Fee Schedule Improvements on the Web

In our continued effort to ensure our secure online provider portal, providers.bcdiaho.com, provides our users with the most detailed information possible, we are introducing a page that houses both the dental and medical fee schedules for dental providers. To find the tool, log on to the web portal and select Tools & Reports, then select Dental Fee Schedules to find your allowances. If you need more assistance, please contact your provider relations representative located in Dental Provider Administrative Policy 100.

Quarterly Directory Review and Update Requests

Blue Cross of Idaho is beginning a quarterly online survey, which will be emailed to all of our contracting providers as part of new regulations from the Centers for Medicare and Medicaid Services (CMS). To assist in the process, please verify your information in our online provider directory is accurate.

If you need to update your information, the emailed survey includes a link to the Update Form. Please complete the form and return it to Blue Cross of Idaho.

The Update Form is also available online at providers.bcdiaho.com.

- Select the Forms and Resources tab at the top of the page
- Select the Provider Packet link under the Resources heading
- Select the Update link
- Use the form to update the following information:
  - Clinic or practitioner name
  - Clinic or individual terminations
  - Practitioner information (supervising physician and patient parameters)
  - Address information

To help us process your request faster, please complete the editable form online before emailing, faxing or mailing the form to us.

Please contact your provider enrollment and escalation resolution specialist listed in Dental Provider Administrative Policy 100, for tax identification number, ownership, or organizational national provider identification number updates.
Dental QHP Frequently Asked Questions

What is a dental QHP plan?
A dental qualified health plan (QHP) is a dental plan designed to meet the requirements of the Affordable Care Act (ACA). These requirements include a dental out-of-pocket maximum of $350 per member younger than 19, or $700 for two or more family members younger than 19. Blue Cross of Idaho offers two individual dental plans that meet the ACA requirements – Dental Choice and Dental Choice Plus – and two group plans that meet the requirements – Group Dental Choice and Group Dental Choice Plus.

Is orthodontia a covered benefit on a dental QHP?
The dental QHP offer coverage for non-cosmetic, medically necessary orthodontia after a 24-month waiting period (cannot be waived), with prior authorization. Please refer to Dental Provider Administrative Policy 210-Orthodontia, for additional information and medical necessity criteria.

Do waiting periods apply for basic and major services?
Waiting periods may apply for basic, major and orthodontia services. Please log on to providers.bcidadaho.com, to review a member’s specific policy guidelines.

Are pre-determinations required for basic services?
A pre-determination is recommended for all basic and major services. Some plans require pre-determinations for specific services. Please review a member’s specific policy guidelines at providers.bcidadaho.com.

Does Blue Cross of Idaho allow down-coding for fillings and crowns?
Blue Cross of Idaho does not allow down-coding of fillings or crowns.

At what member age does Blue Cross of Idaho require adult coding?
Providers are required to use adult codes for patients age 12 and older.

Can a full mouth X-ray (FMX) and panoramic X-ray be completed on the same date of service?
No, they may not be completed on the same date.

Is D4381, Arestin, a covered benefit?
D4381, Arestin, is a non-covered service for any dental plan administered by Blue Cross of Idaho.

Are major services billed based on the tooth preparation date, or the seat date?
Major services are billed based on the tooth preparation date, not the seat date.

Are dentures billed before or after extractions?
Dentures may be billed prior to extractions. Benefits are based on the date of impression.

Are consultations a covered benefit?
Consultations are a non-covered service for most plans.

May I receive a fax or full breakdown of a member’s dental benefits?
Blue Cross of Idaho does not provide member benefits through fax, as benefits can routinely change. Blue Cross of Idaho wants to ensure the most accurate and up-to-date information is given. Please log on to providers.bcidadaho.com, for member benefits.

If needed, the Blue Cross of Idaho Customer Service Department can provide benefits over the phone for the following:

- Evaluations (frequency)
- Prophylaxis (frequency)
- Bitewing X-rays (frequency)
- Panoramic X-ray/full mouth series X-ray (frequency)
- Sealants (frequency)
- Filling/restorations
- Benefit period
- Deductible (what is accumulated)
- Coinsurance/incentive
- Benefit period maximum (what is accumulated)
- Out-of-pocket maximum (what is accumulated)
- Waiting period information
- Carryover amounts
- Any procedure or service that has been scheduled or is currently being performed.

For all other benefits or services not listed above or currently scheduled, please visit providers.bcidadaho.com to access an up-to-date benefit breakdown.
New Faces

Melissa LeMar

Melissa has worked at Blue Cross of Idaho for 10 years in the Medical Quality Management Prior Authorization Department. She has been married to her husband Rick for 26 years and they have a 26-year-old daughter Rachel, as well as a 23-year-old son Jake. Melissa has three dogs and enjoys reading and watching football—sometimes simultaneously. She loves learning and is in her junior year as full-time student studying Communication at Boise State University. She is excited to be part of the team.

Ashley Pulver

Ashley recently joined Blue Cross of Idaho as a provider credentialing specialist. She brings with her three years of experience in the healthcare field which includes provider credentialing and department coordination and support at IPN. She has also worked as the credentialing coordinator for St. Luke’s.

Pre-Determination for services is recommended for non-cosmetic orthodontic treatment of severe craniofacial anomalies in cases of physical functional impairment for pediatric dental QHP, Dental Choice, and Dental Choice Plus Plans.

Updated Orthodontia Billing Guidelines

Blue Cross of Idaho has updated our billing guidelines for orthodontia as of January 1, 2016. These updated guidelines are detailed in Dental Provider Administrative Policy 210, and include the following:

Claims must include the following elements:

- Banding date of service
- Estimated total months of treatment, indicated in the remarks field
- Type of appliance provided, indicated in the remarks field
- Reason for appliance, indicated in the remarks field
- Indication of phase I or II (if multiple phases are planned), indicated in the remarks field.
- Blue Cross of Idaho will consider benefits for orthodontia billed using the full treatment codes as indicated below:
  - Limited treatment 0-12 months (D8010 – D8040)
  - Interceptive treatment (D8050-D8060)
  - Comprehensive treatment for months 0-12 (D8070-D8090)
  - Periodic adjustments should billed
  - Orthodontic Retention, appliance repair and replacement retainers may be considered inclusive in the full treatment and not separately allowed (D8680, D8681, D8691-D8694).

Pre-Determination for services is recommended for non-cosmetic orthodontic treatment of severe craniofacial anomalies in cases of physical functional impairment for pediatric dental QHP, Dental Choice, and Dental Choice Plus Plans.

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Any Questions?

Medical Management
Managed Health Care/Review, Preadmission/Admission Certification, or Individual Benefits Management and Case Management

- 208-331-7535
- 800-743-1871
- Voice mail available after office hours and on holidays and weekends

Blue Cross of Idaho Help Desk
Electronic Billing Errors, Error and Acceptance Reports

- 8 a.m. – 5 p.m. MT (Monday – Friday), 888-BCI-EDIA, 888-224-3341 or 208-331-8817

Provider Contact Center for Commercial and Medicare Advantage
Benefits, Coverage and Authorization

- 8 a.m. – 5 p.m. MT (Monday, Tuesday, Thursday, Friday) 8:30 a.m. – 5 p.m. MT (Wednesday)
- 208-286-3656 or 866-482-2250

Post-service claim questions log onto our secure website at providers.bcidaho.com and select Contact Us.

Website Trainer – Questions regarding website applications such as electronic billing, eligibility, claims, authorizations, internet services or requests for FREE on-site training

- 866-283-5723 or 208-286-3602

Ext. 8309: Jamie Hunihan – City of Boise, St. Lukes Health Systems statewide. Counties: Boise, Canyon, Gem, Payette


Ext. 8308: Diane Mortensen, CPC – Cities: Eagle, Garden City, Kuna, Meridian, Star. Counties: Blaine, Butte, Camas, Cassia, Custer, Elmore, Gooding, Jerome, Lemhi, Lincoln, Minidoka, Owyhee and Twin Falls

Ext. 7032: Angie McCormick, CPC – Counties: Bannock, Bear Lake, Bingham, Bonneville, Caribou, Clark, Franklin, Fremont, Jefferson, Madison, Oneida, Power and Teton