

# Colorado Summit



## Updates for Providers in the Colorado Medicaid Dental Program

Vol. 1 – August 2014

Dear Dental Provider,

DentaQuest is pleased to be working with HCPF on the important job of ensuring the Medicaid members of Colorado receive excellent dental care and that our dentists and hygienists have easy administration with prompt claim processing.

The first month of the Colorado program was a learning experience for many. There are new processes, payment schedules, portals and benefit administration.

We have heard that some of our providers are confused about a few of the new processes, how to understand the portal and claim denials/reprocessing. We will address the following in this update:

- Receiving Payment
- Understanding DentaQuest's Portal
- Claim Denials & Reprocessing
- We're Here to Help
- DentaQuest Provider Question of the Week

### Receiving Payment

We understand prompt payment is important to running your business. Therefore, clean claims received by DentaQuest are processed within 30 calendar days. After a claim is processed it is placed into a payment batch. A payment batch is processed every Tuesday evening for all claims processed in the preceding week, checks will be dated the following day.

Once HCPF reviews and approves the payment batch and provides funding to cover the paid claims, DentaQuest immediately releases payment for direct deposit and checks for mailing. Both direct deposits and checks are deposited or mailed within 2 to 3 business days.

The period of time from each Wednesday check run until the checks are mailed or direct deposits are transferred to accounts can be up to 21 calendar days. In the dates below, please note where HCPF funded two check runs at once in an effort to get your dollars to you more quickly. The average number of days between check runs and release has been less than 12 business days.



Just 2.7% of all claims & authorizations received are unprocessed with 99% of all claims processed through August 10<sup>th</sup> being processed by DentaQuest within 11 calendar days.

July's financial accuracy was 99.75%.

July's processing accuracy was 99.88%.

## SCHEDULE OF PAYMENTS TO DATE

CLAIMS PROCESSED OR REPROCESSED THROUGH 5:00 pm EST:	INCLUDED IN CHECK RUN	CHECKS MAILED BY	DIRECT DEPOSITED ON
07/01/2014 - 07/08/2014	7/8/2014	7/29/2014	7/28/2014
07/09/2014 - 07/15/2014	7/15/2014	8/5/2014	8/4/2014
07/16/2014 - 07/22/2014	7/22/2014	8/12/2014	8/11/2014
07/23/2014 - 07/29/2014	7/29/2014	8/19/2014	8/18/2014
07/30/2014 - 08/05/2014	8/5/2014	8/26/2014	8/25/2014
08/06/2014 - 08/12/2015	8/12/2014	9/3/2014	9/2/2014

Please do not incur the cost of submitting duplicate claims without **first** checking to see whether it has already been processed and is in the payment cycle. Duplicate claims will simply be denied as a duplicate and create unnecessary data on your EOB's explaining the denial.

### Viewing Claim Data on the DentaQuest Portal

A claim will have a status of:

- Successfully Entered: Claim was successfully entered into the portal
- Accepted: Claim received & accepted into our claim adjudication system
- In Process: Claim is currently being processed
- Adjudicated: Claim was determined and is pending the next pay cycle
- Finalized: Claim has completed processing and payment

[Home](#) > [Claim/Pre-Authorization Status Search](#)

### Claim/Pre-Authorization Status List

This page displays a list of claims submitted for a specific patient/subscriber according to the search criteria. Click on the Claim Number to access claim detail information. If available, click on the View EOB link to view benefit information for a claim. Click on the member name to view member detail information. Click on the provider name to view provider detail information. Click RA Search to initiate a remit advice (EOP) search. Click Search Again to initiate a new search.

Results								<a href="#">Download File</a>
Claim/Pre-Authorization Number	Type	Member Name	Date of Service	Dentist/Office Name	Claim Status	Total Billed Amount	Payment	
<a href="#">201422001231000</a>	Dental Claim	<a href="#">JOHN SMITH</a>	03/14/2014	<a href="#">Jones, Sally</a>	Successfully Entered	\$325.00		
<a href="#">201422001232000</a>	Dental Claim	<a href="#">JOHN SMITH</a>	03/08/2014	<a href="#">Jones, Sally</a>	Adjudicated	\$1,350.00	\$990.75	
<a href="#">201422001233000</a>	Dental Claim	<a href="#">JOHN SMITH</a>	03/13/2014	<a href="#">Jones, Sally</a>	Accepted	\$225.00		
<a href="#">201422001234000</a>	Dental Claim	<a href="#">JOHN SMITH</a>	03/13/2014	<a href="#">Jones, Sally</a>	Adjudicated	\$250.00	\$175.54	
<a href="#">201422001235000</a>	Dental Claim	<a href="#">JOHN SMITH</a>	03/13/2014	<a href="#">Jones, Sally</a>	Accepted	\$325.00		
<a href="#">201422001236000</a>	Dental Claim	<a href="#">JOHN SMITH</a>	03/06/2014	<a href="#">Jones, Sally</a>	Finalized	\$225.00	\$157.41	
<a href="#">201422001237000</a>	Dental Claim	<a href="#">JOHN SMITH</a>	03/07/2014	<a href="#">Jones, Sally</a>	Adjudicated	\$200.00	\$142.07	
<a href="#">201422001238000</a>	Dental Claim	<a href="#">JOHN SMITH</a>	03/12/2014	<a href="#">Jones, Sally</a>	In Process	\$475.00		

Page 1 of 3 >

### Claim Denials and Reprocessing

We have heard that our dental providers in Colorado feel as if more claims or service lines have been denied than usual since the new program went live on July 1<sup>st</sup>. A few challenges may have contributed to a higher denial rate. Please read the explanations below to better understand the status of your denial.

- Because the new program started on July 1st and only included claims for dates of service (DOS) 7/1/14 and after, claims received by DentaQuest with DOS prior to 7/1/14 denied and, depending upon timing, have been, or will be, seen as denied on your EOB. 8% of all claims received in July were denied for this reason. ***To receive payment for DOS prior to 7/1/2014 dentists should send their claims to the prior vendor.***
- Unfortunately, historical authorizations were loaded into the DentaQuest system incorrectly resulting in 641 claims denying for “Authorization Not on File.” This issue was addressed on August 6th and all impacted claims were reprocessed for our 8/13/14 payment run. You can expect to see your payment for this correction on the payments scheduled to be mailed the first week of September.
- HCPF was unable to share comprehensive provider data with DentaQuest. As a result, we have been reaching out to every office to ensure that we have your accurate information to process a correct payment. Within the first weeks of the program, approximately 2,000 claims denied for provider data discrepancies. As we have updated your information, we have reprocessed these claims. If you have received a denial for provider data not active, please check the portal to see if this claim has been reprocessed and is simply waiting to be released with a future payment.
- D0603 and D1330 submissions have resulted in a large percent of service line denials. HCPF has confirmed that these 2 codes have not received reimbursement in the past and remain a non-reimbursable code. Please continue to provide education on hygiene and brushing as you and your patient population will benefit from improved oral health. It is not necessary, however, for you to add these codes to your claims. We appreciate the care you give to your patients!
- We have confirmed with HCPF that a few of the benefits set up in our system were incorrect, DentaQuest has reviewed the Office Reference Manual (ORM) with HCPF and is in the process of making the appropriate changes to correct some covered/uncovered codes, age limitations, frequency limitations and prior authorization requirements. Impacted claims will be reprocessed by the end of August. Providers do not need to resubmit claims to receive corrected payment.

### We're Here to Help

Working with a new Dental Management Organization (DMO) and understanding new processes will take some time. But we're here to help you. If you have questions, please don't hesitate to contact our contact center at 855 225-1730 or your provider relations representative.

### Provider Question of the Week

*How do I receive payment for claims that were previously denied for errors in the Office Reference Manual? Do I need to resubmit all of my claims?*

*No, you do not need to resubmit your claims. Once the updates are made to the ORM and our system is corrected to reflect these changes, we will initiate reprocessing of your impacted claims and send payment.*