

THE LINK



The Link is a monthly newsletter published by Delta Dental of New Mexico about the role of dental insurance, and the link between oral health and overall health. Since it includes oral health news, industry news, and Delta Dental updates, it's also our link to you.

Understanding your Explanation of Benefits

This is the first in a series of articles designed to help you understand the Explanation of Benefits (EOB) you receive after Delta Dental processes a claim for your dental care. Be sure to check next month's edition of The Link for more information about how to read an EOB.

The top portion of the Explanation of Benefits contains information which identifies the name of the Delta Dental Subscriber and the treating dentist. This section also includes:

- The patient's name. Dental benefits are subject to a plan maximum, which is the maximum dollar amount of benefits available in each benefit period. Some benefits, such as cleanings and x-rays, are also subject to frequency limits. Because these plan provisions apply to each covered person, correctly identifying the specific patient for whom the benefits apply is important. If the claim was inadvertently submitted or processed under the wrong patient, contact Benefit Services immediately so it can be corrected.
- A relationship code, which relates to the way the patient is enrolled – "01" for a Subscriber, "02" for a spouse, and "03" for a child.
- The issue date, which is the date the claim was processed. Year to date, Delta Dental of New Mexico has processed 89% of all claims received within 6 calendar days.
- The receipt date, which is the date the claim was received by Delta Dental. Delta Dental dentists are required to submit claims on behalf of patients and most claims are submitted electronically. Electronic claims are received by Delta Dental each day.

The header section of the EOB also includes a twelve digit "Document No." When calling Benefit Services, it helps to reference this number and the number shown after "Document Type." The

document type identifies the type of claim: "1" refers to a claim for services received and "4" refers to an adjustment on a claim previously processed.

Group Plan Administrator Tip of the Month

Employees have oral health and wellness questions. Delta Dental has the answers. Equally important, oral health is strongly linked to overall health and the overall health of employees affects an employer's bottom line by affecting total healthcare costs, productivity and absenteeism.

Encourage employees to rely on the trusted oral health leader for oral health and wellness information by referring them to the Delta Dental Oral Health online resource. For more information, refer to the ***Oral Health Questions?*** article in this newsletter.

Enrolled persons are entitled to a pre-determination of benefits anytime more costly procedures are anticipated. When requested by a dental provider, this advance estimate of benefits payable can be provided by Delta Dental before dental care services are received. Document type "2" refers to a predetermination,

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Oral Health Questions?

A new **Oral Health and Wellness Portal** is now available from Delta Dental! The new portal offers a robust search function to make finding answers and information easy.

Users have the resources of 400 articles at their fingertips. The articles are grouped into four main categories: Pediatric Oral Health, Adult Oral Health, Oral Cancer and Harvard Health. Each category is divided into subsections.

Employee Wedding Bells?



Do you have any employees who got married over the summer?

Under most groups' eligibility rules, new spouses become eligible for enrollment as of the date of marriage and may enroll in the dental plan anytime within 31 days from that date. Unless otherwise stated in the group's contract, coverage for the spouse will be effective on the first of the month following the date of enrollment.

If not enrolled when first eligible, the new spouse will be eligible for enrollment during the group's next Open Enrollment period.

Teeth Talk

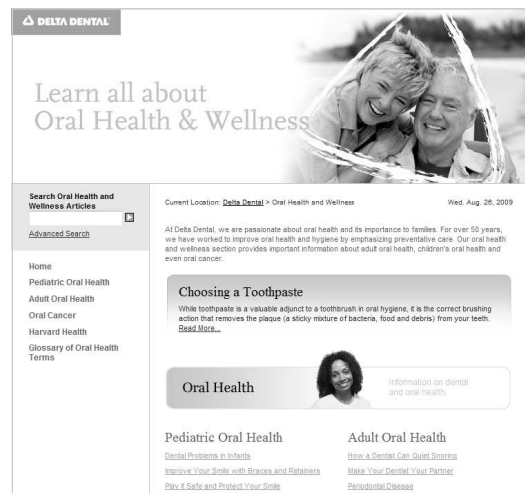
The Toothbrush To Use: Hard bristles were once recommended but now are thought to be too abrasive to the teeth and gums. It now is suggested that a soft, rounded-end nylon bristle brush be used. Be sure to discard brushes when the bristles are bent or frayed or every three to four months.

This is an excerpt from one of the articles on the Oral Health and Wellness Portal, described in the above article.

Tip: Most dental offices provide complimentary replacement toothbrushes when you receive your routine cleanings. Be sure to ask for yours!

The articles are written by a highly skilled team of medical and registered nurse writers and vetted by Delta Dental Plans Association's National Scientific Advisory Committee.

Accessing this new resource is simple. Just go to **deltadentalNM.com**, click on the **Oral Health** link, which is available in the Subscriber, Employers or Broker areas of the site, and select the **Oral Health and Wellness Portal**.



Understanding your EOB (continued from page 1)

Contact information for Delta Dental, including the phone numbers for Benefit Services, is located in the upper left corner of the EOB. Benefit Services Representatives are available Monday through Friday from 8:00AM to 4:30PM. Almost 95% of all calls into Benefit Services are answered by a Representative within 45 seconds.

Allowed Amount? Approved Amount? Watch for the next article in the October edition of The Link.