

Changes Coming to Medicare Advantage Plan Benefits in 2025

Increase in Calendar Year Maximums for BlueMedicare Plans

Effective Jan. 1, 2025, the Medicare Advantage plans listed below will have higher calendar year maximums.

- The following BlueMedicare plans will change from a \$2,000 dental calendar year maximum to \$3,000:
 - Saver Choice (PPO)
 - Value (PFFS)
 - Preferred (PFFS)
 - Premier Choice (PPO)
 - o Freedom Giveback (PPO)
 - Premier (HMO)
 - Independence (HMO)
- The Classic Plus (HMO) plan will change from a \$2,000 dental calendar year maximum to \$3,500

Dental Xtra No Longer Included in Medicare Advantage Plans

Also, effective Jan. 1, 2025, Dental XtraSM benefits will no longer be covered in Medicare Advantage (MA) plans. Beginning in January, members who enrolled in the program prior to Jan. 1 will no longer have access to the program's benefits. Please update your practice management systems to reflect this change for patients enrolled in the program through their MA plans.

Please refer to the table on the next page for an overview of dental services covered in BlueMedicare plans. For a *complete* list, please visit MyDentalCoverage.

	H3554-002 - BlueMedicare	H3554-007 - BlueMedicare	H6158-001 - BlueMedicare		
	Saver Choice (PPO)	Premier Choice (PPO)	Premier (HMO)		
	H4213-019 - BlueMedicare				
	Value (PFFS)	H3554-011 - BlueMedicare Freedom Giveback (PPO)	H6158-003 - BlueMedicare	H9699-007 - Blue Medicare	
Product	H4213-017-001			Classic Plus (HMO)	
	H4213-017-005		Independence (HMO)	Classic Flus (Flivio)	
	H4213-017-006		independence (riivio)		
	BlueMedicare Preferred				
	(PFFS)				
Member Cost	Preventive = \$0				
	Comprehensive = 20% INN / 50% OON				
Deductible	\$0				
CYM	\$3,000 \$3,500				
Preventive					
Exam	2 per calendar year				
Cleaning	2 per calendar year				
X-Ray	1 set per calendar year				
Fluoride Treatment	2 per calendar year				
Comprehensive					
Extraction	Unlimited				
Crown		1 per calendar year			
Filling	1 per calendar year	2 per cale	endar year	1 per calendar year	
Root Canal		1 per calendar year			
Denture	1 set every 5 years				
(complete or partial)					
Denture Adjustment	2 per calendar year	1 per calendar year			
Denture Repair	2 per calendar year				
Deep Cleaning / Root	1 per quadrant per				
Planing	24-month period				
Full Mouth Debridement	1 every 3 calendar years				

Arkansas Blue Cross and Blue Shield Federal

Availity is the medical clearing house for Arkansas Blue Cross and Blue Shield. Federal Blue Cross is a medical payer that allows a small embedded dental benefit paid by the medical plan. If at any point you need assistance with the setup or navigation of the Availity portal, you can access the training tools, including several helpful demo videos, on their website site under *Help and Training*. For additional assistance, please refer to the <u>Availity Support</u> document, or you can create a help ticket by calling Availity at 800-282-4548. You will be asked to provide the document case number.

If you are new to Availity:

You will need to allow a few days for Availity to authenticate your account before you can complete setting up your account. You will need to do the following:

- 1. Ensure your portal is set up correctly with the following:
 - a. Assign roles needed for 837D and 837P claims, 835 electronic remittances, 276/277 claim status. (without taking action, you already have access to 270/271 eligibility).
 - b. Register your organization in Availity.
 - c. Set up your provider under Manage My Organization.
 - d. Set up your <u>clinic</u> as a provider under the *organization*. This step is required to enroll your practice as the *billing provider*. Please note that when filing a dental claim in Availity, you will NOT use the individual provider as the billing provider; this will cause routing errors.

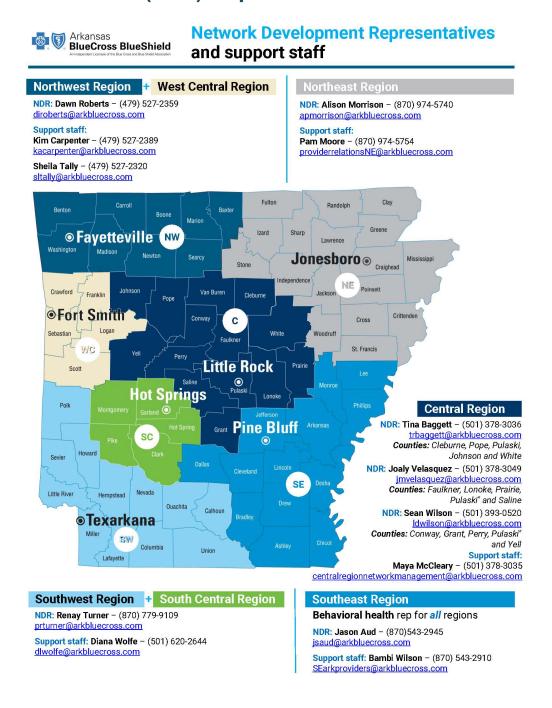
Arkansas Blue Cross no longer accepts the ADA claim form. On the electronic claim, 827d, providers should bill using their Type 2 NPI in the *Billing (dentist) Provider* section of the claim if your provider has registered for one. You should have a Type 2 if you have more than one provider in the practice. If you don't have more than one provider

and still choose to use a Type 2 and experience claims issues, email us at providernetwork@arkbluecross.com to ensure that the Type 2 NPI is set up properly in the system. If you do not have a Type 2 NPI, use the Type 1 NPI in the Billing (dentist) Provider section and the Rendering/Treating (dentist) Provider section of the claim.

2025 Dental Fee Schedules Are Now Available

The 2025 <u>dental fee schedules</u> are now available on our website. Please note that not all codes are covered benefits. We recommend visiting MyDentalCoverage to verify patient eligibility and benefits.

Medical and Federal (FEP) Representatives



Quick Reference Guide



Quarterly Provider Audits

- Audits are conducted quarterly to ensure the accuracy of provider/practice data for the online provider directory
 and to help eliminate delays in claim processing.
- Providers will receive an email notification with instructions on how to verify their data is correct on the website,

NCQA Credentialing and Re-credentialing Standards

USAble Life follows NCQA Credentialing Standards for all new applicants and existing providers.

- Initial Credentialing for new applicants: Allow 60-90 days for processing.
- Re-credentialing is done through Verifpoint and is required every 36 months to meet the required NCQA standards.

Website	Provider Portal: Tools/Resources	
Please visit our website at arkansasbluecross.com Provider Resource Center Provider Manual COT Code Manual My Dental Coverage Medicare Advantage Claims and Benefit Information Provider Application My Dental Coverage Provider Details Dental Bulletin	Eligibility, Benefits and Claim Status Arkansas Blue Cross Blue Shield Plans (ABCBS) My Dental Coverage/My Patient's Benefits: MyDentalCoverage.com FEP Dental and the GRID (FEDVIP): bcbsfepdental.com Federal Employee Plans: fepblue.org	

Dental Xtra

Enhanced Dental Benefits program information

- Dental Xtra A program that provides at-risk members with additional dental benefits at no additional cost.
 - Qualifying conditions: Diabetes, Stroke, Coronary Artery Disease, Sjogren's Syndrome, Oral Cancer, Head and Neck Cancers, Pregnancy, End Stage Renal Disease, Chronic Obstructive Pulmonary Disease, or Metabolic Syndrome
 - Benefits: Do not count toward annual max, No deductible, co-payment or coinsurance is required.
 - Auto-Enrolled ABCBS plans with qualifying condition other than Pregnant are auto-enrolled.
 - Self-Enroll arkansasbluecross.com/members/dental-xtra/enroll

To confirm if your patient is enrolled in the program, call Customer Service at 1-888-223-4999 or verify on My Dental Coverage.

Customer Service Phone Number			
Claims Administrator (Includes Medicare Advantage)	888-224-5213		
Federal Employee Program (FEP)	800-482-6655		
FEP Dental	855-504-2583		
Electronic Claims	800-633-5430		
ECHO Health for Electronic Funds Transfer (EFT)	800-886-5913		
GRID Member Plans	Phone # on Member ID Card		
Availity	800-282-4548		
Availity Support (Escalated Calls. Must have ticket #)	855-822-2446		
EDI	501-378-2336		

Claims

Direct claim questions and issues to the phone number on the back of the Member's ID card or listed on the EOB. If customer service is unable to provide assistance, email us at dentalproviderrelations@usablelife.com with the reference number, claim, EOB, provider's NPI and any additional information that would help us identify the problem and provide a solution.

Medical Dental

Medical Dental Oral Surgery, Accidents, TMJ, Transplant Patients, Heart Valve Surgery Patients, Other Medical Conditions that Require Dental Treatments, Federal (FEP): Contact your local medical rep.

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Our Dental Network Managers Are Here to Help

Your dental network manager is available to help dental providers. Members may contact customer service by calling the phone number on the back of their member ID card. Please don't share your dental network manager's contact information with your patients. If customer service is unable to assist them, make sure to have a reference number available before contacting your dental network manager.

Contact Information			
Steven J. Seymour steven.seymour@usablelife.com			
USAble Life Attn: Dental Provider Relations P.O. Box 1650 Little Rock, AR 72203 dentalproviderrelations@usablelife.com Fax: 501-208-8302			

