

PREGNANCY HORMONES AND
PERIODONTAL DISEASE
FLU SEASON 2019-2020

TIMELY CLAIM SUBMISSION
SAFEGUARDING PHI
IMPORTANT INFORMATION



VOLUME 5, Q4 | WINTER 2019

CDT 2020 Updates Announced



Pregnancy Hormones & Periodontal Disease

Pregnant women are at higher risk for periodontal disease due to the high progesterone levels. This hormone causes inflammation of blood vessels in the gum tissue. We are more likely to see bleeding on probing. This is also known as pregnancy gingivitis. Warning signs to look for are swelling, bleeding, redness, and sensitivity to gum tissue. Occasionally we see overgrowths of gum tissue called "pregnancy tumors" and they usually appear during the second trimester. Pregnancy tumors are benign and not cancerous. In these situations, tumors mean nothing more than swelling or overgrowth. They are usually found between teeth and believed to be caused by extra dental bacterial plaque. They bleed easily and are identified by their red, raw-looking mulberry like surface. They typically resolved themselves after the pregnancy or can be surgically removed. There have been multiple studies showing a link between preterm delivery and the

presence of periodontal disease in the pregnant women. The research suggests the bacteria in plaque can reach the placental tissue and trigger inflammatory responses which results in release of substances into the bloodstream which may cause preterm labor. There is also a positive correlation between severe periodontal disease and an increase in blood pressure during pregnancy-defined as pre-clamsia. These studies

suggest that periodontal disease may cause stress on the blood vessels of the mother, placenta, and fetus.

Pregnancy Benefits

Most Medicaid plans have benefits for Medicaid recipients. We understand the importance of overall health for mom and baby. A few reminders for our providers- treatment is recommended in the second trimester.

It is always important to have a medical clearance from the OBGYN to ensure safety for mom and baby. Routine care can be done at any time during pregnancy. The use of Nitrous Oxide, Diapepam and Tetracycline should be strictly avoided in pregnant woman.

Contact us with any other questions.



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INTERNET ACCESS

www.libertydentalplan.com

- Verify Member Eligibility
- View Member Claims Submission
- Review Member Benefit Plans
- Submit Claims, Pre-Estimates and Referrals

PROFESSIONAL SERVICES

- Contracting
- Provider Education

TOLL FREE TELEPHONE:

California.....	800.268.9012
Florida.....	888.352.7924
Nevada.....	888.700.0643
New Jersey.....	833.276.0854
New York.....	833.276.0853
All other States.....	888.352.7924

TOLL FREE FAX:

California.....	800.268.0154
Florida.....	888.334.6034
Nevada.....	888.401.1129
All other States.....	888.401.1129



ACCREDITED
Dental Plan
Exp. 07/01/2022

CA Medicaid HMO and Marketplace HMO, NV & FL Medicare, Marketplace, Medicaid and Commercial HMO, EPO, PPO and POS.

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OUR MISSION

LIBERTY Dental Plan is committed to being the industry leader in providing quality, innovative, and affordable dental benefits with the utmost focus on member satisfaction.

Flu Season 2019-2020

The Centers for Disease Control and Prevention (CDC) encourages a yearly flu vaccine as an important step in preventing influenza and its complications. While the vaccine may not completely protect against all flu viruses, studies indicate that even if someone gets sick after being vaccinated, the illness may be milder. LIBERTY encourages its providers to talk to members about the importance of the flu vaccine, along with other preventive measures such as frequent handwashing, limiting close contact with sick people, and disinfecting all surfaces that may be contaminated with influenza and other microbes.



For more information, visit the CDC's website at <https://www.cdc.gov/flu/consumer/prevention.htm>

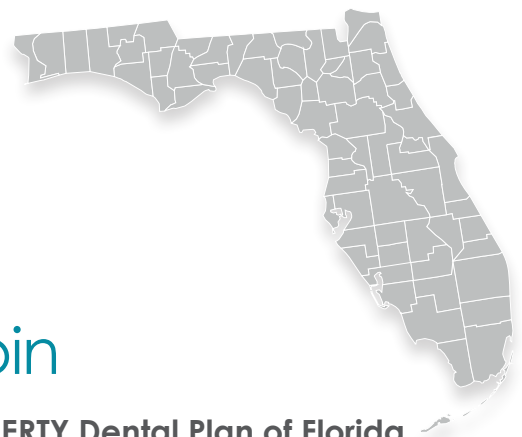
Dental Advisory Committee (DAC) Recruitment Florida

LIBERTY is seeking providers in the state of Florida to participate on the **Dental Advisory Committee (DAC)**. The DAC allows LIBERTY's key personnel to obtain valuable feedback and recommendations directly from our contracted provider network. This is your opportunity to interact with LIBERTY's staff and effectuate the development of program policies and initiatives, as well as gain transparency into the Plan's operations.

If you are interested in applying to join our DAC, or if you have any questions, please contact the Quality Management Department at QM@libertydentalplan.com.

LIBERTY appreciates your participation and values our partnership and our mutual goal to provide your patients and our members the highest quality oral health care.

We look forward to hearing from you.



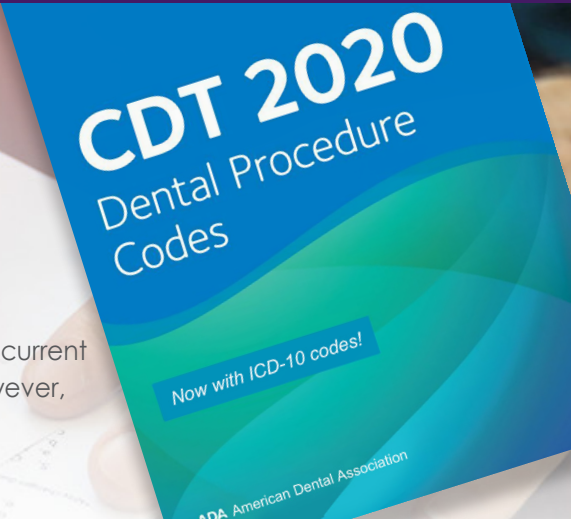
join

**LIBERTY Dental Plan of Florida
Dental Advisory Committee**

CDT 2020

Dental Procedure Codes Updates

The American Dental Association (ADA) has released the 2020 version of the Current Dental Terminology (CDT) Procedure Codes. Effective January 1, 2020, current CDT codes should be used when submitting claims to LIBERTY Dental Plan. However, based on specific state markets, the 2020 CDT codes updates may not apply.



CDT 2020
Dental Procedure
Codes

Now with ICD-10 codes!

ADA American Dental Association

CDT Code	Change Type	Description	Determination
PREVENTIVE			
D1510	Revision	Space maintainer – fixed, unilateral – per quadrant	
D1520	Revision	Space maintainer – removable – unilateral - per quadrant	
D1550	Deleted	Re-cement or re-bond space maintainer	Replaced with codes D1551, D1552 and D1553.
D1551	New	Re-cement or re-bond bilateral space maintainer, maxillary	This will be added to all plans that cover D1550. Patient copay/provider reimbursement same as D1550.
D1552	New	Re-cement or re-bond bilateral space maintainer, mandibular	This will be added to all plans that cover D1550. Patient copay/provider reimbursement same as D1550.
D1553	New	Re-cement or re-bond unilateral space maintainer, mandibular	This will be added to all plans that cover D1550. Patient copay/provider reimbursement same as D1550.
D1555	Deleted	Removal of fixed space maintainer	Replaced with codes D1556, D1557 and D1558.
D1556	New	Removal of fixed unilateral space maintainer, per quadrant	This will be added to all plans that cover D1555. Patient copay/provider reimbursement same as D1555.
D1557	New	Removal of fixed unilateral space maintainer, maxillary	This will be added to all plans that cover D1555. Patient copay/provider reimbursement same as D1555.
D1558	New	Removal of fixed unilateral space maintainer, mandibular	This will be added to all plans that cover D1555. Patient copay/provider reimbursement same as D1555.
D1575	Revision	Distal show space maintainer - fixed, - unilateral - per quadrant	
RESTORATIVE			
D2753	New	Crown, porcelain fused to titanium and titanium alloys	This will be added to all plans that cover D2750. Patient copay/provider reimbursement same as D2750.
PROSTHODONTICS (REMOVABLE)			
D5284	New	Removable unilateral partial denture, one-piece flexible base, per quadrant	This will be added to all plans that cover D5283. Patient copay/provider reimbursement same as D5283.
D5286	New	Removable unilateral partial denture, one-piece resin, per quadrant	This will be added to all plans that cover D5283. Patient copay/provider reimbursement same as D5283.
IMPLANT SERVICES			
D6082	New	Implant supported crown, porcelain fused to predominantly base alloys	This will be added to all plans that cover D6067. Patient copay/provider reimbursement same as D6067.
D6083	New	Implant supported crown, porcelain fused to noble alloys	This will be added to all plans that cover D6067. Patient copay/provider reimbursement same as D6067.

(Continued on page 5)

CDT 2020 Codes Updates

CDT Code	Change Type	Description	Determination
D6084	New	Implant supported crown, porcelain fused to titanium and titanium alloys	This will be added to all plans that cover D6067. Patient copay/provider reimbursement same as D6067.
D6086	New	Implant supported crown, predominantly base alloys	This will be added to all plans that cover D6067. Patient copay/provider reimbursement same as D6067.
D6087	New	Implant supported crown, noble alloys	This will be added to all plans that cover D6067. Patient copay/provider reimbursement same as D6067.
D6088	New	Implant supported crown, titanium and titanium alloys	This will be added to all plans that cover D6067. Patient copay/provider reimbursement same as D6067.
D6097	New	Abutment supported crown, porcelain fused to titanium and titanium alloys	This will be added to all plans that cover D6067. Patient copay/provider reimbursement same as D6067.
D6098	New	Implant supported retainer, porcelain fused to predominantly base alloys	This will be added to all plans that cover D6067. Patient copay/provider reimbursement same as D6067.
D6099	New	Implant supported retainer for FPD, porcelain fused to noble alloys	This will be added to all plans that cover D6067. Patient copay/provider reimbursement same as D6067.
D6120	New	Implant supported retainer, porcelain fused to titanium and titanium alloys	This will be added to all plans that cover D6067. Patient copay/provider reimbursement same as D6067.
D6121	New	Implant supported retainer for metal FPD, predominantly base alloys	This will be added to all plans that cover D6067. Patient copay/provider reimbursement same as D6067.
D6122	New	Implant supported retainer for metal FPD, noble alloys	This will be added to all plans that cover D6067. Patient copay/provider reimbursement same as D6067.
D6123	New	Implant supported retainer for metal FPD, titanium and titanium alloys	This will be added to all plans that cover D6067. Patient copay/provider reimbursement same as D6067.
D6195	New	Abutment supported retainer, porcelain fused to titanium and titanium alloys	This will be added to all plans that cover D6067. Patient copay/provider reimbursement same as D6067.
PROSTHODONTICS (FIXED)			
D6243	New	Pontic, porcelain fused to titanium and titanium alloys	This will be added to all plans that cover D6240. Patient copay/provider reimbursement same as D6240.
D6753	New	Retainer crown, porcelain fused to titanium and titanium alloys	This will be added to all plans that cover D6750. Patient copay/provider reimbursement same as D6750.
D6784	New	Retainer crown $\frac{3}{4}$, titanium and titanium alloys	This will be added to all plans that cover D6780. Patient copay/provider reimbursement same as D6780.
ORAL & MAXILLOFACIAL SERVICES			
D7922	New	Placement of intra-socket biological dressing to aid in hemostasis or clot stabilization, per site	Payable with narrative.
ORTHODONTICS			
D8691	Deleted	Repair of orthodontic appliance	Replaced with codes D8696 and D8697.
D8692	Deleted	Replacement of lost or broken retainer	Replaced with codes D8703 and D8704.
D8693	Deleted	Re-cement or re-bond fixed retainer	Replaced with codes D8698 and D8699.
D8694	Deleted	Repair of fixed retainers, includes reattachment	Replaced with codes D8701 and D8702.

(Continued on page 6)

CDT 2020 Codes Updates

CDT Code	Change Type	Description	Determination
D8696	New	Repair of orthodontic appliance, maxillary	This will be added to all plans that cover D8691. Patient copay/provider reimbursement same as D8691.
D8697	New	Repair of orthodontic appliance, mandibular	This will be added to all plans that cover D8691. Patient copay/provider reimbursement same as D8691.
D8698	New	Re-cement or re-bond fixed retainer, maxillary	This will be added to all plans that cover D8693. Patient copay/provider reimbursement same as D8693.
D8699	New	Re-cement or re-bond fixed retainer, mandibular	This will be added to all plans that cover D8693. Patient copay/provider reimbursement same as D8693.
D8701	New	Repair of fixed retainer, includes reattachment, maxillary	This will be added to all plans that cover D8694. Patient copay/provider reimbursement same as D8694.
D8702	New	Repair of fixed retainer, includes reattachment, mandibular	This will be added to all plans that cover D8694. Patient copay/provider reimbursement same as D8694.
D8703	New	Replacement of lost or broken retainer, maxillary	This will be added to all plans that cover D8692. Patient copay/provider reimbursement same as D8692.
D8704	New	Replacement of lost or broken retainer, mandibular	This will be added to all plans that cover D8692. Patient copay/provider reimbursement same as D8692.
ADJUNCTIVE GENERAL SERVICES			
D9997	New	Dental case management, patients with special health care needs	Patient has documented special need that requires Dental case management.

business



Timely Claim Submission

As a participating provider, you are required to submit within your provider contract designated time frame from the **date of service** (DOS) unless otherwise specified within the provider contract.

Timely filing with correct codes ensures timely payment. The following outlines tips to avoid exceeding timely filing submissions:

- Compare your submitted claim reports with your postings of payments or denials each month;
- Please utilize the LIBERTY Provider Portal to verify claim status to ensure your claim was received and/or adjudicated on time;
- Late claims and replacement claims must meet the same timely filing submission guidelines as the services on the original claim;
- Providers are required to resubmit claims within your provider contract designated time frame to keep the claim within the timely filing period even if the claim denies; and
- An inquiry does not extend or suspend the timely filing requirement.

False Claims Act

LIBERTY would like to remind you that there is significant risk for dental practices that violate the False Claims Act. Billing Medicaid, Medicare, Managed Care plans and other governmental agencies under the name and NPI of another provider is considered fraudulent. All dental services are to be billed under the correct billing and rendering provider, unless specific state or federal regulations allows for exception.

Providers and their employees can be subject to civil monetary penalties of \$5,500 to \$11,000 for each false claim submitted. They can be required to pay three times the amount of damages sustained by the

United States government including imprisonment, and you may also be excluded from participation in Medicare and Medicaid. Some states also impose additional fines.

If you become aware of a potential billing problem, it is important to act swiftly to review the matter and take appropriate action.

You may access further information on the False Claims Act at the following links:

False Claims Act <https://www.taf.org/>
The Centers for Medicare and Medicaid Services <https://www.cms.gov/>

Grievance & Appeals

Dental Records Availability

LIBERTY would like to remind our contracted dentists of the importance, and contractual obligation, in making available copies of all member records to the Plan, upon request.

Copies of all member records must be provided to LIBERTY within three business days of issuance of a notice letter. LIBERTY ensures that all records obtained are handled only by authorized staff. LIBERTY may request dental records for the following:

- Routine Chart Review
- Grievance resolutions
- Appeal resolutions
- Second opinions
- State/Federal Compliance
- To assist a member in understanding recommended treatment and co-payments

It is important to note that all members have the right to file a grievance, appeal or second opinion. It is LIBERTY's responsibility to provide a response to that member's concerns. In order for the Plan to complete an unbiased review, we need to request a copy of the member's full dental records.

As a LIBERTY contracted dentist, you have agreed to cooperate with the Quality Management Department, including providing copies of full member records to

the Plan at no cost and within the allotted time frame instructed. Failure to respond and provide all requested member records to the Plan in a timely manner will result in disciplinary actions, including but not limited to, monetary compensation in favor of the member, transfer of enrollment, closure to new enrollment or incases of continued non-compliance, termination by the Plan.

Member Dental Records

LIBERTY contracted providers are required, and contractually obligated, to maintain member dental records in compliance with applicable state and federal regulations. Copies of complete member dental records for active and/or inactive patients must be accessible for a minimum of 10 years, even if the facility is under new ownership or is no longer under contract. Providers must have confidentiality policies to ensure privacy and security provisions according to the Health Insurance Portability and Accountability Act (HIPAA).

All dental records must be comprehensive, organized and legible. All entries should be in ink, signed and dated by the treating dentist or other licensed health care professional who performed services. The names and amounts of all local anesthetics must be documented. All appropriate informed consent documentation that is signed and dated by the member for the specific treatment plan accepted must be included.

Cultural Competency Corner

LIBERTY has worked arduously to develop a comprehensive and culturally inclusive program that will benefit both you as a provider and every member serviced within our networks. Below are some quick tips to ensure full compliance with LIBERTY's Cultural Competency Program:

- Be sure to record the member's preferred language in their record.
- When a member with a preferred language other than English refuses interpretation services, document it in their chart.

LIBERTY strongly discourages the use of friends, family and particularly minors as interpreters. To access telephonic interpreting services for LIBERTY members, please call **888.352.7924**.

Working with an Interpreter

LIBERTY understands that many providers have taken part in very few interpreted conversations, and it can be difficult to imagine how such a meeting is conducted. Below are some simple things to keep in mind that will help you work effectively with a language interpreter and ensure good communication with your patient:

Language Interpretation

- Remember that your main conversation is with the patient, not the interpreter. Be sure to address the patient directly and face them rather than the interpreter.
- Talk to the patient in the first person as you would if you were directly communicating with them. You do not need to talk through the interpreter, such as saying, "could you please ask him/her..."
- You can speak at a normal pace. However, it is helpful to the interpreter if you pause occasionally

after sentences or chunks of conversation. If you are quoting from written material, allow extra time and pause between sentences.

Sign Language Interpretation

- Be sure that there is proper lighting as the interpreter needs to be visible to the patient for effective communication.
- Maintain eye contact and speak directly to the patient. Since the patient will

be looking at the interpreter while you are speaking, it is useful if the interpreter sits or stands close to you.

- In order to have a more accurate interpretation, allow enough time for the interpreter to convey the full message. Wait for a response before talking again.
- Clarify any unique vocabulary such as acronyms and technical terms. It is recommended to use short, simple sentences.
- Avoid asking the interpreter for opinions or comments about the content of the

meeting or information about the patient. Interpreters follow a code of ethics that requires impartiality and confidentiality with all assignment related information. Do not assume that the interpreter has prior knowledge of the patient or will be interpreting future appointments.

- Be aware that sign language interpreting is physically and cognitively demanding. Assignments of an hour or more in length that are technical or non-stop may require occasional breaks.

be in the know

LIBERTY's Quick Tip: CA Medicaid

Did you know that it is required by the Department Health Care Services (DHCS) as a part of their Cultural Competency Program to note the member's preferred language in the member's record?

For continued compliance, be sure to incorporate this into your office's patient information checklist.

Safeguarding PHI- Important Reminders

As a dental provider, your office is fully aware that the Health Insurance Portability Accountability Act (HIPAA) requires the protection and confidential handling of patient Protected Health Information (PHI). HIPAA requires health care providers to develop and implement safeguards that ensure the confidentiality and security of all forms of PHI (whether electronic, verbal, or tangible) when transmitted or stored. Failure to properly safeguard PHI can result in breaches, enforcement actions and significant monetary penalties and, as it concerns LIBERTY members, is a violation of LIBERTY's provider agreement.

Please take this opportunity to review your office's privacy and security practices to ensure they comply with HIPAA requirements, and take note of the below reminders regarding safeguarding LIBERTY Member PHI. If we discover you have transmitted LIBERTY member PHI via a potentially non-secure method, or if we are otherwise notified that you may not be properly safeguarding such PHI, we will contact you to investigate the matter. Non-compliance will

result in a Corrective Action Plan and continued or egregious non-compliance will result in contract termination.

► **Electronic PHI** - ensure referrals, authorization requests, medical records and other e-PHI are transmitted in a HIPAA compliant manner using secure fax, secure FTP, encrypted email (which requires recipient authentication to access email content), or LIBERTY's secure web portal.* Note the following:

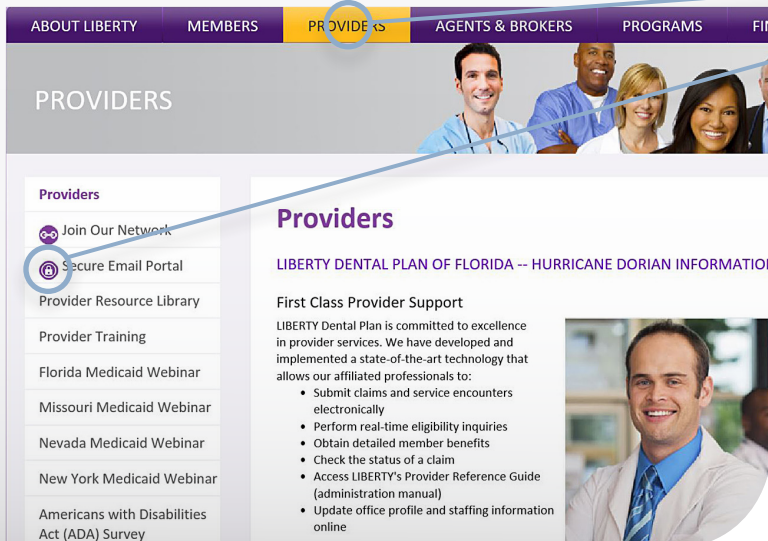
- Use of PHI (including member name, ID, or other identifying information) in the subject lines of emails or to name e-files is **not** permitted.
- Use of free email service providers, like Gmail, Hotmail, or Yahoo, is **not** a permitted method for transmitting LIBERTY Member PHI*.
- Transmission of PHI via text is **not** permitted*.
- LIBERTY providers may transmit e-PHI to LIBERTY using LIBERTY's HIPAA compliant, secure web portal by following these simple steps:

- Go to www.libertydentalplan.com
- Go to **Provider menu** at top of the page
- **Select Secure Email Portal**

• Use physical and technical safeguards to ensure that monitors cannot be viewed by unauthorized individuals, and that screens automatically lock on devices, after a reasonable period of inactivity.

• Maintain protocols to ensure faxes containing PHI are issued to the correct recipient, and that increased precautions are applied when faxing especially sensitive information (such as sensitive diagnoses).

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Safeguarding PHI- Important Reminders

**When transmitting a member's own PHI to the member, the member's written request to receive the PHI electronically through a method other than those listed above may be honored, provided that reasonable steps have been taken to validate the member's identity, and the potentially unsecure nature of the transmission has been disclosed to the member in writing in advance of the transmission.*

▶ **Verbal PHI** – do not discuss patients in public areas (including waiting rooms, hallways and other common areas), even if you believe you are masking the patient's identity. Ensure conversations within examination rooms or operatories cannot be overheard by those outside of the room. Use heightened discretion when discussing sensitive diagnoses or other sensitive matters, including when such discussions occur with the patient in an exam room or operatory. Best practices include:

- All PHI must be locked away during close of business (for example, in a locked cabinet).
 - Window blinds must be closed to prevent outside disclosure.
 - Mailing envelopes must not be overstuffed and mailing addresses must be printed accurately and clearly to minimize the possibility that mail is lost in transit.
 - When transporting tangible PHI take precautions to ensure it is not lost in transit, and do not leave tangible PHI in vehicles unattended.
- Implementing appropriate physical safeguards such as closed doors and insulated walls for exam rooms and operatories.
 - Implementing ambient music or white noise to cover conversations in common areas.
 - Arranging waiting areas to minimize one patient overhearing conversations with another.
 - Posting a sign requesting that patients who are waiting to sign-in or be seen, do not congregate in reception area.
 - Ensuring unauthorized persons cannot overhear phone calls and limiting what is communicated by phone and voicemail to the minimum necessary information to accomplish the required purpose. Avoid use of speaker phones.

▶ **Tangible PHI** – do not display or store paper or other tangible PHI in common areas. Do not leave such PHI unattended on desks or in exam rooms or operatories. Never dispose of paper or other tangible PHI in the trash. Use secure methods to destroy and dispose of such PHI (for example, cross-cut shredder).

