Introducing Dr. Joe Dill
Delta Dental of Virginia’s New Vice President of Professional Services and Dental Director

We are excited to welcome Dr. Joseph M. Dill to Delta Dental of Virginia as our new vice president of professional services and dental director. Dr. Dill comes to us with a wealth of experience not only in the dental insurance industry and public health, but also as a practicing dentist and dental school faculty. His unique combination of skills and innovative thinking will help Delta Dental of Virginia carry out our mission to improve oral health in Virginia.

Prior to moving to Virginia, Dr. Dill was dental director-Western region and director-provider contracting for Delta Dental of California. Also, he was formerly the director of dental products for Premera Blue Cross in Washington State, served in the U.S. Public Health Service and worked in a private dental practice. Dr. Dill received his undergraduate and DDS degrees from The University of the Pacific and he earned an MBA from the University of California, Irvine.

Dr. Dill will serve two vital roles for the company: overseeing the Clinical Professional Services Department (including clinical claims review, clinical policy development, quality of care, network development and utilization review) and as the primary liaison to the Virginia dental community.

Please join us in extending a warm welcome to Dr. Dill. We are delighted to have him as a member of our leadership team and look forward to putting his extensive expertise to work.

Attention! CDT® Codes Now Updated Annually

Please be aware that the ADA is now updating CDT codes annually instead of biannually. It is your responsibility to keep your codes up to date. Submitting incorrect or outdated CDT codes may result in claims being denied or returned for incorrect information.

IN THIS ISSUE

Experience-Rated Group Benefit Options
FBI Recognition
DDVA and Health Care Reform
Direct Deposit
DDVA at VDA
CE Success Story
Recommended Benefit Options for Our Experience-Rated Groups

Delta Dental of Virginia is committed to offering our clients benefits that are in line with the most current scientific standards. Our plan designs focus on important preventive care in order to avoid costly oral health issues in the future.

We are now offering these new benefit options to our experience-rated groups:

• Periodontal Maintenance – 2 per benefit year in addition to regular cleanings
• Sealants to age 16
• Fluoride treatments to age 19 – 2 per benefit year
• Crowns and prosthodontics – limitation increase from 5 to 7 years
  - Properly placed crowns and prosthodontics demonstrate a life expectancy of greater than 10 years.
  - The standard coverage in the industry is now 7 years.
• Full-mouth and panoramic X-rays – limitation increase from 3 to 5 years
  - Research currently shows an overutilization of X-rays. The standard coverage in the industry is now once every 5 years.

It is Delta Dental of Virginia’s recommendation that groups adopt all of these new benefit options in order to keep their policy cost neutral; however, they will be able to choose the ones they want. Please help us to code and reimburse these services correctly by logging into our secure DeltaDentalVa.com website for providers to verify your patients’ benefits.

FBI recognition award for Delta Dental Analysts

We are pleased to congratulate Kim Brown, RDH, and Trish Shifflett, RDH, both Clinical Fraud Analysts for Delta Dental of Virginia who were recently given an award of recognition from FBI Special Agent Joseph Parker, Jr. during the National Health Care Anti-Fraud Association (NHCAA) Annual Training Conference in Orlando, FL. The recognition award stems from the successful investigation and prosecution of a Northern Virginia doctor who submitted fraudulent claims to 50 private insurance companies and Medicaid for which the doctor received benefit payments. The doctor pled guilty to healthcare fraud in January 2012 and was sentenced to the maximum of 46 months jail time, a $250,000 fine and was ordered to pay $2.5 million in restitution. DDVA filed a separate civil suit and recovered $225,000. Kim and Trish sent the first referral of fraud to the FBI in 2009 and assisted in providing evidence which enabled the prosecution of the doctor.

We would also like to recognize our Professional Review staff for discovery of this provider’s suspicious behavior and bringing it to the attention of the Contract Compliance Unit (CCU). Additionally, with our continued company training, we are now receiving many more referrals from various departments throughout Corvesta, Inc.

In addition, while attending the NHCAA Training, Kim and Trish sat for and passed the Accredited Health Care Fraud Investigator exam (AHFI), receiving the AHFI designation. AHFI is a professional designation granted to individuals who meet certain criteria related to professional experience, specialized training, formal education and demonstrated knowledge in the detection, investigation or prosecution of health care fraud.

Please join us in congratulating our CCU and Professional Review teams for their dedication in the fight against fraud and abuse.

FRAUD AND ABUSE – IT COSTS US ALL

Please remember that fraud and abuse costs us all in the long run. If you suspect fraud or any type of malpractice, we encourage you to call our secure fraud and abuse hotline at 888.227.6004.

Your anonymity is guaranteed.
Letter regarding Delta Dental of Virginia and Health Care Reform

As the rules regarding the Health Care Exchanges continue to evolve, Delta Dental came to the decision to NOT participate on the Virginia health care exchange in 2014. We are, however, offering an exchange certified plan off of the exchange to our small group clients. We have also partnered with Optima Health Plans to offer pediatric dental benefits embedded in their exchange certified medical plans, as well as adult dental benefits in their Medicare Advantage plans.

You recently received a letter from us with important information regarding Health Care Reform, including:

- Medically necessary orthodontic guidelines for the essential pediatric dental benefits
- Dental benefits embedded in Optima Health Plans’ exchange certified medical plans
- Dental benefits embedded in Optima Health Plans’ Medicare Advantage plans

If you did not receive this important information, please call Provider Relations at 800.367.3531 to receive a copy for your practice.

For more information regarding Health Care Reform as it relates to dental coverage, please visit our special website: ThatsTheTrooth.com.

Get paid faster with Direct Deposit!

With more claims being filed electronically, Delta Dental is paying claims even faster than before. How can you get your money even faster? Direct Deposit!

Delta Dental of Virginia can deposit your claims payments directly into your practice’s bank account, streamlining your remittance process and speeding up your access to cash. Direct deposit, or Electronic Funds Transfer (EFT), means no more paper checks, no need for deposit slips and, best of all, no more time-consuming trips to the bank. Your claims payments can now be transferred directly from Delta Dental to your checking or savings account.

EFT is free and available to all dentists, whether you submit claims by paper or electronically. To eliminate some hassle and get your claims payments faster, sign up for EFT today. We’ve enclosed a form for you or you can visit the Provider section at DeltaDentalVa.com and click on the Forms link to access the Direct Deposit Enrollment Form. You can always call Provider Relations at 800.367.3531, ext. 3328 for more information.

Your Team

When you or your staff have questions, the Provider Relations team is ready to help. Please contact us whenever we can be of assistance.

Annette Giles
Provider Relations Liaison
Western, Southern & Central Virginia
800.367.3531, ext. 3398
apgiles@deltadentalva.com

Laurie Cassanese-Rhodes
Provider Relations Liaison
Hampton Roads, Richmond & Northern Virginia
800.533.4137 Ext 7
lrhodes@deltadentalva.com

Shannon M. Nelson
Provider Relations Supervisor
800.367.3531, ext. 3186
snelson@deltadentalva.com

Ellen Drewery
Provider Relations Specialist
800.367.3531, ext. 3155
ellen.drewery@deltadentalva.com

Tessa Graybill
Credentialing Representative
800.367.3531, ext. 3328
tessa.graybill@deltadentalva.com

DDVA at VDA

Delta Dental of Virginia is proud to support the Virginia Dental Association, most recently as the Platinum sponsor of the VDA annual meeting. Provider Relations’ own Shannon Nelson, Laurie Rhodes and Annette Giles attended the VDA meeting at the Homestead Resort September 17-21, 2013 on behalf of Delta Dental of Virginia and Smart Smiles®.
CE Success Story
August 2013 VA Beach Featuring Linda Miles

Thank you to all who attended our August CE Course featuring Linda Miles’ “Twelve Necessities of a Successful Practice.” This seminar was our best turnout to date with 318 in attendance!

Linda Miles is a true legend in the field of practice management. Linda’s career in dentistry spans five decades with 35 years as a speaker, consultant & author.

Don’t miss out on the opportunity to hear another highly respected speaker, Laura Jamison, coming August 15th, 2014 to the Ocean Front Hilton VA Beach.

Look for registration forms to be posted on our website in the near future, as well as advance notices in the mail. Don’t delay! Seating is limited!
**Reason for Submission:**
- ☐ New Authorization: Complete sections A, B, C, D, and G
- ☐ Cancellation: Complete sections A and F
- ☐ Changes to an existing Authorization: Complete sections A, B, C, E and G

### A. Dentist Information

<table>
<thead>
<tr>
<th>Provider's Complete Legal Name:</th>
<th>Practice Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td>City:</td>
</tr>
<tr>
<td></td>
<td>State:</td>
</tr>
<tr>
<td></td>
<td>ZIP:</td>
</tr>
<tr>
<td>Phone Number:</td>
<td>Fax Number:</td>
</tr>
<tr>
<td>Name of Office Contact:</td>
<td>Email Address:</td>
</tr>
<tr>
<td>Provider National Provider Identifier (NPI) if applicable:</td>
<td>Assigning Authority:</td>
</tr>
<tr>
<td>Provider Tax Identification Number (TIN):</td>
<td>Provider License Number:</td>
</tr>
<tr>
<td></td>
<td>Issuing State:</td>
</tr>
</tbody>
</table>

### B. Banking / Financial Institution Information (Please Print or Type)

<table>
<thead>
<tr>
<th>Financial Institution's Name:</th>
<th>Account Number:</th>
<th>Routing Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td>City:</td>
<td>State:</td>
</tr>
<tr>
<td></td>
<td>ZIP:</td>
<td></td>
</tr>
<tr>
<td>Telephone Number:</td>
<td>Type of Account:</td>
<td>☐ Checking</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ Savings</td>
</tr>
</tbody>
</table>

| Account Number Linkage to Provider Identifier: |
| ☐ Provider TIN  |
| ☐ NPI          |

### C. ERA Enrollments

- Are you planning on using a Clearing House to receive your ERA? ☐ Yes ☐ No
- Method in which you will receive the ERA: ☐ Website ☐ Other
  - If Yes, please provide the Clearing House name:

### D. New Authorization

I authorize and request Delta Dental of Virginia (hereinafter called DDVA) to send the net claims check directly to my bank or other financial institution as specified in Section B of this form. I understand I may terminate this agreement at any time by completing another "Direct Deposit Authorization” or in any event by sending a thirty (30) day written notice to terminate (with new request/instructions for future payment).

**Dentist Signature**: ________________________  **Date Signed**: ________________________

### E. Change Authorization Statement

I authorize and request DDVA to make the changes indicated on this form. I will allow DDVA thirty (30) days from date of receipt of this document to accomplish these changes.

**Dentist Signature**: ________________________  **Date Signed**: ________________________

### F. Cancellation Statement

I authorize and request DDVA to terminate authorized direct deposits to my account. I will allow DDVA thirty (30) days notice from receipt date of this document to accomplish these changes. Unless otherwise noted, upon such cancellation (future) payments will be made to the participating dentist.

**Dentist Signature**: ________________________  **Date Signed**: ________________________

### G: This step is EXTREMELY important, as your application cannot be processed without a voided check.

Please mark the validation attached: ☐ A voided check  ☐ Your bank’s letterhead with account and routing numbers

---

If you have any questions or comments regarding the completion of this form, please contact Delta Dental of Virginia at 800.367.3531.