

Dental Word of Mouth

First Quarter 2021



A new look for 2021

Get ready for a co-branded update that delivers a clearer association between Dental Benefit Providers, Inc. and UnitedHealthcare on the communications you receive.

This update will roll out gradually. You can expect to see a new co-branded logo featured on the provider portal, letters, operational documents, manuals and more. We are excited about this change and how these two brands will come together. As part of the seamless integration, your contract and business operations will remain the same as they are today.

Questions?

Review our Rebranding FAQs at UHCdental.com located under the Resources tab.



Dental Benefit Providers[,] of California



Dental Benefit Providers⁻



National Pacific Dental



Nevada Pacific Dental[®]



Dental Benefit Providers[®]



Clinical updates

Teledentistry is here to stay

The COVID-19 pandemic has dramatically accelerated the interest and the implementation of teledentistry. In these unprecedented times, teledentistry platforms offer a way to continue providing access to dental care and for dental professionals to remain engaged with their patients ensuring continuity of care. Teledentistry also offers the potential to improve access to care and lower overall costs for our healthcare system while simultaneously helping dental practices grow.

Another great application for teledentistry is greater provider-to-provider consultations that are more meaningful between general dentists or with a specialist, medical doctor, or other healthcare professionals. If this provider-to-provider communication is effectively coordinated, meaningful consultations with radiographs, digital impressions, and photographs can occur in real-time saving unnecessary patient travel, rescheduling, and treatment delays.

The limited use of teledentistry prior to the pandemic was because of:

- · restrictive state telehealth laws
- reluctant state dental boards
- a lack of established standards
- · concerns of continuity of care and liability

- clinical diagnostic limitations
- · limited platforms and
- low provider adoption

Luckily, many of these barriers are being slowly removed and revised to allow providers and patients to connect in creative ways going forward. While the intent of teledentistry is to provide patients clinical guidance and care, a clear distinction must be maintained between (1) a billable provider encounter and (2) routine patient communications (scheduling, information requests, recall & reactivation of care, patient education, billing, outreach, referrals, etc.).

A billable provider encounter using teledentistry calls offers an ability to assess and triage member's oral health urgency and is most productive if the provider is very familiar with the patient's dental history. A teledentistry encounter will be most effective if the provider has knowledge of conditions that have been previously documented, or of treatments that are recommended or ongoing. Ultimately, a teledentistry diagnosis will require an in-office oral exam and radiographs for the patient's concerns to be clinically resolved.

However, telehealth platforms have limited applicability in dentistry since delivering dental care requires a hands-on patient visit and requires diagnostics to include radiographs, probings, and a visual exam. A dental exam requires the dentist to look into a dark place to evaluate "very small lesions and structures" in order to provide a correct diagnosis. Because of the diagnostics and equipment needs to complete a meaningful dental consultation, teledentistry is fundamentally more challenging than performing a telehealth medical or a behavioral health consultation since dentistry requires in-person follow-up care.

Perhaps the most significant aspect of a teledentistry consultation is putting a patient's mind at ease leaving them with a great customer service experience. This will leave your patient temporarily satisfied and keep them out of the local emergency department for an unproductive visit. There is no greater time to make a difference in a patient's life than when they are in need of care!



Richard W. Gesker, DMD, MBA Chief Dental Officer, UnitedHealthcare Dental

United Healthcare

Dental Benefit Providers

Simplify the credentialing process with ADA[®] credentialing service, powered by CAQH ProView[®]

American Dental Association (ADA) and CAQH ProView team up to simplify the credentialing process for dentists.

The ADA credentialing service, powered by CAQH ProView, is making it easier to submit and maintain your professional information in one central place for credentialing and other business needs. Your information will be accessible to you and the participating organizations you choose. And it's FREE to dentists.

- All U.S. practicing dentists, ADA members and non-members, visit **ADA.org/godigital** to log in.
- Once there, update your ADA account, or go directly to the credentialing login page.
- Complete your CAQH ProView professional profile, submit your supporting documents electronically and attest to their accuracy.
- Authorize UnitedHealthcare/Dental Benefit Providers to access your information.
- Come back to one place to stay current by updating any information in your profile that has changed or expired, and then attest.

Go digital!

Spend less time with paper and more time with your patients. Visit **ADA.org/godigital**.

Less paperwork. One solution. Countless hours saved.

Ready to get started?

- Log in at ADA.org/godigital.
- Your ADA account information will be used to log into your ADA account and from there you will be able to access CAQH ProView to complete your credentialing profile.

Need help getting started? Contact the ADA Member Service Center at **1-800-621-8099**, 8:30 a.m.-5 p.m. CT, Monday–Friday, or via email at msc@ada.org.

Dentists already using CAQH ProView

Log in at **ADA.org/godigital** and remember the following items:

- Authorize UnitedHealthcare/Dental Benefit Providers to access your profile.
- Ensure all your information is correct (e.g., ID #s, addresses, phone numbers and email address).
- Confirm your credentialing documents are current (e.g., malpractice insurance, CDS and/or DEA).

Need help with CAQH ProView?

Log in for chat support or call 1-888-599-1771.

Questions

Contact the CAQH ProView Help Desk at **1-888-599-1771** 7 a.m.-9 p.m. ET, Monday-Thursday | 7 a.m.-7 p.m. ET, Friday Or contact UnitedHealthcare Provider Services at **1-800-822-5353**





ADA American Dental Association[®]

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New electronic payments process for UnitedHealthcare dental plans

Dental Benefit Providers, Inc. (DBP), a UnitedHealthcare company, is excited to introduce a new electronic payment platform called ePayment Center to accelerate and add efficiency to our claims payment process.



ePayment Center will be replacing the current electronic payment and statement process for UnitedHealthcare Dental Plans in 2021.

Through the ePayment Center, DBP will continue to offer a no-fee Automated Clearing House (ACH) delivery of claim payments with access to remittance files via download. Delivery of 835 files to clearinghouses is available directly through the ePayment Center enrollment portal.

If you are currently enrolled in electronic payments through Optum Pay, you will need to re-register for the ePayment Center. Registering with the ePayment Center will ensure there is no disruption in your electronic payments and statements. Failure to register with epayment center before the end of the year will result in your current electronic payment being disrupted and your payments reverting to paper checks.

To register for the ePayment Center:

- 1. Visit UHCdental.epayment.center/register
- 2. Follow the instructions to obtain a registration code
- **3.** Your registration will be reviewed by a customer service representative and a link will be sent to your email once confirmed
- 4. Follow the link to complete your registration and setup your account
- 5. Log into UHCdental.epayment.center
- 6. Enter your bank account information
- 7. Select remittance data delivery options
- 8. Review and accept ACH Agreement
- 9. Click "Submit"
- **10.** Upon completion of the registration process, your bank account will undergo a pre-notification process to validate the account prior to commencing the electronic fund transfer delivery. This process may take up to 6 business days to complete

Additional enrollment instructions and a detailed question and answer guide are available for download at **UHCdental.epayment.center**.

For additional help call 1-855-774-4392 or email help@epayment.center.

The 2021 benefit year is here! Listed below are some tips to help maximize administrative time within your practice.

Use our self-service portal at UHCdental.com for:

- Benefits, frequencies, member eligibility for Commercial and Medicare Advantage plans
- Accessing fee schedules
- Validate and update demographic information

Has a dentist recently left your practice? Contact our dedicated Provider Services Team for assistance so our directory can be updated:

- Phone: 1-800-822-5353
- Fax: 1-248-733-6372
- Email: dbpprvfx@uhc.com

Have you added a new dentist to your practice? Click on the link below and submit the packet request form to have one of our representatives contact you:

UHC Packet Request Form



Dental Fun Facts

- Tooth enamel is the hardest substance in the human body. However, we do not recommend that you use your pearly whites to open bottle caps!
- If you don't floss, you miss cleaning 40% of your tooth surfaces. Make sure you brush and floss twice a day!
- If you're right-handed, you will chew your food on your right side. If you're left-handed, you will tend to chew your food on your left side.
- More people use blue toothbrushes than red ones.
- Like fingerprints, everyone's tongue print is different.



MediGold expanding and offering Medicare Advantage dental products in Iowa

UnitedHealthcare on behalf of Dental Benefit Providers, Inc. would like to remind our providers we partner with MediGold to serve their 45,000 Medicare Advantage members.

MediGold dental plans are consistent with other UnitedHealthcare National Medicare plans designed to drive patients to select a participating dentist. Covered services are paid at 100% of your Medicare contracted fees. Non-covered services are paid by the member at your usual and customary fees.

MediGold offers the plan designs summarized in the table below:

MediGold Plans

Plan Name	States	Annual Max	Covered Services
MediGold Preventive Dental	Ohio, Idaho and Iowa	N/A	Select Preventive & Diagnostic
MediGold Dental Silver	Ohio, Idaho and Iowa	\$1,000	Select Preventive, Diagnostic, Restorative, Endodontic, Periodontic, and Oral Surgery
MediGold PPO Dental Silver	Ohio	\$1,000	
MediGold Dental Gold	Ohio, Idaho and Iowa	\$1,000	Select Preventive, Diagnostic, Restorative, Endodontic, Periodontic, Oral Surgery and Major Services
MediGold PPO Dental Gold	Ohio	\$1,000	

A sample ID card is shown below for your reference:

Medicare made		Pressed 10*422
Plan ID (80840) 911- Member ID: 100001223	52133-05 Group Number: G99998	Provider should verify eligibility before providing treatment. To verify benefits, view claims or find a
Member: FIRST MGP_LAST	DENTAL IDENTIFICATION CARD Payer ID 52133	provider, viait the web shis or call. For Members: MedGeld com 1-866-209-3212 Network access in your market may also be provided by: CONNECTION Dental, MaximumCare, or Diversified (NV).
		For Providers: dbp.com 800-822-5353 Danid Chamie: P.O. Box 30567; Sait Lake City, UT 84130-6567

If you have any questions, please contact Provider Services at **1-800-822-5353**. We appreciate your partnership in delivering high-quality dental care to our members.



Product updates

Member ID cards are going digital

Effective later this year, UnitedHealthcare will no longer issue physical dental ID cards to newly enrolled members. Eliminating physical ID cards and conducting contactless transactions support health and safety protocols. This change will begin with our commercial line of business.

Members can access their electronic dental ID card at any time by visiting **myuhc.com** or through the UnitedHealthcare mobile app.

Possession of a physical ID card is not proof of eligibility. Real time access to a current electronic dental ID card will ensure the member is providing you with the latest information.

We urge you to verify eligibility for all patients prior to being seen by visiting **UHCdental.com** or calling the provider service line at **1-800-822-5353**.

Please visit UHCdental.com for additional updates.

Thank you to UnitedHealthcare's Kentucky Medicaid dental providers

January 1, 2021, marked the inception of a new Medicaid plan that allows better access and improved quality of dental care to Kentucky's most vulnerable individuals. We encourage provider portal registration which allows the use of helpful plan administrative tools for additional support.

For assistance with registration, portal tool training, and accessing the Provider Manual and Quick Reference Guide, please contact **1-844-464-5633**. We appreciate your partnership in supporting your communities.

We look forward to working with you in 2021.

Health Net of Oregon Medicare membership termination

Health Net of Oregon terminated their Medicare dental membership with Dental Benefit Providers, Inc. (DBP) December 31, 2020. Termed members who contact DBP after January 1 are directed to contact their new carrier, Envolve Dental, at **1-888-445-8913**. Dental Providers should call Envolve Dental directly at the phone number listed above for questions on their 2021 Health Net of Oregon Medicare plans.



Product updates

Participating Medicare Advantage dental providers

Our 2021 Medicare Advantage Provider Quick Reference Guide (QRG) book is available online at UHCDental.com.

Click on the Learn More link pre-login to UHCdental.com in the Medicare & Retirement tile to access the QRG book for information on all our 2021 Medicare Advantage plans. The details in the QRG will help us partner to serve your patients together.

Remember

Check out UHCDental.com for:







Provider Manuals/QRGs

Quarterly Newsletters





Eligibility/Claim Information

Demographic Updates

Available now

Dental UHC On Air, a platform for provider office on-demand education needs, makes it easier for you to train at your speed at your convenience. Log into UHCDental.com, and select "Provider Training via UHC On Air" under the Quick Links section.

Together, we can make a difference for patients who are UnitedHealthcare Medicare Advantage members.





Important note

The Maryland Insurance Administration (MIA) recently issued guidance stating that health care providers should not charge members additional fees for items such as personal protective equipment (PPE). The MIA expects Maryland care providers to ensure no member or subscriber be billed for enhanced infection control and/or additional PPE.

If you have questions, please contact Provider Services at **1-800-822-5353**.

Product updates

Lincoln DentalConnect®

Lincoln DentalConnect[®] Dental Health Maintenance Organization (DHMO) is the marketing name for Lincoln Financial Group's DHMO plans. Lincoln started offering the DHMO products in January 2011. As a reminder, members may visit your office to obtain dental services using the Lincoln DentalConnect name.

Market and Product offerings include:

DHMO in California (CA), Florida (FL) and Texas (TX) marketed as Lincoln DentalConnect:

- CA DHMO is administered and underwritten by Dental Benefit Providers of California, Inc.
- FL is administered by Dental Benefit Providers, Inc. and underwritten by Solstice Benefits, Inc.
- TX DHMO is administered and underwritten by National Pacific Dental, Inc.

Lincoln 911-52133-05 8893FU321 408461 PA_FIRST_5 T TPA_LAST_5 DENTAL IDENTIFICATION CARD No D Dented Bartes Lincoln 911-52133-0 8898NP772 PF_FIRST_2 L TPF_LAST_2 Lincoln 911-52133-05 999999999 408461 BROWN, TPO_FIRST_1 G DENTAL IDENTIFICATION CARE Dentist Name: No Dentist Selection Plan: LDCTXXX DMO- Product ID D000181

Product offering:

DHMO marketed and sold as Lincoln DentalConnect DHMO. Dental products are marketed and sold under Lincoln DentalConnect DHMO.

Referral process:

California:	General Dentist referral to network specialist requires pre-authorization and must be approved by plan.
Florida: Non-Specialty Plans:	Members can self-refer to a network specialist without a referral and receive a 25% discount off provider's usual and customary rates.
Texas	General Dentist referral to network specialist requires pre-authorization and must be approved by plan.

Comments?

UHC Dental Provider Solutions wants to hear from you. Please submit your newsletter comments and suggestions to: uhcdentalnewsletter@uhc.com



Dental Benefit Providers[®]

This policy has exclusions, limitations and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, contact either your broker or the company. UnitedHealthcare dental coverage underwritten by UnitedHealthcare Insurance Company, located in Hartford, Connecticut, UnitedHealthcare Insurance Company of New York, located in Islandia, New York, or their affiliates. Administrative services provided by Dental Benefit Providers, Inc., Dental Benefit Administrative Services (Ao only), DBP Services (NY only), United HealthCare Services, Inc. or their affiliates. Plans sold in Texas use policy form number DPCL.06.1X and associated COC form number DCOC.CER.06.VA. Benefits for the UnitedHealthcare dental DHMO plans are provided by or through the following UnitedHealth Group companies: Nevada Pacific Dental, National Pacific Dental, Inc. and Dental Benefit Providers of Illinois, Inc. Plans sold in Texas use contract form number DHMO.CNT.11.TX and associated EOC form number DHMO.EOC.11.TX. The New York Select Managed Care Plan is underwritten by UnitedHealthcare Insurance Company of New York located in Islandia, New York. Administrative services provided by DBP Services. Offered by Solstice Benefits, Inc. a Licensed Prepaid Limited Health Service Organization; Chapter 636 F. S., and administered by Dental Benefit Providers, Inc.

*Benefits for the UnitedHealthcare Dental DHMO/Direct Compensation plans are offered by Dental Benefit Providers of California, Inc. UnitedHealthcare Dental is affiliated with UnitedHealthcare.

Disclosure: The Dental Discount Program is administered by Dental Benefit Providers, Inc. The Dental Discount Program is NOT insurance. The discount program provides discounts at certain dental care providers for dental services. The discount program does not make payments directly to the providers of dental services. The discount program member is obligated to pay for all dental care services but will receive a discount from those dental care providers who have contracted with the discount plan organization. Dental Benefit Providers, Inc. is located at 6220 Old Dobbin Lane, Liberty 6, Suite 200, Columbia, MD 21045, **1877-816-3596**, **myuhc.com**. The dental discount program is offered to members of certain products underwritten or provided by UnitedHealthcare Insurance Company or its affiliates to provide specific discounts and to encourage participation in wellness programs. Dental care provides available ithrough the discount program.