NEW ADJUDICATION REASON CODE FOR CLAIM INQUIRY FORM PROCESSING

When a Claim Inquiry Form (CIF) is submitted by the provider indicating that incorrect information was submitted on the original claim (e.g., tooth number, tooth surface(s), procedure code, date of service), the provider has six months from the date of the Explanation of Benefits (EOB) to request a reevaluation.

Denti-Cal will use the following adjudication reason code to inform the provider that the correct information was received and processed:

> **315** The correction(s) have been made based on the information submitted on the CIF. Payment cannot be made because the CIF was received over 6 months from the date of the EOB.

PROVIDERS TREATING BENEFICIARIES IN SKILLED NURSING FACILITIES (SNF) OR INTERMEDIATE CARE FACILIITIES (ICF)

It is important to include the name, address and phone number of the Skilled Nursing Facility (SNF) or Intermediate Care Facility (ICF) where a beneficiary resides when submitting Treatment Authorization Requests (TARs). Often the address provided is of the beneficiary's family address or of the conservator/guardian, rather than the facility. This incorrect information results in the Regional screener being unable to locate the beneficiary, which can cause treatment to be delayed or denied.

When this information is lacking, a Resubmission Turnaround Document (RTD) will be issued requesting the missing information. Should the RTD be returned without this information the TAR will be denied. Denti-Cal has modified the following RTD code 11 to read as follows:

> **RTD CODE 11** Submit beneficiary facility name/address/phone#.

VISIT DENTI-CAL AND ELECTRONIC DATA INTERCHANGE (EDI) BOOTHS AT ANAHEIM CALIFORNIA DENTAL ASSOCIATION (CDA) SCIENTIFIC SESSION

Be sure to visit the Denti-Cal and EDI booths at the CDA Scientific Session in Anaheim, Friday, April 25, 2003 through Sunday, April 27, 2003. Representatives from Denti-Cal's EDI program will be on-hand in booth number 735 with information and answers to your questions regarding electronic claims submission. You will find Denti-Cal Provider Relations staff in booth number 743, and Denti-Cal Outreach staff in booth number 745.

REMINDER: UPCOMING SEMINARS

Check your Seminar Schedule (Denti-Cal Bulletin, Volume 19 # 5) for details about seminars in your area.

EDI NEWS - ENROLLMENT INFORMATION

For an EDI Enrollment Packet, please contact Provider Services toll-free at (800) 423-0507. For an EDI How-To Guide or other information on submitting Denti-Cal claims and Treatment Authorization Requests (TARs) electronically, phone (916) 853-7373 and ask for EDI Support.

If you have additional questions, please call Denti-Cal toll-free at (800) 423-0507.