEOB search. Click Search Again to initiate a new search.

Results										Download File
Claim/Pre-Estimate Number	Type	Member Name	Date	Dentist/Office Name	Status Category	Total Billed Amount	Patient Payment	Delta Dental Payment		
234567892345678	Dental Claim	ALEXANDER WHITE	10/24/2011	SHELTON, BRIAN	In Process	\$150.00	\$0.00	\$96.00		
234567892345679	Dental Claim	ALEXIA KELLER	10/20/2011	SHELTON, BRIAN	In Process	\$218.00	\$0.00	\$141.00		
234567892345670	Pre-Estimates	AMANDA CARL		SHAW, MARK	Adjudicated	\$1,848.00	\$680.42			
234567892345671	Pre-Estimates	ANDREW WILSON		SHELTON, BRIAN	Finalized	\$3,175.00	\$1,299.02			
234567892345672	Pre-Estimates	ANGENLA SMITH		SHELTON, BRIAN	In Process	\$1,500.00	\$1,131.26			
234567892345673	Dental Claim	ANDREA WILLIAMS	10/24/2011	SHELTON, BRIAN	Finalized	\$139.00	\$0.00	\$113.49		

Search Again

CEOB Search