

Paper Claims Will Not Be Accepted Beginning March 1, 2024: Register for Availity Essentials Today

Effective March 1, 2024, Arkansas Blue Cross and Blue Shield and its subsidiary companies will no longer accept paper claims. The Availity Essentials portal now serves as the electronic data interchange (EDI) gateway and provider portal, allowing providers to submit direct data entry (DDE) claims. Unsolicited attachments (including medical records) and other documentation, except those related to Arkansas Blue Medicare plans, can now be submitted with a claim. Paper claims are edited using the same process as electronic claims. This new process will improve the efficiency of claims submissions and result in fewer rejections since paper claims are not visible in the Availity portal and result in more denials. An Arkansas Blue Cross-issued submitter ID (E####) is no longer required for providers submitting electronic claims. You may now submit claims through a clearinghouse, direct data entry on Availity, or through secure file upload.

If you have not registered with Availity, please take a moment to do so now or before the March transition deadline. You can find <u>additional information</u> about what is available and how to register on Availity's website. Once registered, you can access several training modules specific to Arkansas providers in the Availity Learning Center. This information will show you how to navigate Availity Essentials and find the information that you need.

If you need help registering or other assistance, call 1-800-Availity (282-4548). For more information about the paper-reduction initiative, contact the Arkansas Blue Cross EDI division at 1-855-822-2446.

You'll be sent additional information about the limited exemption policy next month.

The Availity Essentials portal gives you access to benefits, eligibility, claims, claim status, claim correction, remittance viewer, electronic remittance advice, dedicated payer space (helpful resources/links), overpayment requests, prior auth/pre-service review, electronic funds transfer, fee schedule and unsolicited attachments.

Arkansas Blue Medicare does not participate in electronic attachments, overpayments or prior auth review on the Availity Essentials portal at this time.

There is no option to opt out of FEP. You are required to see these patients unless you are not accepting new patients. You must also file a claim for the member. If you are credentialed with a type 2 NPI, you should be billing with that NPI. If you are unsure if you are credentialed with a type 2 NPI, you can verify your status by emailing us at <u>dentalproviderrelations@usablelife.com</u>.

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Arkansas Dental License Renewal Year

This is a friendly reminder dental license renewal is due by Dec. 31. Arkansas State Board of Dental Examiners (ASBDE) is accepting renewal applications through Dec. 31. Registering early is strongly encouraged to avoid termination of your network contract with Arkansas Blue Cross Blue Shield. If you have not renewed your license by Dec. 31, your license will be considered delinquent, and your contract with Arkansas Blue Cross Blue Shield will terminate effective Jan. 1, 2024.

You can register at the <u>Arkansas Department of Health's website</u> or the <u>Arkansas State Board of Dental</u> <u>Examiners' site</u>.

2024 Dental Fee Schedules Are Now Online

The 2024 <u>Dental Fee Schedules</u> have been added to our website. Not all codes are covered benefits. Please check the member's plan for verification and limitations.

Frequency Change for Medicare Advantage Plan Services

Currently, restorative services can be done in 12 consecutive months. In 2024, the services will be allowed through the calendar year. For example, if a member is allowed two fillings a year, they can access this service from January through December.

D1354 Silver Diamine Will Be Covered In 2024

Effective Jan. 1, 2024, silver diamine will be a covered benefit (CDT code D1354). Arkansas Blue Cross dental plans will allow two applications per tooth per year; tooth identification is required for submission. There are no integral considerations or exclusions. It is considered a preventive service for kids and adults. Third molars may be excluded from some plans.

Dental Xtra

To confirm if your patients are enrolled in Dental XtraSM, log in to the <u>My Patients' Benefits</u> website and select "Medical Conditions" in the "Member Eligibility" section. Members who have medical and dental plans through Arkansas Blue Cross and an eligible medical condition are automatically enrolled in the program. Members who have only an Arkansas Blue Cross dental policy or are pregnant can <u>self-enroll</u> on our Dental Xtra enrollment page. Once you have identified enrolled members, we encourage setting up their four prophy recalls.

New Claims Payment Options Available through ECHO Health

Getting paid just got easier with the new claim payment options available through ECHO Health. <u>Learn more</u> about the payment options available to your practice. You can also contact ECHO Health at 1-800-886-5913.

If you have questions about claims, benefits or member information, please call the customer service team at 1-888-224-5213. You can also find helpful numbers on the <u>dental provider page</u>. Be sure to download the <u>Quick</u> <u>Reference Guide</u> to your desktop for quick access! **REMINDER: You MUST have a reference number available before contacting the dental provider relations team**.



Alex Abbott, D.D.S. - North Little Rock Jacob Auprey, D.D.S. - Fort Smith Karla Baltz, D.D.S. - Pocahontas R. Martin Baumgardner, D.D.S. — El Dorado John Clark, D.D.S. - Conway Ward Clemmons, D.D.S. - Fort Smith Ricky Cornish, D.D.S. – Highland Nina Coto Mejia, D.D.S. – Siloam Springs Byrl Criswell, D.D.S. - Van Buren Andrew Curry, D.D.S. — Texarkana Robert Dalby, D.D.S. - Fort Smith John Dean, D.D.S. - North Little Rock Fred Dietrich, D.D.S. – Camden Nick Dollar, D.D.S. - Prairie Grove Nicole Donaldson, D.M.D. - Little Rock Rickey Douglas, D.D.S. - Van Buren Alexander Dozier, D.D.S. - Sherwood Michael Drake, D.D.S. - North Little Rock Michael French, D.D.S. - McGehee Frank Griffin, D.D.S. - Fort Smith Bradley Hillman, D.D.S. — Hot Springs Simona Ivan, D.D.S. — Hot Springs Brooke Jeffus, D.D.S. – Bryant

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SPECIALIST

ENDODONTIST Stephen Boatright, D.D.S. – North Little Rock

Medicare Advantage dental network is separate from the dental PPO network and has different allowances. See the attached <u>Arkansas Blue Cross Reimbursement Guide</u> for more information about what networks apply to each plan.

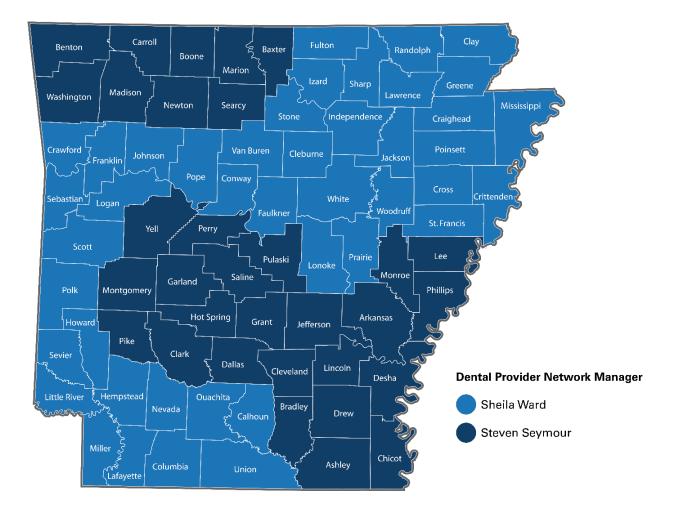
Filing Medical Claims

Did you know that when you file a medical claim, you can use a D code instead of a CPT code? If you use a D code instead of a 41899, you will not have to supply medical records.

Our Dental Network Managers Are Here to Help

Your dental network manager is available to help dental providers. Members may contact customer service by calling the phone number on the back of their member ID card. Please don't share your dental network manager's contact information with your patients. If customer service is unable to assist them, make sure to have a reference number available before contacting your dental network manager.

Contact Information	
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