Regence

Regence BlueCross BlueShield of Oregon is an Independent Licensee of the Blue Cross and Blue Shield Association

August 2009

Information for Regence BlueCross BlueShield of Oregon dental providers

DENTAL NEWS

www.or.regence.com/provider

# Save time by checking claims status and other information online

Many of you are using Regence Online Services for Providers for eligibility and claims status. Are you taking full advantage of this time- and cost-saving tool?

Beginning Sept. 1, Provider Customer Service and Provider Services staff will direct you to our online tool for routine claims status inquiries. The claims status feature includes the details you need to answer the majority of your claims status questions.

We understand that not all claims issues can be answered via our online tool; therefore, our Provider Customer Service specialists will continue to be available to investigate or research complex claims issues.

Regence Online Services for Providers allows your office to view the following information for your patients:

- Verify patient eligibility, including effective date of coverage
- View general benefits
- View copay amounts and the status of deductible and coinsurance maximum amounts
- View the status of submitted claims

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Reference #: Claim Docs-OR 920434183

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In addition, participating dental providers can:

- Review and respond to Regence member comments about their experiences with you
- Expand your individual profile page, including philosophy of care, practice areas of expertise, appointment availability, patient demographics, awards and other distinctions

### REGENCE ENCORE℠, EXPRESSIONS℠ AND RADIANCE℠

For members on these products you can view specific benefit details, benefit summaries or a complete benefit booklet in PDF format sorted by category.

### FEDERAL EMPLOYEE PROGRAM (FEP)

You can view the complete FEP benefit booklet by linking to the FEP Web site.

### BLUECARD® (OUT-OF-AREA)

Benefits are available based on the home Plan's submission.

In addition to Regence Online Services for Providers, you may request claims status via an electronic American National Standards Institute (ANSI) 276 Claim Status Inquiry transaction. Unlimited claims can be queried at one time and responses are received within minutes, saving your office valuable time. Learn more about electronic transactions in the Claims & Billing section of our *Provider Web Site*.

## Voicemail requirements

We require all of our employees to validate the security and appropriateness of the voicemail location at a provider's office prior to leaving a message that includes member information. Please assist our Health Insurance Portability and Accountability Act (HIPAA)-compliance efforts by clearly indicating the following information on each voicemail greeting your office has:

- Name of office staff person
- Name of provider or dental group

## Availity® real-time enhancements coming

Beginning later this month, registered users of Availity, LLC, our claims clearinghouse partner, will have real-time access to claims status and patient eligibility and benefits. Availity offers integration with most practice management systems to maximize the value of your existing software.

Availity's one-stop online access allows you and your staff to:

- Take care of day-to-day tasks more quickly
- Boost your overall productivity
- Allow more time to care for patients

There are no set-up fees, monthly fees or per-claim fees charged to providers. Standard health plan transactions available at no charge to health care providers include:

- 837 Health Care Claim
- 835 Remittance Advice
- 270/271 Eligibility Request and Response
- 276/277 Claims Status

Learn more about Availity and register at **www.availity.com/providers/**.

# New functionality enables members to search Enhanced Provider Profile information

Earlier this year, we expanded the functionality of the Enhanced Provider Profile feature by enabling members to sort, filter and compare dentists, physicians and other health care professionals based on data captured in the providers' profiles.

For the thousands of providers who have already enhanced their individual profile pages, this expansion gives them even greater opportunity to:

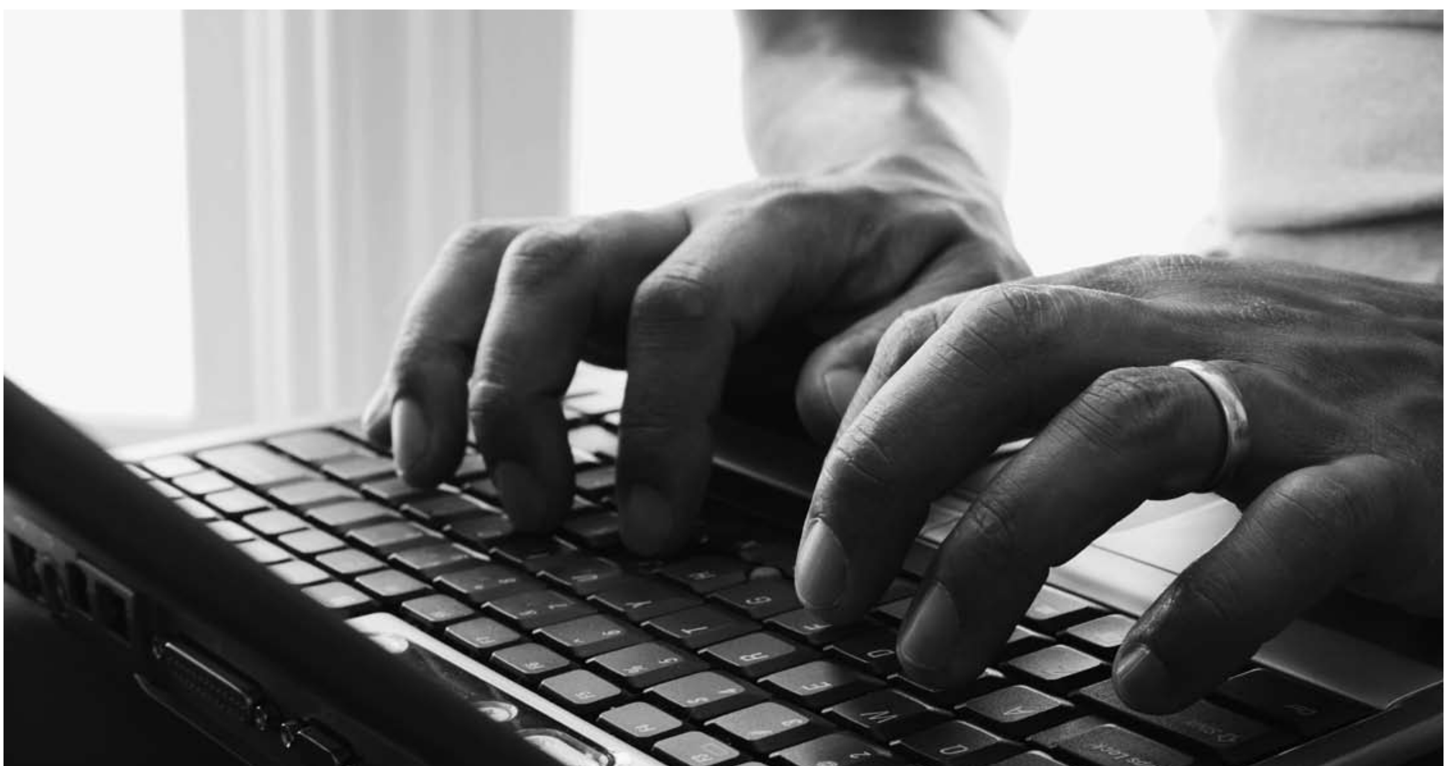
- Gain exposure to the more than 400,000 Regence members using **myRegence.com**
- Better align patients' needs with a provider's characteristics, which may result in improved provider-patient relationships
- Reduce office phone calls from members seeking information, such as office hours, appointment availability, parking or other details contained in the Enhanced Provider Profile
- Connect Regence members to a provider's practice Web site

We encourage you to complete your Enhanced Provider Profile as soon as possible to maximize the information available for member searches.

### SUBMIT YOUR ENHANCED PROVIDER PROFILE TODAY

We recognize that your time is valuable and have taken steps to ensure that it's quick and easy to enhance your individual profile page.

**To enhance your individual profile, you must have access to Regence Online Services for Providers.** If you already have access to this free, Web-based tool, you will find information for submitting your practice information on the home page. If you have not yet registered, we strongly encourage you to do so. More information about Regence Online Services for Providers is available on our *Provider Web Site*.



# Interactive voice response coming to Provider Customer Service

Our Provider Customer Service phone lines will be upgraded this year to include interactive voice response (IVR), a technology that enables a computer to accept voice commands or touch-tone inputs. IVR allows you to quickly and easily receive claims and member eligibility status by entering dates of service and the member number. Information about multiple members can be obtained in a single session.

The information will be a subset of the data already available through Regence Online Services for Providers. IVR will be an efficient and easy option for offices that do not have access to the Internet.

# Message codes for vouchers now available online

For your convenience, the message codes for our vouchers are now available in the Claims & Billing section of our *Provider Web Site*. These message codes appear on our Encore, Expressions and Radiance vouchers.

# Overpayment/Voucher Deduction Request Form now available online

Providers sometimes need to return funds to us for overpayments due to adjustments or incorrectly processed claims.

You may now submit an online Overpayment/Voucher Deduction Request Form to have these funds deducted from a future payment voucher. This form can be found on our *Provider Web Site*. Click on the printable portable data file (PDF), complete the form and fax or mail it to the address on the form.

You may submit this form if your office discovers an overpayment or in response to an overpayment notice from us. If we notify you of an overpayment, you have 30 days to submit the Overpayment/Voucher Deduction Request Form before the funds will automatically be deducted from a future payment voucher.

You can learn more about our Overpayment Recovery Process on our *Provider Web Site*.

## Regence Provider Center

The Regence Online Services for Providers name will change to Provider Center on Sept. 1. More information—including how to register, system hours and technical requirements, along with a recently revised tour—is available on our *Provider Web Site*.

# Personal health records help patients and you

More than 90,000 personal health records (PHRs) have been created through **myRegence.com**, our secure member Web site, since introducing the tool over a year ago.

PHRs help members:

- **Get organized** – Members save time with this portable, at-a-glance way to track their wellness visits, test results, medications, medical procedures, hospitalizations and immunizations.
- **Increase accuracy and efficiency** - Members can easily give you a detailed health care history and information about ongoing health conditions.
- **Ensure better care** – PHRs can improve communication between health care providers, allowing for a more coordinated care experience.

Members have the ability to:

- Download a copy of their PHR to an Excel file (previously available in PDF format only), allowing them to edit information and add data not otherwise captured
- Password-protect the Excel and PDF files for emailing to providers or storing on a computer

The PHR has also been updated with user-friendly terminology, including names and descriptions for health conditions and procedures.

Encourage your patients to take a few minutes to complete a PHR on myRegence.com.

# Consejeros Latinos continue to help Spanish-speaking members

We launched our Consejeros Latinos (Latino Concierge) program in 2007 as an effort to engage and educate the Latino community about health care coverage. Our bicultural and bilingual liaisons deliver support and assistance to those who need help navigating the health care system due to language and cultural barriers.

Each month, calls to our Consejeros Latinos increase and 99% are resolved within 24 hours. This program is available to all Regence members from 9 a.m. to 5 p.m. Pacific time, Monday through Friday.

If you have a patient who may benefit from this service, please encourage them to contact a Consejeros Latinos liaison:

- Regence Expressions, Encore and Radiance members: 1 (877) 280-3975
- All other members: 1 (888) 231-8359

Additional information, including a glossary of terms, is available online at **www.regence.com/spanish/index.jsp**.

# Contact Customer Service using our Secure Contact Form

You can use the Secure Contact Form to contact Provider Customer Service or BlueCard Customer Service with questions or issues. The form allows you to submit up to five dates of service per patient. We will respond to your query within 48 business hours. The forms are available in the Contact Us section of our *Provider Web Site*.

# Now available! Free Web-based claims submission service from Office Ally—"The EDI Solution"

With the Dental Ally program you are entitled to FREE claims submission services. Office Ally is a Health Insurance Portability and Accountability Act (HIPAA)-compliant national clearinghouse that offers free, Web-based transmission and tracking for CMS-1500, UB-04 and ADA J400-J404 claim forms.

Office Ally checks for correct dates, valid procedure and diagnosis codes, and standard HIPAA requirements. Claims are then promptly sent free of charge to health plans that accept electronic claims submissions. You can also choose, for a minimal fee, to have Office Ally mail any claims to health plans that don't accept electronic claims.

After your claims are validated and processed, Office Ally sends you an email confirmation receipt. In addition, you will receive a summary report detailing the accepted claims, as well as the rejected claims with an explanation.

With Office Ally's easy-to-use online claims submission, you can:

- Enter claims information directly into the browser tool or upload a file from most claims processing software
- See claims status and EDI responses for an entire file or a specific claim
- Search for claims using a variety of options, including date uploaded, patient name, insurance company, tax ID number, etc.
- Check the validity of CDT, ICD9, Place of Service and Modifier codes
- Fix your rejected claims by clicking on a rejected claim, making changes and hitting *Update*.

Office Ally's enrollment process is quick and easy. There are no contracts to sign or costs to providers or billers.

Enroll now at **www.OfficeAlly.com**. Simply click *Register* then *Enroll Now*. Or call the Office Ally Enrollment department at 1 (866) 575-4120, ext 702, to sign up for your Dental Ally account.

# Regence Online Services for Providers site administrator

The site administrator for a provider organization receives an email indicating that he or she must approve the activation of a new user's account for their provider organization once the new user has completed an online registration form. After approval is complete, the user will receive an email indicating that the account is active.

It is important to notify us when the person serving as the site administrator for the provider organization is no longer affiliated with that provider organization.

Notification can be made by using the Regence Online Services for Providers – Information Update Form found on our *Provider Web Site*.

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# Contact us

### We're here for you

We are dedicated to helping you. Please see the specific contact information below. Additional contact information is available in the Contact Us section of our *Provider Web Site*.

### Provider Customer Service

**General:** 1 (800) 722-5086 or (503) 225-6619

**BlueCard:** 1 (800) 448-0525 or (503) 225-5393

**Federal Employee Program (FEP):** 1 (877) 668-4654

**Encore, Expressions and Radiance:** 1 (800) 452-6333

**NEW Regence MedAdvantage:** 1 (877) 508-7362 or (503) 464-3000

***Provider Web Site***
**www.or.regence.com/provider**

### Dental Representatives

**Misty St. Amour, RDH**
(503) 225-6899 / 1 (800) 547-0939, ext. 6899
**mxstamo@regence.com**

Dental offices in the Portland metropolitan area, the north coast areas, and Vancouver, Washington

**Jackie Neufeld**
(503) 225-6995 / 1 (800) 547-0939, ext. 6995
**jrneufe@regence.com**

Dental offices from Wilsonville to California, western coastal areas, central and eastern Oregon

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