

# SPECIAL EDITION



## INSIDE

Processing Policies

Reminder for Minnesota Health Care Programs (MHCP) Members and Non-Covered Services

2010 Annual Educational Workshop

Community Affairs Update

Delta Dental to Go Paperless as of January 1, 2011

Minnesota Health Care Programs Administrative Clarifications

Proposed MDA Changes

## TWO OF DELTA DENTAL OF MINNESOTA'S LARGEST GROUPS HAVE EXPANDED

Delta Dental of Minnesota has expanded two of its largest groups. With Wells Fargo Bank purchasing Wachovia Banks that is now approximately 235,000 subscribers, and when Delta Air Lines merged with NWA they now have approximately 85,000 subscribers. During calendar year 2010 we are projected to add approximately 190,000 new subscribers which based upon a conversion factor of 2.2 members per subscriber would equal 418,000 people.



## DELTA DENTAL FORUM

It's that time of year again! The Delta Dental Forum will be held on Friday, February 18, 2011 from 8 a.m. to 4 p.m. at the Marriott Minneapolis Airport Hotel in Bloomington. This year's main topic will be *Dental Caries in Children: A Significant Problem*. Speakers will be Dr. Daniel W. Shaw and Dr. Robert S. Jones, both from the University of Minnesota School of Dentistry. Forum Cost is \$50 per person for participating providers, \$50 per person for staff

and \$125 per person for non-participating providers and staff. Please contact Aida Reyes at 651-994-5239 for more information.



# PROCESSING POLICIES

Delta Dental of Minnesota has placed the Delta Dental Processing Policies for Delta Dental of Minnesota and National Coverage (Processing Policies) on our website [www.deltadentalmn.org](http://www.deltadentalmn.org) that reflects data code set requirements set forth under the Administrative Simplification Provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). It is the policy of Delta Dental to comply with these requirements. Please feel free to print the Processing Policies and keep them in a convenient location for easy access. If you would like a hard copy of the Processing Policies and are unable to print them, please contact a Network Representative at 1-800-328-1188, ext. 4170.

The American Dental Association (ADA) has finalized the code set, identified as CDT 2011.

We recommend you obtain a copy of the CDT 11 code set from the ADA, as it will identify new codes as well as code revisions. We encourage all dentists to refer to their copy of the ADA CDT 2011 manual for specific code information.

In all cases, specific group contract provisions, limitations and exclusions take precedence over the Delta Dental Processing Policies. Since certain contractual items (e.g. time limits, frequency of procedures, age limits, etc.) can vary among groups, they have not all been listed with their associated procedure codes. Therefore this document should not be interpreted as comprehensive and encompassing all possible limitations and exclusions. Dental offices should contact Delta Dental's Customer Service to determine the specific limitations and exclusions for each group.

Delta Dental of Minnesota's Participating Dental Provider Policies and Procedures were perceived by the MDA to be a hot topic in their recent newsletter. The amendments are simply the continuation of existing policies or formalization of existing practices of Delta Dental and part of periodic updates to the Policies and Procedures. The only areas where there are any changes involve audits of practices and fewer than two percent of Minnesota dentists have been the subject of any audit activity. Since our relationship is with each of our participating dentists, we invite you to call a Network Representative at 1-800-328-1188, ext. 4170 if you have any questions or concerns regarding the amendments and how they may affect you.

## REMINDER FOR MINNESOTA HEALTH CARE PROGRAMS (MHCP) MEMBERS AND NON-COVERED SERVICES

If you are providing a dental service that is not covered under MHCP, the member must sign a non-covered services waiver form prior to receiving those services telling them exactly what service is not covered, the date service will be completed and the amount they will owe your office if they have that service done. The statement needs to be specific – it cannot be a generic statement about responsibility for services not covered by insurance. The signed waiver form should be kept in the member's file for future reference if needed. If the waiver form is not signed by the member or a copy is not kept, your office will need to write-off the amount charged for that service. Delta Dental provided a sample copy

of the non-covered services waiver form in the December 2009 mailing. If your office would like an additional sample copy, it can be found on [www.deltadentalmn.org](http://www.deltadentalmn.org), under the Dentist Forms & Publications link or by calling Customer Service at 651-406-5907 or 1-800-774-9049.



# DELTA DENTAL TO GO PAPERLESS AS OF JANUARY 1, 2011

On July 15, 2009 all Minnesota dental offices were required to submit their claims electronically to Minnesota insurers. Minnesota was the first state to have this type of law in place. For dental offices not able to submit claims electronically through a clearinghouse because of small claims submission volumes, Delta Dental of Minnesota designed a web-based solution.

We would like to take this opportunity to thank all of our participating dentists and dental offices for complying with this Minnesota Law. Because of the outstanding compliance with this law, Delta Dental will go completely paperless effective January 1, 2011. Only claims submitted by dentists outside of the state of Minnesota or members who are required to submit their own claims because their dentist does not participate will be accepted via paper.



---

## PROPOSED MDA CHANGES

The Minnesota Dental Association (MDA) is proposing changes at the Minnesota legislature. We thought it might be helpful to lay out some of the changes and how they would affect your office and your patients.

The MDA's legislative agenda of proposed changes may have unintended inhospitable economic effects for dentists in Minnesota by increasing the cost of dental benefits to the employers who sponsor them.

The nonprofit mission of Delta Dental of Minnesota (Delta Dental) is to provide widespread, timely economical dental benefits for Minnesota consumers. In order to carry out this mission, economic sustainability and affordability for customers play a large role.

According to national studies, patients are four times more likely to go to a dentist if they have dental coverage. In Minnesota, this means that the more people who have dental coverage, the more patients visit Minnesota dental offices. It's in the best interests of patients and dentists to maintain a high number of Minnesotans with dental benefits coverage.

As small business owners, dentists know that cost and price are related. The same economic rules apply to Delta Dental and to its customers – whether the customer is an employer group sponsoring a dental benefit plan or a family purchasing dental benefits on its own.

We've looked at the proposed changes identified by the MDA and see increased costs for dentists, patients and for Delta Dental. As Delta Dental's costs rise, dollars available for reimbursement are also restricted. We're concerned that some of the changes proposed

by the MDA would have the unintended effect of limiting rather than enhancing dollars available for dental reimbursement. The proposed changes would not only increase administrative costs for dental benefit companies; they would also increase administrative burdens and costs for dentists themselves.

### **Provider contracts**

Participating provider contracts with Delta Dental are voluntary and evergreen – meaning that the contract terms are not negotiated on an annual basis and dentists can determine for themselves whether to participate with Delta Dental or not. The uniform contract and the lack of annual renewals save administrative costs for both dentists and for Delta Dental. Moreover, nonprofit membership organizations, like Delta Dental, set terms for membership and invite participation. Individual members of nonprofit membership organizations do not individually set their own terms. Consequently, advocating for annual contracts which are individually negotiated unnecessarily raises administrative expense and interferes with existing contractual relationships. While this proposed change promises no real benefit, it guarantees increased administrative costs for both dentists and Delta Dental and reduces available time for patient care.

### **Claims reserves**

Delta Dental's claims reserves, which are required as part of Delta Dental's insurance licensure, help put patients in dental chairs throughout Minnesota. Without a strong reserve balance, key large employer groups would likely decline to contract with Delta Dental. Delta Dental of Minnesota is the highest rated health insurance company in the state, according to A.M. Best's ranking of "A." Strong reserves help maintain this rating and also help to retain relationships with large Minnesota-based Fortune 500 companies,

*(continued on top of page 4)*

like Target, 3M, General Mills and Best Buy and large privately held companies like Cargill.

Regulators favor a strong reserve balance, too. The Minnesota Department of Commerce has testified at the Legislature that it's in the consumer's best interests to have insurers with strong balances. While a company can be under-capitalized and have insufficient reserves, there's no such thing as an insurer who is "too prepared" for the worst in terms of maintaining necessary reserves.

It is that preparedness that makes Delta Dental able to pay claims should there be unforeseen circumstances changing the claim experience or collection of premiums on already paid claims, ensuring dentists' payments are not disrupted.

Today, on average, more than 91 cents of each dollar we collect in premium is returned in dental claim payments with approximately 7 cents going toward our overhead and the remainder going toward statutory reserves. As a result, our prudent fiscal approach has earned Delta Dental of Minnesota an "A" (Excellent) financial rating from A. M. Best – among the highest financial ratings of any dental plan in the country.

#### **Non-covered services**

From our perspective, it's in everyone's interests to hold all dental benefit companies doing business in a state to the same requirements. This is why we consider it against the best interests of all Minnesotans to permit certain national, multi-line, for-profit insurers based outside of Minnesota to engage in a practice, but to prohibit a Minnesota-based nonprofit dental company, who employs Minnesotans and delivers more patients to dentists' chairs than any other benefits company, from engaging in the same practice. Delta Dental will continue to support a level-playing field proposal which applies the same rules to all similarly situated payers with regard to non-covered services.

Beginning January 1, 2012, Delta Dental will be required to comply with the Delta Dental Plans Association's requirements related to discounts on non-covered services. We must comply with this regulation unless the MDA passes at the legislature a level playing field version of "non-covered services legislation" (versus the Delta Dental only version the MDA proposed in 2010 and the legislature did not pass).

#### **Audits**

In 2000, Delta Dental revised its processing policies to do away with the submission of radiographs and required pre-estimates. Dentists at that time applauded the more streamlined approach which saved dentists both time and money allowing dentists the option, except for certain public program rules, to submit radiographs and pre-estimates.

Combined with this change, Delta Dental implemented a process of post-payment review. Through this retroactive process, a very small number of dentists have been identified whose practice

patterns are so extremely out of line compared to their peers that Delta Dental has conducted audits, required by state and federal law, as well as permitted by the participating provider contract between Delta Dental and the dentist.

Requiring a more cumbersome and expensive process of prior authorizations, which is more restrictive than pre-estimates and radiograph requirements we eliminated in 2000, increases costs for the vast majority of dentists in the state, yet doesn't eliminate the contractual and statutory fraud and abuse auditing requirements. Over the past five years, audits of fewer than two percent of Minnesota licensed and practicing dentists has recaptured more than \$4.9 million for Minnesota consumers and governmental entities; we do not believe the vast majority of dentists' interests or public policy is served by placing roadblocks to essentially protect dentists who are engaged in fraud and/or abuse. Dentists engaged in fraudulent practices reduce the amount of available reimbursement for dentists who practice professionally.

#### **Single dental administrator for public programs**

In Minnesota, certain enrolled populations are retained for administration by the Department of Human Services, but a much larger number of enrollees receiving benefits through public programs are administered through nine contracts from the Department of Human Services (DHS).

Delta Dental is the subcontractor on four of these contracts – Medica, First Plan, Blue Plus and Metropolitan Health Plan (MHP) – and administers benefits for over 300,000 enrollees (as of October 2010), or more than 60 percent of the public program enrollees in managed care plans.

All plans administer benefits based on a contract with DHS. Whenever possible, Delta Dental collaborates with DHS and other health plans to administer benefits in a similar manner to reduce administrative differences and burdens. Delta Dental has worked with the health plans to increase dentist reimbursement fees above DHS rates wherever possible. This would likely not be an option for a single dental payer, as a single administrator wouldn't have multiple lines of business over which to spread fixed costs, and would have higher costs as the result of lost opportunities for collaborative administration.

A single dental administrator would be more expensive to the State in that the efficiencies associated with coordinated medical and dental coverage would be lost. Among these efficiencies are the medical plans providing one ID card, one benefit booklet, coordinated transportation and other services. If the goal is to look for ways to increase funding for reimbursement in public programs, it's counter-intuitive to push for a change which will increase, rather than reduce, administrative costs.

If you have any questions about the MDA's proposed changes, we suggest you contact your association for further clarification.

---

## 2010 ANNUAL EDUCATIONAL WORKSHOP

We hosted our 15th Annual Education Workshop on October 8, 2010 at the Mystic Lake Hotel. The Annual Workshop is designed to provide educational, informative and motivating information needed to operate dental practices in an efficient manner.

Janie Jasin, a nationally recognized speaker and author of *"The Littlest Christmas Tree"* was the keynote speaker. Janie's presentation worked in conjunction with this year's theme *"Word of Mouth"* with her message of the Process of Affirmation: Build a practice, a life and a legacy.

During the Ask the Experts segment, representatives from Operations/Customer Service, Professional Services/Government Programs, Actuarial, Marketing and Web/Electronic Services were available to answer questions from the conference attendees. We would like to thank those of you who e-mailed their questions in advance.

We appreciated the opportunity to meet and visit with so many of you. We welcome any suggestions you may have for future workshops. Please feel free to email us at [editor@deltadentalmn.org](mailto:editor@deltadentalmn.org) or fax us at 1-877-283-1330.

# COMMUNITY AFFAIRS UPDATE

During 2010, Delta Dental actively worked to support our mission to improve the oral health of all Minnesotans through a variety of philanthropic and community activities.

**Invested over \$435,000** in 28 Minnesota dental clinics and nonprofit organizations to help prevent and treat dental disease in underserved populations, to empower children and families to become active partners in their healthcare and to ensure a healthier place for all to live, work and thrive. "Delta Dental measures success by providing access to quality and offering affordable dental benefits as well as by responding to the needs of our community. Our board is tremendously committed to helping support community clinics that provide oral health services to low-income and culturally diverse populations. It can be challenging work and we appreciate everyone who delivers these vital services," states Dave Morse, president and CEO of Delta Dental of Minnesota.

**Hosted the SmileConnections conference** on November 5 at the Minnesota Landscape Arboretum. Minnesota is one of the healthiest states in the nation, yet limited oral health knowledge and untreated dental disease remain a serious health concern. In response to the urgency of oral health care needs for underserved populations in Minnesota, SmileConnections was organized around the recognition that both dental and non-dental professionals play critical roles in reducing the disease burden and can unify around effective solutions. While the invited target audience was primarily non-dental professionals, over 160 participants, including dental professionals, came together to explore a range of topics from understanding common dental diseases to learning about effective oral health preventive strategies. In addition to four plenary presentations, there were three specialized tracks of breakout sessions: 1) community and school-based solutions, 2) infants, children and pregnant women and 3) seniors and adults.

One of the primary goals of SmileConnections was to provide oral health information and training to: Head Start teachers, community health workers, early childhood family educators, social service agency staff, community clinic staff, county public health staff and other types of professionals. "Every single day these professionals serve countless children, parents, families, seniors and vulnerable adults with low-income and/or high risk status for dental disease but, unfortunately, they often lack the knowledge or tools to help their clients. We hoped to provide conference participants with a better foundation of oral health knowledge while connecting the information to solutions and tools," said Ann Johnson, director of Community Affairs at Delta Dental of Minnesota.

20,000 copies of "Tooth Time" (an oral health guide developed in collaboration with the Minnesota Head Start Association) were distributed at SmileConnections.

"Tooth Time" was created as a tool to assist Head Start home health care visitors and other educators who work with parents in extensive one-on-one settings understand oral health care and the developmental needs of their child.

**Collaborated with Fraser** to develop the *My Healthy Smile* iPhone app to help reduce dental anxiety for children with autism and other developmental disabilities. "It is vitally important that children and adults with special needs connect with their oral health in positive ways," said Diane Cross, president and CEO of Fraser. "Not only has Delta Dental been a generous sponsor from the start, they have continually provided expertise on oral health." The *My Healthy Smile* app is designed for children between the developmental ages of 3 and 10. The use of social scripts works especially well for children who have autism or developmental disabilities. The app is available through iTunes.

**Collaborated with Oral Health America and Children's Dental Services** to launch Smiles Across Minnesota - International Falls. Delta Dental provided \$20,000 in funding to improve the oral health of uninsured and underinsured children through the provision of school-based, preventive dental care in three Minnesota school districts along the Canadian border. "We are working with the providers and the community to make this program a success. Delta Dental's funding will allow us to serve up to 500-800 children in our first year," explains Sarah Wovcha, executive director of Children's Dental Services and co-chair of Smiles Across Minnesota. "Smiles Across Minnesota is a model Smiles Across America® program partner, demonstrating how to successfully collaborate with communities and expand services, while identifying needs and eliminating barriers to oral health care and education throughout the state," said Beth Truett, President and CEO of Oral Health America. To date, Delta Dental of Minnesota has provided over \$300,000 to support nine Smiles Across Minnesota sites.

**Sponsored Special Olympics Minnesota's *Special Smiles*** that annually provides free dental screenings, education and fluoride varnish to thousands of athletes with intellectual disabilities. "The support of Delta Dental of Minnesota over the years has allowed Special Olympics Minnesota to continue to offer the *Special Smiles* and the *Save a Special Smile* programs to our athletes. While the screenings are fantastic and hopefully get our athletes pointed in the right direction, the follow up care and treatment creates a life changing event that truly changes the athletes' overall health. This would not be possible without the support from the volunteers and the dollars provided by Delta Dental," states Dave Dorn, president, Minnesota Special Olympics.

# MINNESOTA HEALTH CARE PROGRAMS ADMINISTRATIVE CLARIFICATIONS

In the Department of Human Services (DHS) provider update, DEN-09-01, DHS clarified when a D9410 would not be reimbursed under Minnesota Health Care Programs. Per the DHS clarification, if the D9410 is done in a Head Start or school setting, it does not meet the definition of extended care facility and is not eligible for reimbursement. Also, if you are billing for a D9410, additional appropriate procedure codes for actual services performed must be included for the same date of service. In order for Delta Dental of Minnesota (Delta Dental) to process the D9410, it is necessary for you to include the place of service in the comments section of the claim form (electronic or paper). This change was effective November 5, 2010.

In addition, per the DHS provider manual, effective January 1, 2011, the Basic Screening Survey will no longer be reimbursed. This is a service that is done by hygienists in collaborative agreements.



---

Special Edition is published for participating dentists. Article ideas and questions from readers are welcome. **Publisher:** Delta Dental of Minnesota. **Send questions or comments to:** Editor, Delta Dental of Minnesota, 3560 Delta Dental Drive, Eagan, MN 55122, E-mail: [editor@deltadentalmn.org](mailto:editor@deltadentalmn.org).

DDMN.008.05

[www.deltadentalmn.org](http://www.deltadentalmn.org)  
Delta Dental of Minnesota  
3560 Delta Dental Drive  
Eagan, MN 55122-3166