As dentists, we are well-versed in speaking with our patients about the importance of periodontal health. When a patient has diabetes, pre-diabetes, a family history of diabetes, or periodontal disease, our conversations need to be more compelling. According to the American Diabetes Association, an estimated 7 million Americans are unaware that they have diabetes. Further, the NIH estimates that Diabetes will rise by 54% from 2015 to 2030.

Delayed or poor healing can often be the first sign of diabetes. Other signs can include candidiasis, changes in taste, xerostomia, decreased saliva production, lichen planus, fissured tongue, burning mouth syndrome, angular cheilitis, an enlarged parotid gland, geographic tongue, and benign migratory glossitis.

Several studies have shown the relationship between diabetes and periodontal disease. In May 2017, a BMJ Open Diabetes Research and Care article discussed how diabetes and periodontal disease are not only related, but also may have a bi-directional relationship. More specifically, the researchers set out to show that periodontal disease may be an early sign of diabetes mellitus. In their study, 313 patients who did not have a diagnosis of diabetes mellitus were used (78 had severe periodontal disease, 126 had mild to moderate periodontal disease, and 109 were used as controls).

Each patient received a finger stick HbA1c test. The results showed that as the severity of the periodontal disease increased, so did the HbA1c levels. The study concluded that periodontal disease is considered a complication of diabetes mellitus. Similarly, a 2012 study published in the Indian Society of Periodontology demonstrated that after non-surgical periodontal therapy, patients with both a diagnosis of Type II diabetes mellitus and moderate periodontitis showed a significant decrease in HbA1c levels 3-6 months after periodontal therapy was completed.

Your patients often recognize that periodontal treatment is necessary to maintain their teeth now and in the future. However, it is important to remind them that good periodontal health may actually decrease their risk of developing diabetes or help to control their existing disease.

Dr. Yvonne M. Wolny
Blue Cross Dental Director

SOURCES:
1. American Diabetes Association (ADA)
2. National Institutes of Health (NIH)
2019 Medicare Annual Election Period

The 2019 Medicare Annual Election Period (AEP) runs from October 15 through December 7, 2018, during which time members eligible for Medicare may make a change to (or choose to remain in) their current Medicare plan for the coming year. This plan selection will become effective on January 1, 2019.

Beginning January 1, 2019, five of our BlueCHIP for Medicare plans will now include certain dental benefits: BlueCHIP for Medicare Value (HMO-POS), BlueCHIP for Medicare Standard with Drugs (HMO), BlueCHIP for Medicare Extra (HMO-POS), BlueCHIP for Medicare Plus (HMO), and BlueCHIP for Medicare Preferred (HMO-POS).

BlueCHIP for Medicare Advance (HMO) and BlueCHIP for Medicare Core (HMO) plans do not include dental benefits, but our members who select these plans will have the option, when they enroll, to purchase the Optional Supplemental Dental Rider, or to purchase one of our four Dental Direct plans.

Please refer to this summary of our 2019 dental coverage options by Medicare plan. Under these plans, dental services are covered only at Blue Cross Dental participating providers. We can assure you that as a valued dentist in our network, unless you have opted out of Medicare directly with the Centers for Medicare and Medicaid Services (CMS), our BlueCHIP for Medicare members will have access to your office with no additional credentialing needed on your part.

As a reminder, when submitting claims for these members, the ZBM prefix for the subscriber ID MUST be used in Box 15 of the 2012 ADA Dental Claim Form.

2019 Dental Direct Plan Options

BCBSRI will again offer four Dental Direct plans with varying levels of coverage to meet your patients’ needs. Dental Direct members who want to change their plan can select a new plan during the 2019 Open Enrollment Period, from November 1 through December 31, 2018. Members who are happy with their current plan don’t have to do anything and will be automatically re-enrolled in the same plan starting January 1, 2019. Enrollment for new members is available at any time during the year, and coverage will be effective the first of the month following enrollment.

As in prior years, when new members enroll in one of our Dental Direct plans, we will waive the waiting period(s) if they can provide proof of prior comparable coverage that was effective within 60 days of the new enrollment. This proof of coverage can be obtained from the prior carrier or the member’s employer and provided to our sales team. Although dental customer service does not have the ability to waive the waiting period, our membership department can verify prior coverage. Please call membership at (401) 459-5550.

If you would like 2019 Dental Direct brochures to display in your office, please email dentalbrochures@bcbsri.org with your office name and address, as well as the quantity you would like, and we will mail these directly to you.
Electronic Funds Transfer (EFT) Option

You may have received a notice recently about the benefits of receiving your BCBSRI claims payment via electronic funds transfer (EFT). Not only does this direct deposit payment provide obvious administrative efficiencies by reducing paper and giving you faster access to this information, it also improves security by reducing the chance of lost or stolen checks with dental explanation of benefits (DEOBs). It also reduces the risk of exposure of protected health information (PHI), including personal identification. If you currently receive paper checks and DEOBs from BCBSRI, consider this option.

“My Patient’s Benefits” Updates

We are continually working to improve your online experience with us! You will notice the following enhanced features when accessing your patients’ benefits using our provider portal:

- **Claim status** – We now offer more detail about why a claim is pending and a link to development requests, if applicable.
- **Check status** – In addition to seeing basic payment information related to a claim, you will now be able to confirm the payment status. A link to the EOB associated with a claim is also now included on the payment information line. This is the same information available under Payments and EOBs, but now you can see all of the claim information in one place.

Submit Predeterminations Online

Our provider portal is the easiest, fastest, and most secure way to finalize a predetermination to guarantee payment within the current payment cycle. If you are still completing and mailing the paper form, try the online option today! Simply log on to [https://www.unitedconcordia.com/dental-insurance/dentist/](https://www.unitedconcordia.com/dental-insurance/dentist/) and select “Add Date of Service to a Predetermination” (located on the Claims tile). Enter the Predetermination Claim Number and Date of Service to complete the process.

If you are not currently enrolled to access our provider portal, go to [https://www.unitedconcordia.com/dental-insurance/dentist/](https://www.unitedconcordia.com/dental-insurance/dentist/) to enroll, and start taking advantage of these new features.

Current Dental Terminology – 2019 Update

The American Dental Association has released its 2019 update to the Current Dental Terminology. The Blue Cross Dental policy for the new coding can be found [here](https://www.unitedconcordia.com/dental-insurance/dentist/). In addition, all Blue Cross Dental clinical guidelines can be referenced on our [Dental Provider Resources page](https://www.unitedconcordia.com/dental-insurance/dentist/).
FEP Blue Dental

In July 2015, Blue Cross Dental participating dentists were mailed an opt-out announcement advising that federal and postal employees in Rhode Island were able to choose comprehensive dental coverage through the Blue Cross and Blue Shield Association. This plan, called FedVIP Dental, or FEP Blue Dental, uses a nationwide dental network called the GRID. These services are reimbursed according to Blue Cross Dental’s reimbursement levels.

FEP Blue Dental is different from the Basic and Standard FEP dental benefit available in a federal employee’s medical plan. Federal and postal employees have medical coverage that includes minimal dental benefits. In addition to their medical coverage, these federal employees have a variety of insurance carriers from which they can select additional, comprehensive dental benefits. We are pleased that a dental plan offered by Blue Cross & Blue Shield of Rhode Island is a choice for these employees and their families.

IN EVERY ISSUE:

Other Medicare News

CMS now requires all carriers offering a Medicare Advantage network (including our BlueCHiP for Medicare Dental products) to comply with new regulations pertaining to provider directories. As a result, Blue Cross Dental will be contacting you quarterly, via our partner VIIAD, to verify the information we have on file. Please be aware that a separate letter will be sent to each location on file. Please indicate any necessary corrections to the information for your specific office and return per the directions on the form.

Dental Provider Resources

When we have updates to share with your office, we will send them right to your email inbox. However, to view past updates and previous editions of Dental Connections, please visit our Dental Provider Resources page. Bookmark this page to your browser. You also will find all the Blue Cross contact information you need conveniently located in one location, at your fingertips.

If you would like to add anyone in your office to our email list so they can receive our updates and Dental Connections too, you can do that here.

Credentialing/Recredentialing/Practice Changes

As a reminder, BCBSRI maintains the Rhode Island participating provider database. Our claims processing and customer service partner, United Concordia Dental, does not update Rhode Island provider practice information. If a provider who already participates with Blue Cross Dental joins your practice, or your practice information is changing, simply fax a completed Practitioner Change Form, along with a W-9, indicating the new office location, to (401) 459-2099 or email provdb@bcbsri.org.

We always welcome new dentists to our network who deliver outstanding care to our members. If a dentist would like to participate with Blue Cross Dental, please visit the Become a Participating Provider page on bcbsri.com and fill out the required fields to initiate the credentialing process.
Blue Cross Dental Contact Information

Claims submission address:
Dental Claims Administrator
P.O. Box 69427
Harrisburg, PA 17106-9427

Claims submission address for FEP:
Blue Cross & Blue Shield of Rhode Island
500 Exchange Street
Providence, RI 02903

Dental Director: Yvonne M. Wolny, D.M.D. – (401) 459-2036

For claims, eligibility, and benefits:
Monday through Friday, 8:00 a.m. to 8:00 p.m.
(401) 453-4700
Outside of RI: 1-800-831-2400

For FEP claims, eligibility, and benefits:
Monday, Wednesday, Thursday, and Friday: 8:15 a.m. to 4:30 p.m.; Tuesday: 9:15 a.m. to 4:30 p.m.
(401) 831-0153
Outside of RI: 1-800-377-4418

For provider/network support:
Stephanie Santoro, RDH, Dental Network Manager – (401) 459-5745

For member enrollment: (401) 459-5550 or 1-855-690-2583

You may also direct your patients who need service to our Your Blue Store™ locations Monday through Friday, from 9:00 a.m. to 5:00 p.m.:

   East Providence – Highland Commons, 71 Highland Avenue
   Lincoln – Lincoln Mall Shopping Center, 622 George Washington Highway
   Warwick – Cowesett Corners, 300 Quaker Lane
   Your Blue Stores main line: (401) 459-2200
   Your Blue Stores page: www.bcbsri.com/yourbluestore