

Texas RoundUp

Program Updates for Our Texas Dentists

Vol. 16 - January 2013

Dear Doctor.

Happy New Year!

It's hard to believe that it's almost been almost a year since the Texas Medicaid and CHIP statewide program went live. It has been a pleasure getting to know you and your staff and we look forward to our continued partnership in 2013.

Our goal is ensure you can maximize patient time and minimize administrative tasks. Promoting the efficiency of your office is a top priority. To provide you with additional support, we will review several areas of program management in the next few editions of the Texas RoundUp. In this issue, we will review claim submission protocols.



In Your Words

"DentaQuest is the friendliest company as far as credentialing.

Anytime there was any concern or question, we would receive an immediate response. DentaQuest has been so helpful and easy to work with."

Apple Dentists

Claims processing turnaround times

- Claims must be submitted within 95 days from the date of service
- Clean claims will be adjudicated within 30 days of receipt date

Common reasons for resubmitting claims

- Corrections, such as tooth ID, surface ID, CDT code, date of service
- Responding to requests for additional documentation
- Main Dentist denials –Main Dentist change requests received via fax or on the website
 are processed within three business days. If you perform a service for a member within
 the timeframe from when you submitted the request, to when we process the change,
 your claim will be denied. In this instance, you can resubmit the claim.

Please note: You may only resubmit claims within 95 days of the original date of service. After the 95 days, you must submit an appeal.

How do I resubmit a claim?

You can resubmit claims in one of three ways – via the web portal, through a clearinghouse or by sending a hard copy.

Web portal

When resubmitting claims on the web portal, the word "adjustment" should be noted in the "Optional Information" box along with a brief description of why the claim is being resubmitted and a request to void the original claim.

Example:



Clearinghouse and hard copy

In both instances, the word "adjustment" should be noted in Box 35 "Remarks," along with a brief description of why the claim is being resubmitted and a request to void the original claim.

Example:

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35. Remarks

Adjustment – Please void claim number 2013xxxxxxxx.

This is a corrected submission for that claim.
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When submitting a hard copy, please send it to the following address:

TX HHSC Dental Program-Claims 12121 North Corporate Parkway Mequon, WI 53092

Please note: You may only resubmit claims within 95 days of the original date of service. Please allow ample time for mail delivery when resubmitting a hard copy. After the 95 days, you must submit an appeal.

How can I appeal an adverse decision?

You have 120 days from the date of the EOB to submit an appeal. To submit an appeal, make a copy of the EOB and circle the claims in question. Please note why you are requesting the appeal and provide documentation such as a narrative, photos and X-rays to support medical necessity.

If you don't have the EOB, you can submit the appeal using your office's letterhead. Please include the following information:

- Claim number
- Member name, date of birth and member ID
- Dentist name, NPI and TPI
- Explanation for the appeal
- Documentation such as a narrative, photos and X-rays to support medical necessity

Appeals may only be submitted by mail to the following address:

DentaQuest-TX HHSC Dental Services Complaints & Grievances Stratum Executive Center 11044 Research Blvd Building D, Suite D-400 Austin, TX 78759

The Office Reference Manual (ORM) contains additional information on claim submission protocols. You can access the ORM via the web portal or by visiting www.dentaquesttexas.com under "Provider Information."

Reminder: Process for requesting additional orthodontic adjustments

If you need to request additional orthodontic adjustments for a patient, please submit a new claim with a narrative. Please include the patient's current records (photos, X-rays, etc.) with the request.

There have been several instances in which dentists are submitting the initial approval from TMHP, which is only needed when requesting continuation of care.

Stay tuned for information regarding appeals and peer-to-peer reviews in the next edition of the Texas RoundUp!