DELTA DENTAL®

Delta Dental of Michigan

Welcome to Delta Dental of Michigan

Thank you for your participation with Delta Dental of Michigan. You are important to us! Your commitment makes it possible for members to access affordable dental care and improve the oral health of the communities we serve. As your professional services representatives, we are available to answer your questions and help you understand the many benefits of participation in the Delta Dental networks.

Sincerely,

Delta Dental of Michigan Professional Services Team

Beth Anderson

Beth M Anderson

Samantha Carlton

Samantha Carlton

Rachael King

Rachael King

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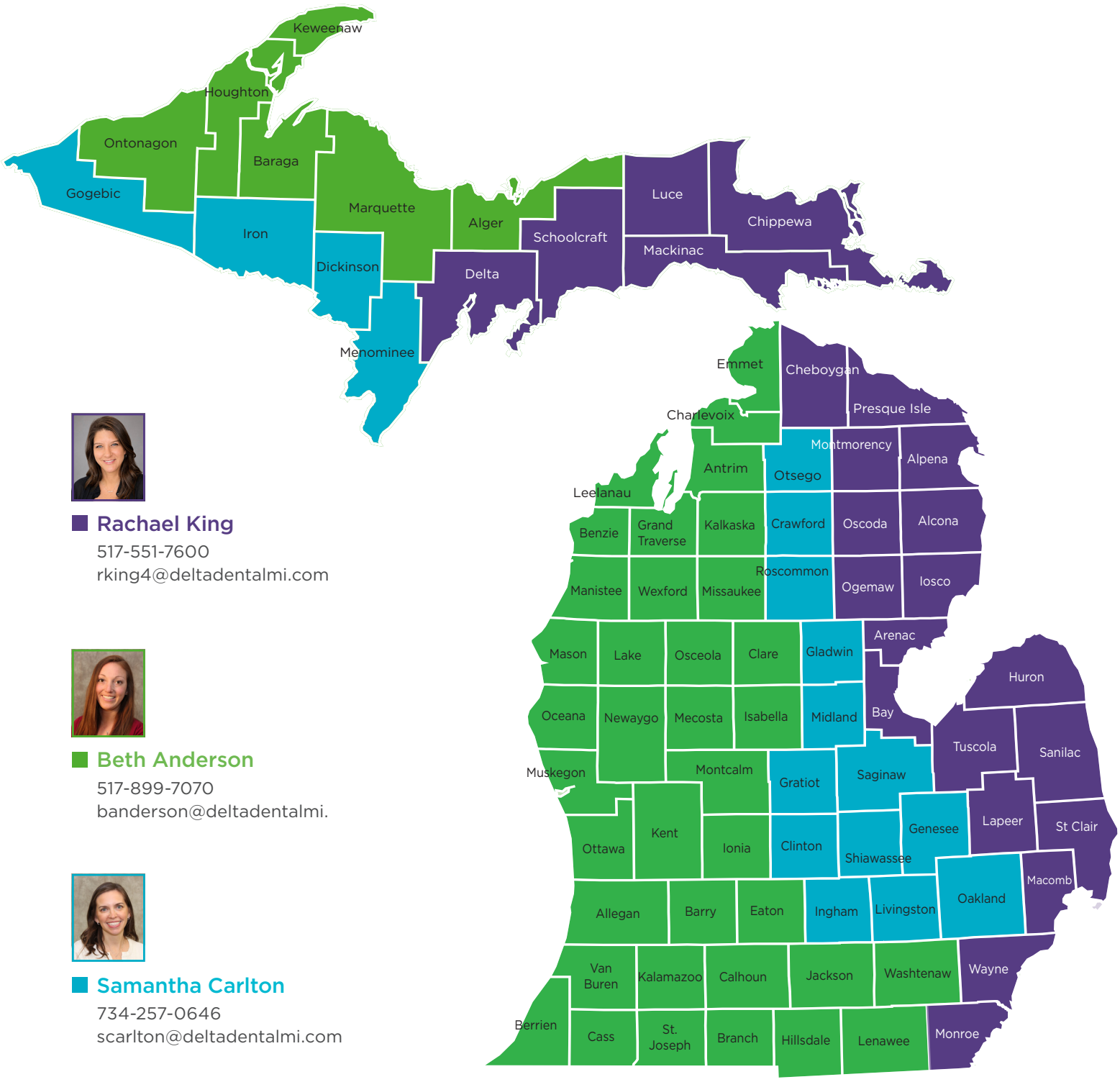
Michigan PR Representative Territories



Rachael King
517-551-7600
rking4@deltadentalmi.com

Beth Anderson
517-899-7070
banderson@deltadentalmi.

Samantha Carlton
734-257-0646
scarlton@deltadentalmi.com

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deltadentalmi.com
deltadentaloh.com
deltadentalin.com

Office resource guide

Credentialing

All Delta Dental participating providers are required to be fully credentialed prior to accepting Delta Dental benefit plans from a patient. To initiate credentialing, go to providerwebportal.com and register an account using the dentist's type 1 NPI. Once registered, log in and create a new application. Complete the application, uploading any required documents as prompted. For more information, see the **Provider Application & Credentialing Toolkit** guide. If you need assistance, contact your professional services rep or provider records.

Applications will be sent to committee for review within 30 days of receiving a fully completed application. Including all required documentation with the initial application will help streamline the application process. Credentialing decisions may take longer if information is missing or additional documents must be requested.

Recredentialing is required of all providers every 36 months. Delta Dental's provider records staff will reach out via email to initiate the recredentialing process.

Adding a provider

All providers being added to an office as a participating provider must first be credentialed. If the provider being added is already credentialed with Delta Dental, a **Provider Addition** form can be completed and returned to provider records. This form can be found in the forms section of Dental Office Toolkit™ (DOT). It can also be requested from your professional services rep or provider records.

Removing a provider

Delta Dental requires notification when a provider has left a practice. Please contact provider records, your professional services rep or complete a **Provider Removal** form found in the forms section of DOT to have a provider removed. This will not terminate the provider's network agreement at any other service office locations or tax identification numbers (TINs) not mentioned on the form.

Retirement or death

If your office experiences the loss of a provider due to retirement or death, and you need to add a doctor, please call provider records or your professional services rep as soon as possible.

All providers, including fill-ins, must be credentialed and added to each service office prior to accepting Delta Dental benefit plans from a patient. If the provider is already credentialed with Delta Dental, a **Provider Addition** form can be completed and returned to provider records to add them to the office.

Adding a new tax identification number (TIN)

To add a TIN, please complete the **Business Information** form. This form can be found in the forms section of DOT or can be requested from your professional services rep or provider records.

If the new TIN is taking place of an existing TIN due to sale of the business, retirement, etc., please send a request for closure of the TIN no longer being used with effective date, to provider records at **providerrequests@deltadentalmi.com**.

Closing a TIN

To close a TIN no longer being used for claims with Delta Dental, please send a request for closure along with TIN, reason for closure and effective date to **providerrequests@deltadentalmi.com**.

Name changes

All provider names must match the state licensing board. If an individual provider's name changes (e.g., marriage, etc.), the name must be changed with the state licensing board first. Once the state licensing board reflects the change, the provider can contact Delta Dental provider records to update the name.

To change a business name, email provider records at **providerrequests@deltadentalmi.com** and provide an updated W9 reflecting the change.

Contact information updates

To update service office contact information such as phone number, email address, mailing address, etc., please contact provider records at **providerrequests@deltadentalmi.com**.

Fee schedules

Fee schedules can be found on DOT. Each provider at each service office will have a fee schedule assigned based on the networks they are participating in. If you have questions regarding the fee schedules, please contact your professional services rep for assistance.

Direct deposit/electronic funds transfer (EFT)

The provider shall create/set up DOT and EFT accounts for each TIN to which the provider intends to direct their claim payments. The provider agrees to accept all Explanation of Benefits (EOBs) electronically through DOT. Tutorials on how to register can be found on the Delta Dental website at **deltadentalmi.com/DOT**. Any additional inquiries regarding direct deposit or EFT should be directed to Toolkit Support at 866-356-0301.

Contact numbers

Professional services representative:

Each office is assigned a professional services representative who can assist with any questions regarding your Delta Dental networks or agreements. Please see the territory map to locate your representative.

Provider records:

800-656-6495

Records staff can assist with credentialing inquiries, office contact information updates, provider additions/removals and tax ID changes.

Customer service:

800-524-0149

Customer service can assist with questions regarding claims. *For eligibility and benefits, please use DOT.*

Toolkit support:

866-356-0301

(IN, MI, OH, KY, NC, TN, NE, NM, MN, AZ, WI-CMS) Need help with DOT? Contact Toolkit Support for assistance.

While Local EFT lets you receive payments only from the Delta Dental member company you're contracted with, selecting National EFT as your direct deposit payment method means you can receive direct deposit payments from Delta Dental member companies nationwide.

Anti-fraud hotline:

800-524-0147 Suspect fraud? Report it to our anti-fraud hotline.

DELTA DENTAL®

Provider application and credentialing toolkit

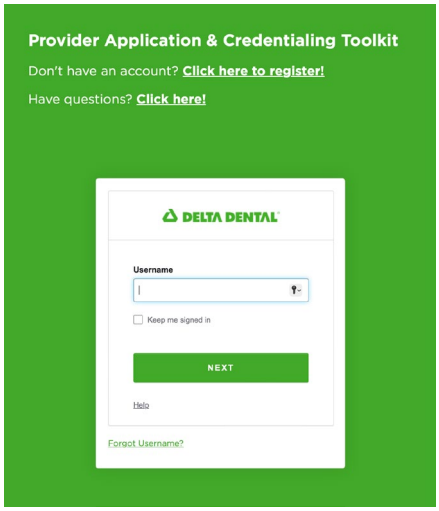
PACT works best using the **Chrome Browser.**
Head to **providerwebportal.com** to get started.

Creating an account

From the PACT home screen, navigate to the registration page (providerwebportal.com/pact-ui/registration) and enter your NPI number to create an account.

Be sure to adhere to the username and password requirements displayed in the ⓘ tooltip icon.

PACT accounts are managed separately from other Delta Dental Toolkit accounts. **Be sure to choose a unique username—this may require extra characters or numbers at the end of your username.**



Logging in and initiating an application

Head back to the login page (**providerwebportal.com/pact-ui/login**) and enter your newly created credentials.

To create a new application, click the *Create New Application* button and select the type of credentialing instance you would like to create.

Uploading documents

You will be prompted to upload documents throughout the application to verify your information. Select *Choose* or click and drag your file selection into the upload box.

PACT supports the following file types: *jpeg, png, gif, bmp, pdf, doc, docx, csv, txt, xls, xlsx*

Having trouble uploading? Try these tips:

- Remove any spaces from the file name.
- Attempt to upload the document a second time.
- Refresh your browser.

Submitting an application

Once all relevant fields have been filled and all documents have been uploaded, you can select *Submit for Approval* and complete the release to finish your credentialing instance.

For any questions or comments regarding the application process, please see our FAQ page (**providerwebportal.com/pact-ui/faq**) or reach out to your credentialing administrator.

- Submitted applications can be accessed via the *View* screen from the dashboard menu.
- Copies of your signed agreements can be retrieved via the *Download All* button on the *View* screen.

DELTA DENTAL®

Delta Dental of Michigan

Quick tips for participating dentists

1. Participating dentists receive payment directly from all Delta Dental member companies; assignment of benefits is automatic.

2. Participating dentists agree not to charge the member any amount in excess of Delta Dental's fee policy, but may collect the member's liability at any time during treatment. Checking eligibility prior to treatment will help ensure proper billing.

3. **On the Claim Payment Statement:**

- The fee listed in the **"submitted"** column is the amount billed to Delta Dental by the dentist.
- The fee listed in the **"approved"** column is the amount that the dentist is permitted to collect based upon Delta Dental's fee policy. If there is a difference between the submitted fee and the approved fee, the difference cannot be charged to the member and should be adjusted off the member's account.
- The fee listed in the **"allowed"** column is the amount used to calculate Delta Dental's payment. If there is a difference between the approved fee and the allowed fee, the amount of the difference is charged to the member. Usually, this indicates a non-covered or optional service, or it could indicate that a member has reached their annual maximum for the year. All claims should be submitted to Delta Dental within 12 months of the date of service, including non-covered services.

An approved fee is paid to the dentist based on their agreement with Delta Dental. Allowed fees are based on the member's plan and may result in additional charges to the member if allowed fees are less than approved fees.

4. If a service requires X-ray review, log in to DOT to submit your claim and attach X-rays, remarks and more. When entering a claim in the portal, you can upload electronic radiographs in the Claim Attachments section below treatment details. Please reference the program-specific Office Guide(s) located in the Forms section of DOT for additional X-ray submission requirements.

5

A private pay form is needed when billing non-covered services for Medicaid and/or Medicare Advantage plans. Forms are available here: **deltadentalmi.com/dentist/tools-resources/provider-forms**

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How to contact Delta Dental of Michigan:

- **Group plan customer service:**
  800-524-0149
- **Claims address:**
  Delta Dental
  PO Box 9085
  Farmington Hills, MI 48333-9085
- **Written inquiries:**
  Customer Service
  Delta Dental
  PO Box 9089
  Farmington Hills, MI 48333-9089
- **Medicare Advantage customer service:**
  800-330-2732
- **Healthy Kids Dental customer service:**
  866-696-7441
- **Michigan TriState Advantage customer service:**
  866-558-0280
- **Website:**
  deltadentalmi.com
- **Online claim submission, eligibility and benefits inquiries:**
  dentalofficetoolkit.com
- **Payor ID:**
  DDPMI

Payor IDs may differ if using a third-party administrator.

All customer service lines available Monday–Friday 8:30 a.m. to 8 p.m. for provider calls. Automated system is available 24/7.

DELTA DENTAL®

Are you using Dental Office Toolkit?

Purpose-built to streamline administrative tasks and improve overall efficiency within your practice, Delta Dental of Michigan's DOT is the MVP of the dental office.

Online claims submission

DOT offers convenient online claims submission, eliminating the need for manual paperwork. Submitting claims swiftly leads to faster processing times and improved cash flow while reducing administrative burden.

Real-time claim status

Dental offices gain access to real-time claim status updates, enabling them to track the progress of claims effortlessly. Instant feedback on claim status minimizes uncertainty and facilitates better financial planning for practices.

Eligibility verification

DOT offers eligibility verification functionalities, allowing dental offices to verify patients' coverage prior to treatment. Verification of eligibility helps prevent claim denials and ensures patients are aware of their coverage, reducing confusion and billing issues.

Fast, powerful tools

An array of tools are available in DOT, including: multi-factor authentication, a prior authorization system, procedure code search, fast and simple member search and the ability to get a member's complete dental history across all dental offices.

Electronic funds transfer (EFT)

DOT facilitates electronic funds transfer, allowing dental offices to receive payments directly into their designated bank accounts. This eliminates the need for manual check processing, accelerates payment cycles and improves cash flow management.

Pre-treatment estimates

Providers can request pre-treatment estimates and prior authorizations through DOT. Members benefit from the transparency regarding treatment costs, enabling informed decision-making and reducing unexpected expenses.

Claims attachments

DOT streamlines the process of attaching images to a new claims submission form, reducing both time for providers and Delta Dental staff who currently receive the physical images.

Provider training resources

Delta Dental provides comprehensive training resources within DOT, including tutorials, webinars and documentation designed to train staff and maximize the efficiency and effectiveness of DOT's features.

Mobile accessibility

The DOT website can be viewed on a mobile device, allowing providers to manage administrative tasks on-the-go. This enhances flexibility, efficiency and convenience.

Dental Office Toolkit (DOT)
TOP TIPS

1 JUST BROWSING

The latest version of DOT requires the use of the latest versions of Google Chrome and Adobe Acrobat Reader. Both programs can be downloaded for free and will ensure the best user experience.

2 WHAT'S IN A NAME?

When registering an account, a one-time passcode will be sent to the email address on file for you with Delta Dental. Once you've received your passcode, you must use a first and last name that is unique to the username you have chosen. For example, if ABC Dental with TIN 123456789 has usernames 'jsmith' and 'jsmithl', the system will require a unique first name and last name for each username (ex: first name: John, last name: Smith and first name: John, last name: Smithl). Tutorials and FAQs can be found by visiting deltadentalmi.com/DOT.

3 MULTI-FACTOR IDENTIFICATION

We care about protecting your data and have added an extra layer of security to all Delta Dental online accounts, include DOT. Multi-factor authentication (MFA) is a multi-step account login process that uses additional verification steps like email codes, security questions or fingerprints. Along with MFA, ensuring all users have unique logins that are not shared across the practice will increase security, proper user identification, monitoring and accountability within your practice.

4 ATTACH SECURELY

When submitting claims, the latest version of DOT allows for attachments to be included. You can upload attachments in the following formats: PNG, JPEG, TIFF, GIF, PDF. Word documents cannot be uploaded, but you can easily convert a Word document to PDF format. Maximum file size: 5MB | Accepted file types: PNG, JPEG, TIFF, GIF, PDF | Attachments per new claim: 10 files

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Visit deltadentalmi.com/DOT for the most updated information.

The difference between Medicare Advantage and Medicaid

What is the difference between Medicare and Medicaid? Medicare is health insurance primarily for anyone age 65 and older.

Medicare Advantage:

- **Is offered to anyone eligible for Medicare by private insurance companies**
- **Can offer health and dental benefits**

Medicaid

- **Is offered to those with limited income and resources who qualify and are enrolled**
- **Can offer health and dental benefits**

Note: Being a part of our Medicare Advantage Network will not enroll you as a Medicaid provider.

Medicare Advantage

When you sign on to participate in the Delta Dental PPO™, Delta Dental Premier®, or Delta Dental EPO™ networks, your Medicare Advantage patients plan are also Delta Dental of Michigan members.

A Medicare Advantage member who has Delta Dental PPO, Delta Dental Premier or Delta Dental EPO will have their claims processed using the same fee schedule as other members in your practice who have these plans. There is no separate fee schedule for Medicare Advantage plans.

Medicaid

Delta Dental's Medicaid networks are income-based programs offered through the State of Michigan and administered by Delta Dental. Participation in a Medicaid plan requires a separate agreement or addendum from providers to join. Each Medicaid network has a separate fee schedule for reimbursement.

Healthy Kids Dental (HKD) is a program offered through the Michigan Department of Health and Human Services and is administered by Delta Dental. It provides dental benefits to children who have Medicaid and are under the age of 21. Reimbursement to Delta Dental HKD participating dentists for services rendered to Delta Dental HKD members is based on the Delta Dental PPO fee schedule.

The Michigan TriState Advantage network serves Healthy Michigan Plan (HMP), adult Medicaid and Michigan Coordinated Health (MICH) members. These programs are offered through the Michigan Department of Health and Human Services and administered through health plans. Delta Dental partners with health plans to provide dental benefits to their populations..

DELTA DENTAL®

Expand knowledge with online CE courses at no cost

Delta Dental of Michigan is pleased to offer online continuing education (CE) programs. Each CE program contains course content, an assessment and a certificate of completion. Delta Dental Plan of Michigan, Inc. is an ADA CERP recognized provider. The courses are recognized by the State of Michigan Board of Dentistry.

Our course offerings continue to grow. Some topics include:

- Diabetes and oral health, water fluoridation
- Ethics and jurisprudence
- Fluoride
- How to complete an age 1 dental visit
- Human trafficking—modern day slavery
- Infection control
- Nutrition for oral and overall health
- Opioids, the opioid epidemic, and opioid use disorder
- Periodontal and peri-implant diseases and conditions

Many more topics are available. Go to **deltadentalmi.com/onlineeducation** for the full course list.

Who has access to these courses?

Any dentist, dental hygienist, dental assistant or dental office staff member who is a Delta Dental provider or works for a Delta Dental provider can take these courses at no cost.

How do I access these courses?

Visit **deltadentalmi.com/onlineeducation** and follow the steps outlined to register, set your password and get log in.

What is required to get my certificate for completing the courses?

You will watch an informational video on the topic you've selected before completing an assessment and evaluation. After you've completed these items, you will receive a certificate of completion.

How do I learn more?

Email ce@deltadentalmi.com for questions and support.

ADA C·E·R·P® | Continuing Education Recognition Program

Delta Dental Plan of Michigan, Inc. is an ADA CERP recognized provider.

ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry.

DELTA DENTAL®

Exclusive benefits for Delta Dental dentists

Dental Office Deals

Sponsored by Delta Dental

In partnership with the United Dental Alliance (UDA), Delta Dental is excited to offer the Dental Office Deals program to network dentists. From dental supplies to wireless phone service to office supplies, you'll find great deals on products and services. Agreements are developed and provided by the UDA.

Go to dentalofficedeals.com to join today!

Mabel® DENTAL LAB

Mabel Dental Lab is a full-service, family-operated dental laboratory that has provided dentists with high-quality products since 2010. Located in Cuyahoga Falls, Ohio, the lab is co-founded by a dentist with more than 40 years of experience and is a proud member of the National Association of Dental Laboratories (NADL). Mabel Dental Lab specializes in crown and bridge, implants, SLM®, Titanium, Vitallium®, Zirlux, VisiClear™ frames, full dentures, flexible partials, orthodontics including Smile Shapers clear aligners, implant restorations and much more!

Mabel Dental Lab is extending exclusive pricing to participating Delta Dental dentists. Contact Mabel Dental Lab at 877-622-3533 or mail@mabeldental.com for more information.

You can learn more about Mabel Dental Lab at mabeldental.com.

360° DIGILAB

360° Digilab offers the latest technology in digital design including crowns, bridges, implants, bite splints, surgical guides, perio guides, and more. Their state-of-the-art equipment, premium material and industry-leading designers will work with you to create a durable high-end solution for your patients.

360° Digilab is extending exclusive pricing to participating Delta Dental dentists.

For more information, contact 734-242-5776 or email info@360digilab.com.

Description of networks

Delta Dental offers variations of three basic models of dental plan design: standard fee-for-service, preferred provider fee-for-service and exclusive provider fee-for-service. Our plans allow the purchaser flexibility in choosing the plan details, such as benefit percentages, deductibles, maximums and covered services.

Delta Dental Premier®

Serves Delta Dental PPO™ (Point-of-Service) and Delta Dental Medicare Advantage™ members

Delta Dental Premier is a standard fee-for-service program. Dentists submit their usual fees for each service rendered, and participating dentists are reimbursed based on our maximum approved fee. Members are responsible for their copayment and deductible (if any). Participating dentists always receive claim payments directly from Delta Dental and members prefer to seek treatment from a participating dentist because of the lower out-of-pocket costs.

Participation in the Delta Dental Premier network includes participation with Medicare Advantage plans that use the Delta Dental Premier network and are administered by Delta Dental. A participating dentist cannot balance bill the member for any difference between their regular fees and the amount in the program fee schedule.

Both Delta Dental Premier and Delta Dental PPO can be sold to national employers. A national employer is one that has employees in more than one state. Delta Dental of Michigan is one of 39 independent Delta Dental plans in the Delta Dental system, and dentists who sign participating agreement(s) with Delta Dental of Michigan are also participating with any national network. Michigan dentists' claims for both national and local members are processed using the same fee tables.

Delta Dental PPO

Serves Delta Dental PPO (Standard), Delta Dental PPO (Point-of-Service) and Delta Dental Medicare Advantage members

Delta Dental PPO (Standard) is a preferred provider organization program. Participating dentists treat Delta Dental PPO members and are reimbursed based on their applicable Delta Dental fee amount, which creates savings for members and groups. Since the PPO program is a popular choice by employers, dentists who participate in this network may see an increase in patients who want to go to a participating dentist.

Delta Dental PPO (Point-of-Service) combines the characteristics of Delta Dental Premier and Delta Dental PPO into one flexible program. Members who do not go to a participating Delta Dental PPO dentist can still receive treatment from a Delta Dental Premier dentist, but often at a higher out-of-pocket cost. Payment is based on the dentist's participation status with Delta Dental Premier.

Medicare Advantage plans are offered through health plan partners and the dental benefits are administered by Delta Dental. Participation in the Delta Dental PPO network includes participation with Medicare Advantage plans that use the Delta Dental PPO network and are administered by Delta Dental. A participating dentist cannot balance bill the member for any difference between their regular fees and the amount in the program fee schedule.

Delta Dental EPO™

Serves Delta Dental EPO and Meridian of Michigan, Inc. members

Delta Dental EPO (exclusive provider organization) is a fee-for-service program. Participating dentists are listed in our closed-panel directory. Members are required to receive services from Delta Dental EPO dentists. Treatment payment is based on the applicable fee schedule and member copayments.

The Delta Dental EPO–Healthy Michigan Plan network serves Meridian of Michigan, Inc. members and fees will align with the Healthy Michigan Plan (HMP) fee schedule. Provider selection is based on periodic assessments of member-to-provider ratios, geographic coverage and access standards set by state regulations.

Participating dentists must register their Type 1 NPI in the Community Health Automated Medicaid Processing System (CHAMPS) and all incorporated businesses must also obtain a Type 2 NPI (business) and register it in CHAMPS. Participating providers are listed in our closed-panel directory. EPO–HMP providers are also eligible to see Delta Dental EPO commercial members and fees are based on the applicable EPO fee schedule and member copayments.

Healthy Kids Dental

Serves Healthy Kids Dental members

The Healthy Kids Dental (HKD) program is offered through the Michigan Department of Health and Human Services and is administered in part by Delta Dental. It provides dental benefits to children who have Medicaid and are under the age of 21.

Participating providers are required by the State of Michigan to register their Type 1 NPI (individual) in the Community Health Automated Medicaid Processing System (CHAMPS). All incorporated businesses are also required to obtain a Type 2 NPI (business) and register it in CHAMPS.

Michigan TriState Advantage

Serves traditional adult Medicaid, Healthy Michigan Plan and MI Coordinated Health members

The Michigan TriState Advantage network serves Healthy Michigan Plan (HMP), adult Medicaid and Michigan Coordinated Health (MICH) members. These programs are offered through the Michigan Department of Health and Human Services and administered through health plans. Delta Dental partners with health plans to provide dental benefits to their populations. Michigan TriState Advantage is based on State of Michigan approved fees for Medicaid plans. The State of Michigan requires participating providers to register their Type 1 NPI (individual) in the Community Health Automated Medicaid Processing System (CHAMPS). All incorporated businesses must also obtain a Type 2 NPI (business) and register it in CHAMPS.