

Special Edition

Spring 2005

HIPAA: National Provider Identifier on the Horizon

On January 23, 2004, the federal government issued another Health Insurance Portability and Accountability Act (HIPAA) regulation. It is the National Provider Identifier (“NPI”) regulation, which establishes one unique identifier for each health care provider and eliminates the multiple identifiers currently in use.

New regulations will offer several advantages, including:

- One unique provider identifier for all health plans to utilize

- A permanent provider identifier that will not change in the event of practice relocation

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More Information To Come

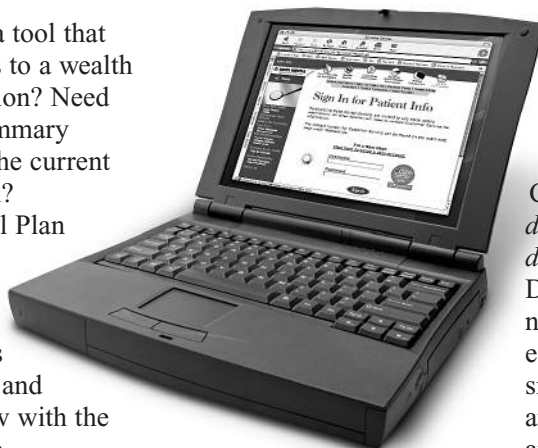
Watch for more updates on the NPI regulation in future issues of **Special Edition**. There is no need to submit the NPI to DDPMN until notified of the date on which we will begin accepting the NPI. DDPMN will provide updates and implementation information, but we are providing background information to heighten general awareness. We will update providers with the important dates and requirements as they become known.

Web Self-Service a Time Saving Tool

Looking for a tool that opens doors to a wealth of information? Need benefits summary information or the current status of a claim?

Delta Dental Plan of Minnesota (DDPMN) is providing such a tool to dentists across the state, and it's available now with the click of a mouse.

Through Delta Dental Plan of Minnesota's self-service Web site (https://www.deltadentalmn.org/applications/den_login.jsp), dentists can inquire about benefits summary and details including year-to-date, life-time and ortho maximums,



deductibles, waiting periods and percent of coverage for their patients.

In addition, providers can inquire about the claims status and details including claims history, detailed information on claims submitted, current status

and payment detail, and adjustment and appeal details.

Additionally, providers can go to the Dentist Connection (<http://www.deltadentalmn.org/content/dentist.asp>) area of the DDPMN Web site to get network descriptions, electronic claims submission information, related articles, newsletters, forms and publications and patient education information.

Dentists must register on the site before they are able to access patient claims, patient eligibility and benefits information. The rest of the Dentist Connection area of the Web site is unsecured. □

Please share this newsletter with your hygienists and administrative staff

Inside:

Helping Children Get a “Head Start” on a Healthy Smile



Making the Most of ECS

Avoid Medical Emergencies



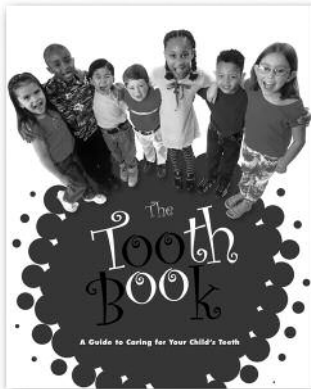
Office Admin Workshop Info Coming Soon

Information on the upcoming Delta Dental Plan of Minnesota office administrator workshops will be coming soon. Look for more information on the 2005 workshops in the near future!

Delta Dental Plan of Minnesota Helps Children Get a “Head Start” on Healthy Smile

Educating parents and children about the importance of oral health and the prevention of oral diseases is critical to creating a lifetime of healthy smiles.

To assist in this effort, Delta Dental Plan of Minnesota (DDPMN) has partnered with the Minnesota Head Start Association, Inc. (MHSA) and Parents in Community Action (PICA), to create “The Tooth Book” to educate Minnesota’s



economically disadvantaged parents on how to take care of their child’s teeth from birth to kindergarten and beyond.

Financial support from DDPMN funded The Tooth Book, which is just one component

of Head Start’s statewide Early Head Start Primary Prevention Campaign. The program is designed to help low-income families with children age birth to 3

understand the importance of oral health and adopt effective oral health prevention strategies to reduce the development of early childhood tooth decay.

In addition to the development of The Tooth Book, Early Head Start staff have been trained to recognize when to refer young children for dental treatment.

The Tooth Book will be distributed to 35 Early Head Start and Head Start programs serving more than 45,000 low-income families with young children statewide. The Tooth Book is published in English, Spanish, Somali and Hmong and will be used in large group parent education

sessions and in one-on-one home visits with families.

In addition to its support of Head Start, DDPMN conducted various activities in February for Children’s Dental Health Month. Free dental screenings were available at the Mall of America as part of “Toddler Tuesdays” (Feb. 8 and Feb. 22) and at the Kids Expo Feb. 16-17. DDPMN also supported Twin Cities Public Television and its Ready to Learn outreach service, which engages children in learning healthy oral health habits and establishes the groundwork for a healthy future. □

Make the Most of ECS



Electronic Claims Submission, or ECS, is a valuable tool for Minnesota dental offices. However, providing the correct patient and provider information is crucial to make the most of this time-saving system.

Here’s a summary of the facts your office needs to know:

Patient Information

Medica — Submit only the nine-digit social security number/ID. When Delta Dental Plan of Minnesota receives a 16-digit ID number for Medica, the system reads only the first nine digits and the claim will not be routed correctly, delaying processing.

Public Programs — Submit the patient’s ID number, not the subscriber’s Social Security Number. Delta Dental Plan of Minnesota is now using the state-issued Person Master Index (PMI) number to process Public Program claims. The PMI number is the State of Minnesota’s identification number assigned to an individual.

Other Business — For all other types of business, submit the correct member ID and the subscriber’s date of birth. Delta

Dental Plan of Minnesota uses this information to ensure the claim is processed under the correct product.

Provider Information

The following information is required to correctly process a claim through ECS:

- Treating Provider TIN or SSN, issued by the IRS and submitted to DDPMN using a W-9 form
- Treating Provider License Number, issued by the state
- Treating Provider name
- Billing address, where payment should be mailed

Resubmissions and Appeals

Any corrections (a tooth number or code change, for example) to a claim submitted and processed must be resubmitted on the Explanation of Benefits (EOB). Claims that need to be corrected should be resubmitted on **PAPER** as follows:

1. For an appeal of payment or the denial of a claim, an explanation of your position regarding the appeal should be written on the EOB with a signature from the treating dentist.
2. Make the corrections on the EOB.
3. Mail to the appropriate mailing address.

Avoid Medical Emergencies Through Prevention, Preparation



Medical emergencies can occur in any healthcare setting, including dental offices. And, although rare in dental offices, medical emergencies can cause confusion and distress for both the patient and the dental staff.

More than 75 percent of dental office medical emergencies are related to stress and anxiety, and nearly 55 percent of emergencies occur during or right after local anesthesia is administered — which is why it's important for a member of the dental team to remain with the patient at all times. The types of treatments cited with the greatest number of emergencies

are procedures associated with potential high patient anxiety, including tooth extraction and root canal therapy.

With proper prevention techniques, 90 percent of medical emergencies can be avoided. Medical emergency preparation begins with a detailed medical history at the time of the initial appointment and regularly thereafter. The dentist, as well as the patient, should sign and date the initial medical history form and any notations made during future appointments.

Medical conditions like allergies, hypertension, diabetes, etc. should be indicated in the chart to alert dental staff each time

chart notes are reviewed, while maintaining the patient's privacy. It may be necessary to consult the patient's physician for additional information concerning major health risks, such as cardiac conditions or history of stroke, for example.

Although taking the appropriate steps to prevent medical emergencies has been proven beneficial, every emergency simply cannot be prevented. It is important for each member of the dental staff to be aware of the protocol and their individual responsibilities during an emergency.

Each office should have a "basic" medical emergency kit appropriate for the patient population and the nature of the practice. Purchase only the emergency equipment and supplies that the staff is comfortable using.

Dentists should not have drugs and equipment that they do not know how to use or administer. It is also important to determine who will be called to assist in an emergency situation

(usually EMS – 911) and how long it will take for help to arrive. For those who practice in a rural area and may wait some time for assistance, it is imperative to become certified in Advanced Cardiac Life Support.

The American Dental Association recommends the following items to be included in a "basic" emergency kit.

- Epinephrine 1:1000 (injectable)
- Histamine blocker (injectable)
- Nitroglycerin (sublingual tablet or aerosol spray)
- Bronchodilator (asthma inhaler)
- Glucose source
- Aspirin (chewable)
- Oxygen with positive pressure administration capability

Equipment must be stored in a readily accessible location. Because drugs can have various expiration dates, it is important that a member of the dental staff be assigned to maintain the equipment on a routine basis. □

Individual Dental Launches April 1

For 35 years, Delta Dental Plan of Minnesota has been providing groups with top-quality dental benefits. Now we're proud to offer a comprehensive dental plan for individuals age 25 and older.

Individual Dental, available to any Minnesota resident age 25 and older,

offers two plan options with strong coverage, competitive premiums, responsive service and a broad dentist network. In fact, this new product from DDPMN utilizes the two largest networks in the state — DeltaPreferred Option USA, and DeltaPremier USA. There are no actions

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needed by dentists already participating in these networks.

Individual Dental plans cover diagnostic, preventive, basic and major

dental care. Enrolling for the plans has been made easy, with no pre-screening. The plans also allow for dependent coverage.

For additional information on Delta Dental Plan of Minnesota's *Individual Dental*, visit our web site at www.deltadentalmn.org. □

National Provider Identifier Regulation continued ...

- A more efficient coordination of benefits
- An easier process for health plans to track claims payment and avoid duplication

The definition of “provider” is broad and encompasses all who provide health care services: individuals (including physicians, dentists and all other practitioners) as well as organizations (such as hospitals, pharmacies and medical supply companies).

All health care providers are **eligible** to receive an NPI, but only “Covered Entities” are **required** to obtain an NPI. A dental provider is a “Covered Entity” only if he or she transmits electronic transactions governed by HIPAA, primarily the

electronic claim transaction. Clearinghouses are also required to be capable of accepting and transmitting the NPI by the federal compliance deadline.

The NPI will replace other identifying numbers currently used in transactions, such as the Medicaid, Blue Cross and Blue Shield, UPIN, CHAMPUS and certain other “legacy” numbers. The NPI will not replace the Social Security number, DEA number, Taxpayer ID number, taxonomy number, or state license number, since these are used for purposes other than general identification.

The NPI is a ten-digit number (nine digits plus a check digit to detect keying errors). It does not contain embedded intelligence; that is, it contains no information

about the provider, such as state of residence or license number; it is simply a random number that never expires. Numbers will be issued by the National Provider System (NPS), which is also responsible for assisting providers in completing the application and resolving problems associated with an NPI.

Important Dates

Covered Entities must use their NPI in all electronic transactions by May 23, 2007. In addition to the federal requirement, Minnesota law requires that all claims submitted on **paper** utilize the NPI by May 23, 2009. Delta Dental Plan of Minnesota (DDPMN) is currently reviewing the use of the NPI for paper claims prior to the 2009 Minnesota deadline.

Providers may apply for their number (using either a paper or electronic application) starting in the summer of 2005. Providers must communicate any changes to the information collected during the application process within 30 calendar days of the change. If a provider changes locations or even specialty field, the NPI itself will never change.

Resources

To access current information, please visit the federal government’s website (which has links to a Question and Answer Database) at www.cms.hhs.gov/hipaa/hipaa2.

The American Dental Association’s HIPAA webpage is located at www.ada.org/prof/resources/topics/hipaa/index.asp. □

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Special Edition is published for participating dentists. Article ideas and questions from readers are welcome. **Publisher:** Delta Dental Plan of Minnesota.

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