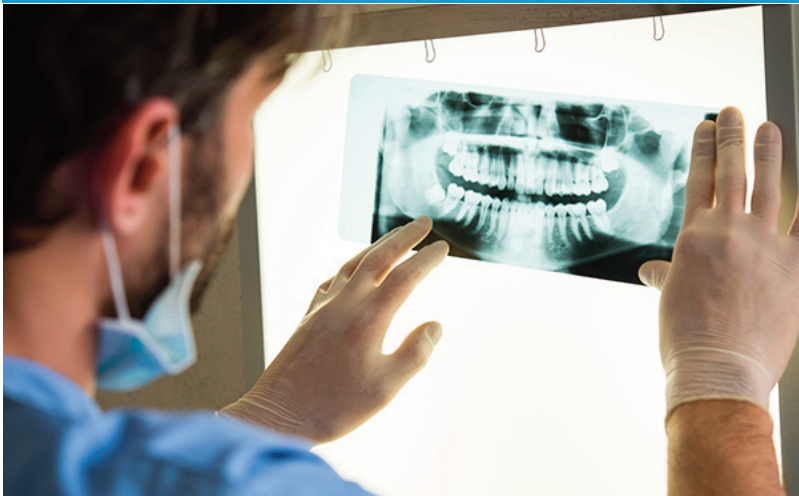


Connecticut Dental Health Partnership PROVIDER PARTNER NEWSLETTER

IMPORTANT REMINDER



Proper Labeling and Mounting of Radiographs

Please remember the CTDHP requires that all radiographic images have proper labeling and dates of exposure prior to consultant review for Prior Authorization or Post Review. Additionally, when more than 5 periapical films are submitted, they must be properly mounted as well.

Failure to provide proper labeling and dates of exposure will result in the delay of the review and the rejection of the PA request. Unmounted full mouth series will be rejected as well.

Please be sure the quality of the radiographs being submitted for review are of diagnostic clarity.

In cases where proper labeling and/or dates of exposure cannot be placed on the images, place all appropriate information in the remarks section of the claim form.

CTDHP Provider Manual

The Connecticut Dental Health Partnership's provider manual has been updated. Please visit our website www.CTDHP.org to see the new format. The provider manual includes updated information about the plan and is searchable.



About Us

the dental plan for
HUSKY Health

The State of Connecticut's publicly funded dental care programs, HUSKY A, HUSKY B, HUSKY C

and HUSKY D, and Covered CT now have been combined into one dental plan: the Connecticut Dental Health Partnership - the Dental Plan for HUSKY Health (CTDHP). CTDHP oversees the dental plan for the Department of Social Services (DSS) HUSKY Health program which covers over 1 million residents in Connecticut.

CTDHP Website

The Connecticut Dental Health Partnership, the Dental Plan for HUSKY Health has a useful and informative website. Please go to www.ctdhp.org to access provider resources, to upload prior authorizations, verify client history, download educational materials and much more!



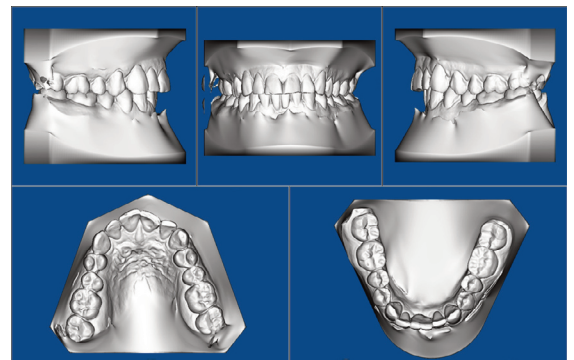
CTDHP Provider Surveys

Beginning October 1st 2024 we will begin our annual provider survey. The survey can be completed online. When you sign in to the CTDHP website you will be prompted to fill out the survey. Please take a few minutes to fill out the survey as it will help us refer the clients to a dental home that will fit their needs and avoid unnecessary telephone calls to your office.

ORTHODONTIC OFFICES

Cases with Plaster Models

- Completed Claim Form
 - Client ID # and DOB
 - Procedure Codes
 - Office NPI #, Doctor's NPI# and Tax ID#
- Completed Salzmann Scoring Sheet
- Photos, Panorex and Ceph (if needed)
- Name of client and office must be on all x-rays and photos
- Models
 - Client's name on both arches
 - Trimmed to ABO (American Board of Orthodontics) Standards
 - Wrap the models in bubble wrap to ensure that teeth are not broken during transit



Cases with Digital Models

- Follow the Ortho PA Upload instructions
- Models must have the ABO bases attached
- Name of client and office must be on all x-rays, photos and models

Periodontal Services for Qualifying Adults



New LIMITED Benefit

Beginning January 1, 2024 Qualifying HUSKY and Covered CT members are eligible to receive certain periodontal services. Prior Authorization for Treatment is Required.

For full details please follow this LINK.
<https://ctdhp.org/wp-content/uploads/2023/12/Provider-Perio-Benefit-FAQs.pdf>

If we can be of any help please reach out to us at

1-855-CTDental www.ctdhp.org

Procedures for Updating Client Third Party Liability Information

NEW HMS Phone Number: 1-866-252-0671

This communication is to provide guidance on how to update client Third Party Liability (TPL) health insurance information. This guidance is directed to CTSS clients and their families or legal guardians, CTSS Eligibility Staff, other CTSS Business Units, and public and private agencies who work with CTSS clients.

Under Federal regulation, CTSS is the payer of last resort. Client health insurance (TPL) must first be used to pay for a client's health care costs before Connecticut Medicaid. Accordingly, CTSS is required to capture known client health insurance information on the person's ImpaCT record. Client health insurance coverage changes constantly. CTSS utilizes a TPL contractor, HMS (a Gainwell Technology Company), to account for these changes and maintain accurate health insurance information on CTSS systems. HMS continually verifies client health insurance and may add new, correct existing, or delete erroneous health insurance coverage from a client's ImpaCT record.

A TPL referral should be made directly to HMS to report new client health insurance, or to have a correction made to a client's existing health insurance policy. Here are the methods in which a TPL referral should be made:

- CTSS Eligibility Staff should send to HMS the W-1685 Medicaid Insurance Information form by

FAX: 1-469-320-5117, or by scanning the form into a PDF file and sending it by secure email to: CTinsurance@gainwelltechnologies.com

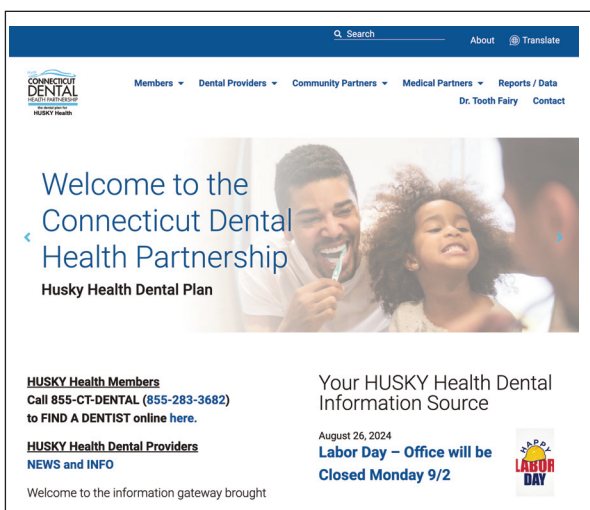
An urgent TPL referral should be made to HMS to fix incorrect health insurance information that adversely affects the client's ability to receive a health care good or service, or if a TPL Good Cause situation exists where CTSS is required to waive TPL requirements and not capture health insurance on a client's ImpaCT record, if it is anticipated that this would result in reprisal against, and cause physical or emotional harm to the client or other persons. Urgent TPL referrals should be made to HMS by calling 1-866-252-0671 (8:30 AM – 5:30 PM), or by secure email: CTinsuranceescalation@gainwelltechnologies.com.

- HMS will make needed changes to the client's health insurance coverage and respond back to the sender within 24 hours of receipt of the urgent TPL referral.
- Routine TPL referrals, which are not urgent or TPL Good Cause-related, may be made to HMS by calling: 1-866-252-0671, or by secure email to: CTinsurance@gainwelltechnologies.com

Please contact Catherine Leaper in the Office of Quality Assurance if you have any questions regarding these TPL referral procedures (Catherine.Leaper@ct.gov, 860-424-5164).

Thank you

CTDHP Website: www.CTDHP.org



The staff at CTDHP is continually looking to improve our website. We frequently update the information that is available for our partners. Please visit our site regularly to see what is new and exciting. Soon we hope to add patient health history to our secure web portal. This will provide an opportunity to dental providers for a more informed perspective of the patients they treat.



Dental-Medical Integration Means Less Paperwork For You

As of **January 15, 2022**, dental providers in the HUSKY Health network no longer need to request prior authorizations for a second annual periodic examination and cleaning for Adult HUSKY members who have designated medical conditions. (see list below). The CT Dental Health Partnership has automated the authorization of additional services for your patients with chronic disease conditions that we are able to document from their medical claims. New Adult HUSKY Health patients who have designated medical conditions will have PAs generated for recall visits in the month after you submit your initial claim.

This means less work for you!

In addition, when HUSKY Health members need services from you that require approval, The Connecticut Dental Health Partnership will send letters to members listing services that have been approved through the Prior Authorization process. These letters will include the approved procedure codes and descriptions for major services.

We hope that this communication will encourage the member to schedule a timely appointment with you to have their dental work completed. The letter also includes the number for our Member Services team, should they have any questions.

855-CT-DENTAL (855-283-3682)

- **Alzheimer's Disease**
- **Cardiovascular Disease**
- **Chronic Obstructive Pulmonary Disease**
- **Diabetes Type 1**
- **Diabetes Type 2**
- **Disease of the Intestine Unspecified**
- **Diseases of oral cavity and salivary glands**
- **Ear Nose and Throat Cancers**
- **End Stage Renal Disease**
- **Hemophilia**
- **HIV/AIDS**
- **Hypertension**
- **Kidney Disease**
- **Liver Disease**
- **Lung Cancer**
- **Lupus**
- **Osteoporosis**
- **Pancreatic Cancer**
- **Sickle Cell Disease**

855-CT-DENTAL (855-283-3682)

www.ctdhp.org

Quick Reference Contact Sheet for Dental Services

CT Dental Health Partnership Contact Information

Client Services	(866) 420-2924
Client Services	(855) 283-3682
Fax	(860) 674-8174
Provider Services Prior Authorization (Philadelphia)	(888) 445-6665
Michael Massarelli (Senior Director Network Development and Professional Relations)	(860) 507-2303
Sue Wydra (Professional Relations Associate)	(860) 507-2307
Norma Liistro (Professional Relations Associate)	(860) 507-2319
Sue Napolitano (Professional Relations Associate)	(860) 507-2328

Prior Authorizations and Post Procedure Authorizations:

CT Medicaid Prior-Authorizations

C/O Dental Benefit Management/Benecare
555 City Ave., Ste. 600
Bala Cynwyd, PA 19004
(888) 445-6665

Enrollment Documents:

Gainwell Technologies

Provider Enrollment Unit
P.O. Box 5007
Hartford, CT 06102-5007

ctproviderenrollment@gainwelltechnologies.com

J434 Standard ADA Claim Form Accepted



1-855-CTDental www.ctdhp.org