

TEXAS ROUNDUP
PROGRAM UPDATES FOR OUR TEXAS DENTISTS
VOL 41 | December 2014

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HEALTH PLAN UPDATES

Amerigroup has updated its Medicare benefit filing with CMS for the 2015 calendar year.

- Amerigroup Classic Select will offer members a preventive dental benefit in select counties.
- The comprehensive benefit maximum for the Amerigroup Classic plan will not change from \$250 per quarter; however, this plan is now limited to Bexar and El Paso County.
- The comprehensive benefit maximum for the Amerigroup Specialty plan will not change from \$425 per quarter.

Superior HealthPlan has updated its Medicare benefit filing with CMS for the 2015 calendar year.

• The comprehensive benefit maximum for the Advantage by Superior plan will change from \$750 to \$350 per benefit year effective 1/1/2015.

Superior HealthPlan will expand its Ambetter by Superior product into the following counties: Willacy, Brooks, Hidalgo, Bandera, Kendall, Blanco, Fayette and Lee.

Please remember that the Interactive Voice Response (IVR) system is available 24 hours a day, 7 days a week to provide up-to-date information regarding member eligibility, claim status and much more. In addition, eligibility and benefits associated with our programs can be found in the Office Reference Manual online at www.dentaquesttexas.com, or you may contact us directly via phone at 888-308-9345.



RESTORATIVE ELIGIBILITY UPDATE FROM HHSC

HHSC has implemented a new process to automatically restore managed care enrollment when a member's Medicaid eligibility is reinstated without a gap in Medicaid coverage. Under the new process, members will be re-enrolled into the Managed Care Plan previously responsible for the member's care upon restoration of eligibility. Previously, members would be covered by fee-for-service prior to being enrolled in a managed care plan for the prospective month. Under the new process, impacted members will be enrolled in Managed Care both retroactively and prospectively, replacing any fee-for-service coverage periods

MCOs are currently notified of re-enrollments on a weekly basis, and process for daily updates is under development.

Providers should be aware of this process change and check member eligibility with MCOs/DMOs prior to rendering care. If the MCO/DMO information conflicts with eligibility information received from TMHP or another source, providers should contact the MCO/DMO to resolve the discrepancy.

HAPPY HOLIDAYS!

Best wishes from DentaQuest for a safe and happy holiday season, and a bright, successful new year!

