



Details

A Delta Dental Publication for Dentists & Their Office Staff

Spring 2010

Online features that make your job easier

I am pleased to announce some exciting enhancements to our online services. This June, we will unveil a host of upgrades to our E-Office suite – from more detailed patient eligibility information to time and frequency usage by benefit (e.g. number of cleanings used already during the coverage year). And our new “tab” format will allow you to quickly choose the specific information you need.

Although our web site will look a little different, please be assured that you’ll still have access to the same dental health information that you do today, plus some new features that we hope make managing your patients’ benefits even easier.

This special edition of Details will walk you through some of the changes that you can expect to see. I also encourage you to take advantage of the online tutorials that will be available on our web site once the enhancements go live.

Debbie Abbruzzi
Director, Professional Relations

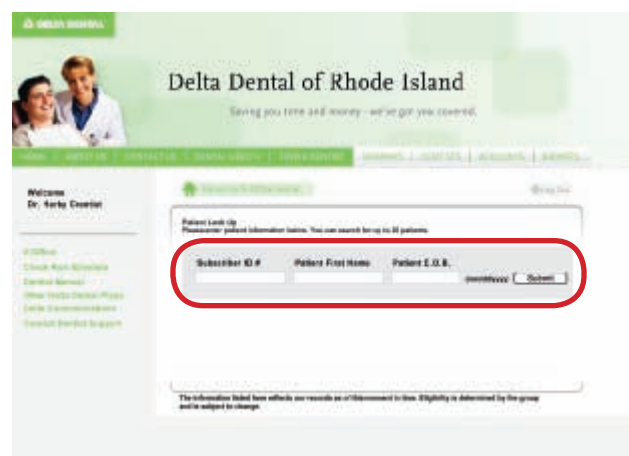
Enhanced Online Service to Better Manage Your Delta Dental Patients

Managing your Delta Dental patients online will soon be easier, as we introduce enhancements to our online services. From a refreshed look on the site to an array of new features, below is an at-a-glance look at some of the changes.



Once you’ve logged in, you will have two options. You can either : 1) Look up maximums, benefits and recently submitted and processed claims for Delta Dental patients or 2) Submit claims through our Claim Submission Program.

To access detailed benefit information, including maximums and deductibles or to check the status of a submitted claim, enter the patient’s subscriber ID number, First Name and Date of Birth. You will need to enter patient information individually, but you can search up to 20 patients at a time.



Delta Dental of Rhode Island
Saving you time and money - we've got you covered.

Welcome Dr. Herby Crensted

Subscriber Name: John Doe | Subscriber ID: 123456789
 Member Name: John | Group Number: 1234-0001
 Coverage Type: Family | Group Name: Example Group, Inc.
 Product Name: Delta Dental Premier
 Plan Type: National Coverage | **Calendar Year: 01/01/2018 - 12/31/2018**

Eligibility

Name	Relationship	D.O.B.	Coverage Dates
John Doe	Subscriber	11/01/1988	10/01/2008 - Present

Below is a summary of the patient's available maximums for the current Plan Year.
Please refer back to the "Maximums" tab for complete coverage information.

Deductibles
Individual Deductible: \$0.00 | Family Deductible: \$0.00

Maximums

Annual Maximum	\$1,200.00	Orthodontic Maximum	Not Covered
----------------	------------	---------------------	-------------

Annual Maximum: \$1,200.00 | **Orthodontic Maximum: Not Covered**

Remaining: \$1,200.00

Tax & Frequency Status
Below is a summary of usage for benefits with time limitations.

Service	Usage	Max. Elig. Service Date
Exam	0 of 2 used	Max. Elig. Service Date: 11/08/2008
Bitewing X-Rays	0 of 2 used	Max. Elig. Service Date: 11/08/2008
Cleaning	0 of 2 used	Max. Elig. Service Date: 11/08/2008
Fluoride	Over Age	Not Eligible
All (Most) or Permanent X-rays		Max. Elig. Service Date: 11/08/2008

The information listed here is not a guarantee of payment. Payment is based on the Delta Dental allowance for each procedure. To be covered, we must meet an eligibility requirement and a maximum benefit. Delta Dental's benefit is subject to the terms, conditions, exclusions, limitations, and other provisions of the policy. All services must be performed in a dental office. Coverage for benefits with time limitations (e.g. 6/12/24/36 or 60 months) is calculated to the next city cycle.

The **Eligibility** tab confirms that the patient is a Delta Dental member, and provides specific details about their coverage, including the Product Name, Plan Type and whether the patient is covered by Policy Year or Calendar Year.

Note: Very few groups fall under a Policy Year.

The lower portion displays more detailed information about the deductibles and maximums associated with the patient's plan, (e.g. Annual Maximums, Orthodontic Maximums and Deductibles, if applicable), along with any remaining balances. You'll be able to see how many benefit dollars have been used to date, and verify time and frequency usage by benefit (e.g. how many cleanings or exams were received during the coverage period).

The **Benefits** tab provides you with detailed information about the patient's benefit plan, including whether or not a deductible applies to particular services. From this screen, you can print a full summary of benefits.

Delta Dental of Rhode Island
Saving you time and money - we've got you covered.

Welcome Dr. Herby Crensted

Subscriber Name: John Doe | Subscriber ID: 123456789
 Member Name: John | Group Number: 1234-0001
 Coverage Type: Family | Group Name: Example Group, Inc.
 Product Name: Delta Dental Premier
 Plan Type: National Coverage | **Calendar Year: 01/01/2018 - 12/31/2018**

Print Full Summary

Benefit Summary
Below is a summary of your benefit coverage for services received within the Delta Dental network. To maximize your dental benefits, we encourage you to visit a participating dentist. Your out-of-pocket costs will be higher when you visit a non-participating dentist.

Individual Deductible: \$0.00 | Family Deductible: \$150.00

Procedure	Covered at	Deductible Applies	Waiting Period	Frequency/Limitations
Diagnostic				
Dental exam	100%	No	None	Once per calendar year
Complete x-ray or panoramic film	100%	No	None	Once every 36 months
Bitewing X-rays	100%	No	None	Once per calendar year
Single Tooth X-rays	100%	No	None	As Required
Preventive				
Cleaning	100%	No	None	Times per calendar year
Fluoride (restored)	100%	No	None	Coverage provided for children under the age of 18
Sealants	100%	No	None	Once every 24 months on unrestored permanent molars for children under the age of 14
Space maintainers	80%	Yes	None	Replacement limited to once every 90 months for lost deciduous (baby) teeth

Delta Dental of Rhode Island
Saving you time and money - we've got you covered.

HOME | ABOUT US | CONTACT US | DENTAL HEALTH | FIND A DENTIST | MEMBERS | DENTISTS | ACCOUNTS | BLOGS

Welcome Dr. Herby Crestist

Return to Patient Lookup | Return to E-Office Home | Print Full Summary | Log Out

Eligibility / Deductibles / Maximums | **Benefits** | **Claims**

Subscriber Name: John Doe | Subscriber ID: 123456789
 Member Name: John | Group Number: 1234-0001
 Coverage Type: Family | Group Name: Example Group, Inc.
 Product Name: Delta Dental Premier | Plan Type: National Coverage | Calendar Year: 01/01/2010 - 12/31/2010

Claims

Below is a summary of member claims. You can review claim activity by member and within a designated time period. Or print an EOB for any processed claim. Review more detailed claim information for each member by clicking the "Detail" button.

Claim Status: View: Past 90 Days

Date of Service	Dentist Name	Plan Pays	Paid to Provider	Check #	Paid Date
12/12/2009	Crestist	\$700.00	000000	000000	12/12/2009
11/12/2009	Crestist	--	--	--	--

The information listed here is not a guarantee of payment. Payment is based on the Delta Dental of Rhode Island's coverage for each procedure. To be covered, services must be dentally necessary and in accordance with Delta Dental's treatment guidelines. All services must be performed in a dental office. Coverage for benefits with time limitations (i.e. 6,12,24,36 or 90 months) is calculated to the exact day plus one.

The **Claims** tab allows you to check the status of a pending claim. You'll be able to verify that the claim was processed, what was paid and look up the check number.

Our **Claim Submission Program** allows you to enter claims for Delta Dental patients quickly and easily. The program opens in a new window, providing you with continued access to patient benefit information at all times.

Please Note: Over the next few months, we plan to make enhancements to this program that will save you time when entering claims.

*** IMPORTANT NOTE:** To ensure our online services and features are accessible to all web users, we are working to make these applications available across multiple browser platforms, including Firefox, Chrome and Safari, in addition to Internet Explorer. However, some applications may temporarily be limited to a particular browser. As a result, we recommend that you continue to use Internet Explorer in the interim to guarantee seamless access to our online services.

Delta Dental of Rhode Island
Saving you time and money - we've got you covered.

HOME | ABOUT US | CONTACT US | DENTAL HEALTH | FIND A DENTIST | MEMBERS | DENTISTS | ACCOUNTS | BLOGS

Welcome Dr. Herby Crestist

Welcome to E-Office

Our E-Office suite of services provides you with easy access to patient information, when you need it. Plus, our Claim Submission Program will save you valuable time when entering claims for Delta Dental patients.

From this screen, you can either:

- Look up detailed benefit information, including maximums and deductibles, or check the status of a submitted claim
- Submit new claims through our Claim Submission Program

BenefitCheck
Access detailed benefit information or check the status of a claim
Launch BenefitCheck

Claim Submission
Submit claims for recent services
Launch Claim Submission

IMPORTANT REMINDER: Delta Dental Premier Annual Notice

The national Delta Plans Association (DDPA) requires us to annually notify participating Delta Dental of Rhode Island Premier dentists that they are automatically part of the national Delta Dental Premier program. As a participant in this national program, you must accept the payment and claims processing policies set forth by the Delta Dental Plans Association. Please Note: The national PPO program is an optional program for participating dentists and a separate contract is required.

Rhode Island participating Delta Dental Premier and Delta Dental PPO dentists are not allowed to balance bill beyond their approved maximum fee allowance (based on each product) except for non-covered services, services over the maximum or for alternate benefits. Participating dentists must accept their approved maximum plan allowance for subscribers when the fee is not payable because of a deductible, or for benefits with frequency limitations or waiting periods.

Completed Claim Standard

State and federal regulations require insurers to process completed claims within certain timeframes. We are also required to notify providers of our definition of a complete claim.

For Delta Dental of Rhode Island: A completed claim is a properly submitted paper ADA dental claim form (or a reasonable facsimile) or electronic claim submitted in a HIPAA compliant format, with all data fields accurately and legibly completed, accompanied by x-rays, charting, narratives or other documentation as may be specified for the procedure in question in the Delta Dental of Rhode Island Participating Dentist Manual and/or other written communications.

Administrative Reminders

Claims by Treating Dentist: When submitting claims (web, electronic or paper) to Delta Dental of Rhode Island, verify that the dentist who rendered services is listed as the treating dentist. To avoid incorrect/delayed payments, be sure to list the dentist's correct license number, tax ID number and rendering office address. Payment will be made to the designated business name we have on file for that dentist.

Bridges: When a patient needs a bridge, please submit the claim using the correct CDT code from the D-6000 series. Benefits will pay in accordance with the subscriber's contract. If the plan has no prosthodontic coverage, the bridge will not be covered and is the patient's responsibility. Please Note: When bridges and single tooth crowns are covered at different percentages, a bridge is processed at the level specified for bridges.

Crowns Over Implants: A crown over an implant is considered to be a Prosthodontic benefit, subject to the patient's annual maximum, and if applicable, deductible. If a group does not offer prosthodontic benefits, crowns over implants are not covered.

Crowns: If an x-ray alone does not appear to support the need for a crown, please submit copies of the patient's treatment chart and a detailed narrative with your claim.

Dentist Manual: The Delta Dental of Rhode Island Participating Dentist Manual is available online at www.deltadentalri.com.