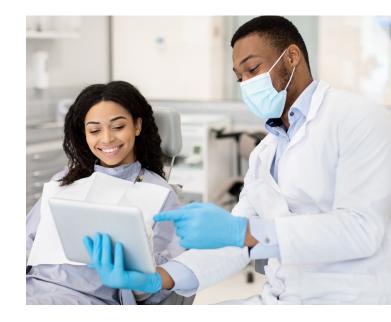


# Dental Dispatch

News and information for network providers

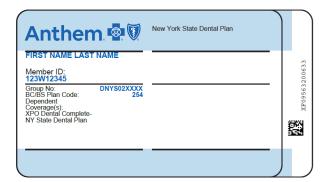


## Update to New York State Dental Plan member ID cards

Thank you for your participation in the XPO Dental Complete Network. We are delighted to announce that effective October 1, 2024, members of the New York State (NYS) Dental Plan have access to our XPO Dental Complete Network.

On August 30, 2024, we mailed Anthem ID cards to NYS Dental Plan members. However, we found that the claims mailing address ZIP code on the back of the ID card is missing a digit. We sincerely apologize for any confusion this may have caused.

Below, you will find a copy of the corrected member ID card with the complete ZIP code.





If you have any questions regarding member benefits, contact Customer Service at **833-821-1949** from 8 a.m. to 5 p.m. ET, Monday through Friday. For any questions related to your dental network, call the Dental Networks Team at **866-947-9398** between 8 a.m. and 7:30 p.m. ET, Monday through Friday.

Thank you for your understanding and continued support.

## Quick reference guide

Please see the below chart for the most accurate contact information.

Anthem	Prime and complete	All others dental products
Paper claims address	Review the back of the member's ID card to determine the appropriate dental claims mailing address (address varies by group). In the absence of an address, call the number on back of the ID card for instructions on where to submit the claim.	Review the back of the member's ID card to determine the appropriate dental claims mailing address (address varies by group). In the absence of an address, call the number on back of the ID card for instructions on where to submit the claim.
Electronic claims	Follow current process or contact your clearinghouse.	Follow current process or contact your clearinghouse.
Customer service numbers	See the back of patient's ID card or call 877-606-3338.	See the back of patient's ID card.
Grievances and appeals	Attention: Dental Claims	Anthem Blue Cross and Blue Shield
<b>Note:</b> Sending to a P.O. Box different than the following may delay your appeal.	Appeals and Grievances P.O. Box 551 Minneapolis, MN 55440	Appeals: First Level Appeals Review P.O. Box 551 Minneapolis, MN 55440
Professional services	866-947-9398	866-947-9398

# Introducing our new payment website

In an effort to streamline operations and enhance provider satisfaction, we are announcing the launch of our payment website to submit payments related to claim overpayment refund requests.

#### Key features of the payment website:

- User-friendly access at Availity.com. You must be currently registered with Availity Essentials or sign up as a new user.
- How to navigate Availity.com:
  - Log in using your user ID and password.
  - Select your state.
  - Select payer.
  - Select Dental Provider Claim Overpayment.
  - Add Dental Provider Claim Overpayment to your favorites for faster access.
- Secure transactions
- Active monitoring of payment processing

## Active monitoring payment processing

Dedicated members of our team have been equipped with the necessary access to manage, review, and follow up on all payment activities in order to provide seamless support. In the unlikely event of a payment processing error, our team will promptly inform you of the issue to ensure timely corrective measures are taken.

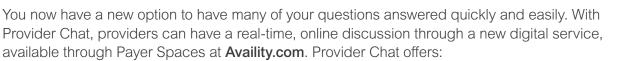
#### Stay updated

We are committed to transparent communication. Look for follow-up communication for any updates related to the payment website.

We are confident that this new payment website will significantly enhance your experience with us. For further assistance, email us at DentalFinanceOperations@anthem.com.

Welcome to a new era of simplified, secure, and efficient payment processing.

# Get all your questions answered with Provider Chat





- Real-time answers to your questions about prior authorization and appeals status, claims, benefits, eligibility, and more.
- An easy-to-use platform that makes it simple to receive help.
- The same high level of safety and security you have come to expect with Anthem.

For questions related to provider contracting concerns, fee schedules, and demographic updates, continue to contact Provider Network Services at **866-947-9398**.

Provider Chat is one example of how Anthem is using digital technology to improve the healthcare experience, with the goal of saving valuable time. To get started, access the service through Payer Spaces at **Availity.com**.

# Stay up to date with our communications

We send care providers electronic communications, including updates to claims, benefits, provider manuals, newsletters, and more.

We send only educational communications and important marketing materials. To avoid missing crucial updates, ensure you do not mark us as spam or send us to your junk folder. To guarantee your staff receives all notifications from us, mark our email address as a safe sender.

# CDT dental code updates for 2025

This communication serves as notification by Anthem that the 2025 Code on Dental Procedures and Nomenclature updates have been posted to our website. To view the 2025 Current Dental Terminology (CDT) updates, and continued annual updates, visit anthembluecross.com/ny/provider. Under Communications, select CDT Updates.

The new CDT dental codes are effective January 1, 2025. The new CDT 2025 code book includes dental procedure codes and revisions to procedure code nomenclatures or descriptors.

To order the new 2025 CDT code book, contact the American Dental Association Member Services Center at **800-947-4746**.

If you have questions or need a full listing of the claims processing guidelines, call Dental Network Professional Services at **866-947-9398**.

## Misrouted PHI

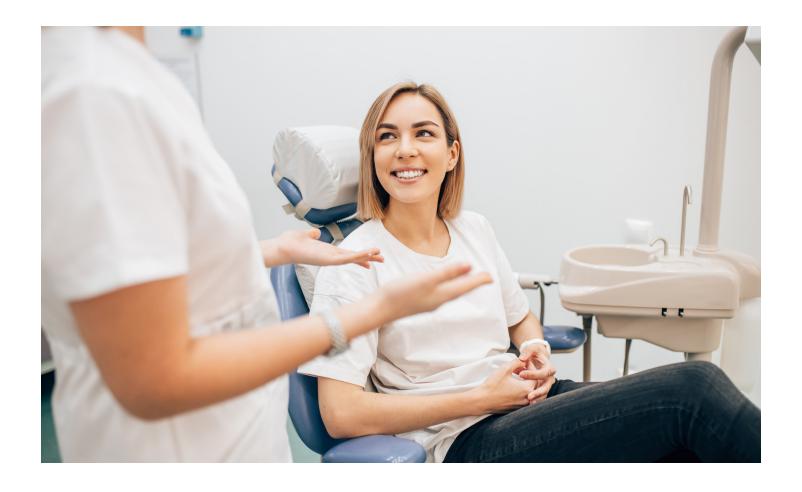
Dental providers and facilities are required to review all member information received from Anthem to ensure no misrouted PHI is



included. Misrouted PHI includes information about members a provider or facility is not currently treating. PHI can be misrouted to providers and facilities by mail, fax, email, or electronic remittance.

Dental providers and facilities are required to immediately destroy any misrouted PHI or safeguard the PHI for as long as it is retained. In no event are providers or facilities permitted to misuse or re-disclose misrouted PHI. If providers or facilities cannot destroy or safeguard misrouted PHI, providers and facilities must contact Customer Service or call the number listed on the documentation received to report receipt of misrouted PHI.

Dental providers and facilities should review claims and documents carefully before submitting for payment to ensure that the member ID and name listed on the claim are accurate. Taking these additional steps will help eliminate explanation of benefits being sent to the wrong member and prevent HIPAA violations.



## Consolidated Appropriations Act provider directory federal mandate

As required by the *Consolidated Appropriations*Act (CAA) and several state laws, we must ensure our provider directories are accurate. Your patients — our members — need the most up-to-date information to reach you. As a contracted provider, you must respond to this notification by providing updated contact information.

We appreciate your due diligence in keeping us informed of any changes impacting you or your office. Working together, we ensure your patients — our members — can reach you quickly while we meet our compliance obligations.

We are excited to announce our partnership with HealthLink Dimensions to simplify the verification process with your practice. Be on the lookout for an email from Healthlink Dimensions, which will provide steps to complete your verification of your practice. Ensure that you add Healthlink Dimensions to your trusted sender list to make sure vital information from Healthlink Dimension is received. Working together, we ensure your patients — our members — can reach you quickly while we meet our compliance obligations.

Learn more about Anthem programs anthem.com/provider/dental

