

DENTAL BILLING ALERT

September 29, 2005

Dear Provider:

Effective November 1, 2005, **Unison/MedPLUS+** will be implementing changes to dental benefits offered to some of our membership.

Changes will only affect adult members that would normally not receive dental benefits on the Medical Assistance Program. The members affected are in categories 03, 04 and 05. If a member has dental coverage on Medical Assistance, they will have the same coverage with **Unison/MedPLUS+**. If a member does not have dental coverage on Medical Assistance, they will be eligible for a prophylaxis and an examination every 6 months, x-rays, simple and surgical extractions, alveoplasty, amalgam and resin restorations, and palliative treatment.

At this time we will be honoring all previously issued pre-determinations for members in the "Low Plan" categories provided services are rendered by December 31, 2005. Please remember you will need to check Member Eligibility before providing services. Member Eligibility can now be verified by calling our IVR line at: **1-888-586-4766** or by accessing our website at: www.unisonhealthplan.com.

Also, effective November 1, 2005 **Unison/MedPLUS+** will begin to accept CDT codes for Orthodontic Treatment. There will be a transition period at which time **Unison/MedPLUS+** will receive either the CDT codes or the Z Codes for Orthodontics. By January 1, 2006 Providers will be required to use the CDT codes only.

Orthodontic CDT Codes:

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| D8660 | Orthodontic Exam and Treatment Plan |
| D8999 | Orthodontic Diagnostic Aids |
| D8080 | Orthodontic treatment 1 st Quarter |
| D8670 | Orthodontic Treatment Subsequent Quarters (2 nd thru 8 th) |
| D8680 | Orthodontic Retention Services (if debanded before the end of the 7 th Qtr) |

If you have any questions, please contact the Provider Services Department at 1-800-600-9007.

Unison/MedPLUS+

