



Date

**Emblem Health Transition of Care
January 1, 2017**

«NAME»
«ADDRESS1»
«ADDRESS2»
«CITY», «STATE» «ZIP»

Dear Provider(s):

Effective January 1, 2017, DentaQuest will be the dental administrator for the following EmblemHealth Programs: Adult and Child Medicaid Plans, Child Health Plus (CHP) Plan, Enhanced Care Plus (HARP) Plan, On/Off Exchange Plans, Essential Plans.

The purpose of this letter is to communicate the process for receiving payment for services approved by Healthplex that have not been completed by December 31, 2016.

DentaQuest will honor approved prior authorizations from Healthplex for 90 days, or through March 31, 2017. Transition of Care will apply where a **decisive appointment has not yet occurred**. All approved prior authorizations from Healthplex will be loaded into our system to make providing transitional care as easy as possible for your office. We do recommend, however, that you verify with us that the approved authorization has been transferred over and is in the DentaQuest system. Please use the following process to request reimbursement for Transition of Care services as a participating DentaQuest provider. Payment will be made at the Emblem Health DentaQuest fee schedule.

1. Verify if your authorization has been transferred to DentaQuest. This can be done via IVR/Customer Service by calling DentaQuest's EmblemHealth Provider services line at **844.822.8108**.
2. Once you have confirmed the service has properly transferred, no further action is required. Proceed in providing care as you would for any other DentaQuest patient
3. Submit the claim for reimbursement upon completion of the treatment.
 - Send paper claims via fax to: 262.834.3589 or
 - Mail paper claims to: Emblem Dental (DentaQuest)
P.O. Box 463
Milwaukee, WI 53201
 - Submit claims via clearinghouse using **Payer ID: EMBDQ** and **Payer Name: DQ/EmblemHealth**
 - Clearly write "**Transition of Care**" in box 35 or the notes field.
 - Attach the original Healthplex issued approval form.

If you have already started treatment with an Emblem Health member prior to January 1, 2017 **and a decisive appointment has occurred**, please submit your claim to Healthplex directly using the appropriate billing codes for such decisive appointments. Please refer to the NYS Medicaid Dental Policy & Procedures Manual for more details on decisive appointments.

https://www.emedny.org/ProviderManuals/Dental/PDFS/Dental_Policy_and_Procedure_Manual.pdf

If you have questions, please utilize our EmblemHealth Interactive Voice Response (IVR) system at **844.822.8108** 24 hours a day, 7 days a week, for up-to-date information regarding member eligibility, claim status, and much more. The benefits associated with these programs will be contained in the online Office Reference Manual at <http://dentaquest.com/ny/Emblem/> once the Emblem Health program becomes effective on January 1, 2017.

Thank you for your continued support in working with us to provide high-quality dental care to the members of your community.

Sincerely,

Maggie Lombardi
Regional Director, Provider Engagement