New TRDP contract awarded to Delta Dental

We are pleased to announce that the Department of Defense has again awarded the next TRICARE Retiree Dental Program (TRDP) contract to the Federal Government Programs division of Delta Dental of California. Our administration of the new contract will begin January 1, 2014 and run through December 31, 2018.

Delta Dental has been administering the TRDP for retirees of the Uniformed Services and their family members since 1998. Today there are over 1.3 million covered lives enrolled worldwide in this federally authorized, voluntary dental benefits program, with 100% of the premiums paid by the retirees themselves.

Under the new TRDP contract, there will be some benefit changes in the enhanced program (groups 4601 and 4602), including an increase in the annual maximum to $1,300, an increase in the dental accident maximum to $1,200 and an increase in the lifetime orthodontic maximum to $1,750.

It is important to verify the group number for each of your TRDP patients. Although enrollment in the Basic TRDP (group 4600) is no longer open to retirees, there are many who are still enrolled in the basic program; since they have the option to upgrade to the Enhanced TRDP at any time, they may have made the switch since you last saw them in your office. There are some significant differences between the enhanced and basic programs: The enhanced program includes additional covered benefits not offered under the Basic TRDP, such as coverage for dental accidents and major restorative, implant and orthodontic procedures. Basic program enrollees also have a lower annual maximum ($1,000). There are no changes in Basic TRDP benefits under the new contract.

Be a part of the solution: Reduce your overhead costs by using online resources

As with many companies, Delta Dental is looking for ways to reduce overall program costs. One way we have found is to take advantage of the technology that is right at our fingertips. Our dedicated TRDP website will quickly become your one-stop resource for all program information, replacing the need for us to print and mail many of the materials you need to help you in your participation in the TRDP dentist network. This may seem like a small step—but we know that each one we take together helps to shorten the road to the overall reduction of healthcare costs.

And to further assist you in making sure you never miss an important TRDP update, all you have to do is sign up for email notifications right here on the website. It’s as easy as 1-2-3! First, find the envelope icon (hint: It’s on the Dentist page) and click on it to get to the sign-up form. Second, fill in the information, and third, click “submit.” You’ll automatically be added to our database so that you can be sure to get important program updates and information delivered to you by email.

Mail to the correct PO Box

The many individual member companies that comprise Delta Dental each have established their own separate addresses for submitting claims and other correspondence. Additionally, some Delta Dental member companies have unique divisions that have set up additional addresses specific to certain groups.

Delta Dental’s Federal Government Programs division has established an address specifically for submitting TRDP claims: PO Box 537007, Sacramento, CA 95853-7007. Because it is nearly impossible to cross-reference every subscriber throughout the entire Delta Dental system, it is important that you send only your TRDP claims to this PO Box. You might be thinking you can save some time and postage by bundling all your Delta Dental claims and mailing them to a single PO Box address, but it can actually cost you much more: Claims for patients who cannot be identified by each of our processing systems will be denied.

The Dental Office Resources page on this website lists contact information for all the Delta Dental member companies, including post office boxes for claims and correspondence, Customer Service telephone numbers and payer IDs for your electronic claims.
Payer ID reminder for electronic claims submission

Just as it is important that you submit all paper claims to Delta Dental with the correct information, it is also important that your electronically submitted claims contain the correct information, including the right electronic claims submission (ECS) payer ID. If the wrong payer ID is used, the claim could be rejected or sent to the wrong payer and subsequently denied because no record exists for the subscriber/patient under that payer ID.

Federal Government Programs’ ECS payer ID is CDCA1. If you have been using a different payer ID, please update your practice management system or check with your vendor to ensure your electronic claims are routed correctly to Federal Government Programs.

What’s new with DOT

You may already know how beneficial the self-service Dental Office Toolkit (DOT) is to your practice. But if you haven’t tried using DOT yet or have never heard of it before, here are some reasons we think you’ll find it both cost-effective and efficient for your dental practice:

- Save yourself a phone call. Use DOT to verify patient enrollment, benefit coverage or check claim status.
- Don’t pay for electronic claims submission. Use DOT—it’s free!
- Stop waiting for your EOBs and/or checks to arrive in the mail. Get real-time availability through DOT with paperless delivery of your EOBs and electronic funds transfer of your claim payment checks from Delta Dental.

DOT is available seven days a week, 24 hours a day. There’s no need to call us, no need for a practice management system and no more waiting for your claim payments—and all with NO FEES! Using DOT is always free, and the information you need is always available at your fingertips.

To get started with DOT, simply go to https://www.ddfgptoolkits.com/dotWeb/appmanager/dot/desktop. You must first register and provide the following information:

- License number
- State issuing license
- Tax Identification Number (TIN)
- Office location ZIP code

For more details about DOT, check out “Getting Started with the Dental Office Toolkit” on our website.

Department of Defense extends TRDP contract

With the award of the new TRDP contract effective January 1, 2014, the Department of Defense has extended the current TRICARE Retiree Dental Program (TRDP) contract to continue through December 31, 2013. The current contract was scheduled to end as of September 30, 2013.

The contract extension brings no change in premiums or scope of benefits. However, the annual maximum for enrollees in the enhanced program has been increased to $1,500 and for those in the basic program, the maximum was increased to $1,250. This is for the period of October 1, 2012 through December 31, 2013. There are no changes to the deductible.

These changes were implemented April 1, 2013; please be sure to resubmit any TRDP claim(s) that were denied payment because your patient had reached his/her maximum before April 1.

For further information, please refer to the Contract Extension FAQs on this website.

Already signed up for EFT?

If you are one of the thousands of dental offices that have already signed up to have your TRDP claim payments deposited directly into your bank account through electronic funds transfer (EFT), here are some key points to remember:

- If you registered for EFT using another dental office toolkit (DOT), registration will carry over to Federal Government Programs’ DOT.
- You must register separately under Federal Government Programs’ DOT to view your online Explanation of Benefits (EOB) statements.
- Even though the payment associated with the EOB will be deposited directly in your bank account, you will not receive a separate notification of either the payment deposit or the availability of your EOB—so always remember to check your DOT account.

Coverage limitation on periapical radiographic images

Under the TRDP, only four periapical radiographic images are allowed for payment in a 12-month period except when they are provided for emergency services. If you submitted a claim that included periapicals performed with an emergency service and the claim was denied, you may resubmit it for reconsideration. Please indicate the claim number, the date of service and a short narrative regarding the emergency service provided, or use the EOB for even faster review.
Benefax adds even more efficiency to your office

The two most common reasons dental offices call our Customer Service department are to verify patient enrollment and to obtain benefit information for their TRDP patients. By using our Interactive Voice Response (IVR) automated telephone system instead, your office can save time and money and increase efficiency, too. Simply enter the same information into the IVR that you would provide to a Customer Service associate, and within minutes your office will receive a Benefax form that includes the patient’s enrollment and comprehensive benefit information. The Benefax serves as a written verification of this essential information that can be slipped into the patient’s chart for reference, any time you need it.

Many of us shy away from using any type of automated telephone service. Quite often we find it too difficult and time-consuming to navigate through the maze of options offered by most automated systems. To help steer you quickly through our system so that you can get to the information you need, we have developed a Quick Reference Guide to the IVR, now available online.

Tips for faster claims processing

- For a claim with dual coverage, always submit the claim to the primary carrier before submitting it to the secondary carrier. Submitting a claim to both carriers at the same time could result in delays, denials or miscalculations. When the TRDP is the secondary carrier, merely note the amount paid by the primary carrier on the claim—there is no need to send the primary carrier’s EOB as an attachment. Delta Dental will calculate any additional payment as the secondary carrier based on the amount we would have paid had we been primary, less the primary carrier’s payment.
- Before submitting your TRDP claims, please verify if any procedure codes require a tooth, quadrant or arch code and, if so, which of these is required. For example, procedure code D4342 requires a tooth code, not a quadrant code.
- When requesting re-evaluation of a previously processed claim, please submit the request on the EOB that corresponds to the claim. If you submit the request as a new claim, it will be processed as a duplicate and subsequently denied.

Predeterminations

Here are a few tips to keep in mind when submitting a predetermination:

- A predetermination is not required for any services under the TRDP, although it is advisable for those services that are more complex or costly. A predetermination for these types of services will allow for consideration of the remaining annual maximum based on other treatment that has been provided during the coverage period.
- A predetermination is not an authorization of services or payment; its purpose is to determine an estimate of benefits for the specific patient at the time the predetermination is received. The fees indicated on the predetermination form as well as any frequency limitations may be different at the time it is submitted for payment.
- Please use the predetermination form for payment; just indicate the dates the services were performed and include the dentist’s signature. Use a single strikethrough on any procedures not completed.
- A predetermination request that appears to contain several treatment options will be processed with information for all options. Note, however, that not all treatment listed will be payable if all services on the predetermination are submitted for payment.
- Each service is subject to Delta Dental’s processing policies and may not be payable in conjunction with another procedure listed either on the predetermination form or in the patient’s claim history.

Recovery of Payments

It is sometimes necessary for Delta Dental to recover payments for services previously submitted and paid. This most often occurs when a service requires multiple appointments to complete because of unforeseen circumstances, such as when a tooth scheduled for a crown fractures before the appointment and must be extracted or when a patient needing a root canal does not return to complete treatment. By following the simple guidelines below, you may be able to avoid the inconvenience and time-consuming bookkeeping that can occur when funds must be recovered from future payment checks:

- Do not bill for a service until it is completed.
- If Delta Dental has made payment, return the check to us along with any associated EOBs, noting the service that was not completed. Although the returned check may be for multiple patients or multiple services for a single patient, we will reprocess all claims and issue a new check and EOBs for those services/claims related to the returned check.

Need to contact us? Use email for the quickest response!

To reach our Professional Services staff, the fastest and most direct way is by emailing us at fsps@delta.org. We will respond to your inquiry as quickly as possible, with a notification that we have received your email within 24 hours—guaranteed!

<table>
<thead>
<tr>
<th>Claims submission</th>
<th>Written inquiries</th>
<th>Telephone inquiries</th>
<th>Professional Services department</th>
</tr>
</thead>
</table>
| Delta Dental of California  
Federal Government Programs  
PO Box 537007  
Sacramento, CA 95853-7007  
ECS Payer ID: CDCA1 | Delta Dental of California  
Federal Government Programs  
PO Box 537008  
Sacramento, CA 95853-7008 | Customer Service: 6 a.m. – 6 p.m. PST  
Monday – Friday  
Interactive Voice Response System:  
24 hours/day, 7 days/week  
Toll-free: 888-838-8737 | Toll-free: 888-838-8737  
Fax: 916-858-0235  
Email: fsps@delta.org |