Humana Dental Highlights

A publication of Humana Dental[®] Quarter 2- 2024

Happy Summer!

IMPORTANT: The secure **Humana.com** and MyCompBenefits.com portals permanently closed on May 1, 2024. After this date, Availity Essentials[™] will be the sole location to look up Humana Dental patients' information. Make sure your office is ready by accessing the links below to register or for help to get started.

Rediscover Availity Essentials for Humana Dental

Availity and Humana have teamed up to create a new and enhanced experience exclusively for Humana Dental providers. With an active registration, you will have access in Availity Essentials to perform the tasks you do daily, including:

- Viewing patient eligibility and dental benefits
- Accessing claims status and remittance documents
- The Dental Claims application is now available for you to submit a dental claim (this does not include pre-estimates).
- Managing dental health maintenance organization (DHMO) patient rosters via Humana Dental's payer space in Availity Essentials
- Using the dedicated payer space to find Humana-specific apps and resources

Availity Essentials is a multi-payer portal. You can use 1 user ID and password to work with Humana Dental and other payers in your region. Availity is compliant with all Health Insurance Portability and Accountability Act of 1996 (HIPAA) regulations and there is no cost to register.

Does your organization need an Availity Essentials account?

To work with Humana Dental on Availity Essentials, your organization must have an Availity account. Select the link to <u>register now</u>. The secure Humana.com portal sunset in May and you no longer have access to that portal. Availity will be the only portal for providers.

If you prefer a more personalized experience or if you have questions during the process, join an Availity Essentials training for one of Availity's free webinars and take the guesswork out of getting started. Reserve your spot now. After selecting Start Course, expand the section titled "Need to register with Availity? Join this introductory webinar." Registration help page

Get started now

Select the link below to learn more about requesting an Availity Essentials username and find access to other

resources including an Availity online registration form.

Humana.com/AvailityDentalPortal

Call Availity Client Services at 800-AVAILITY (282-4548) for help with registration questions. Assistance is available Monday – Friday, 8 a.m. – 8 p.m., Eastern time (excluding holidays).

Best practices in using Availity Essentials

Verify patient benefits

It is always important to verify patient benefits, especially around the fourth quarter and beginning of a new year. This is often a time of change for employer group coverage and individual benefits. Benefit changes can even occur to your long-time patients. It is a good practice to run a current inquiry to avoid surprises.

 If you are already registered, sign in to Availity Essentials and select Patient Registration > Eligibility & Benefits Inquiry to check your patients' current dental benefits. Be sure to select Humana Dental as the payer.

Checking claim status

Verify status of your Humana Dental claims by selecting Claim Status & Payments> Claim Status. Be sure to select Humana Dental as the payer. There are 4 different search methods to help you find the information quickly.

- In addition to the standard HIPAA search tab, there are 3 enhanced searches available for Member, Service Dates and Claim Number tabs, with fewer required fields.
- Did you know? You can find pre-estimates in claims status. Look for the Estimates Flag section at the top. If a claim was processed as a pre-estimate, it will display with a Y in the field.

Submitting claims online

Registered Availity Essentials users can use the Dental Claim tool to submit claims to Humana Dental. If you do not see the Dental Claim option, you may need to have the claims role assigned to your profile. Check with your Availity administrator. If you don't know who your administrator is, select your account name and select My Account. Then, select Organizations from the left menu. Next to Administrator Information, select Open My Administrators.

- Select Claims & Payments menu, then under the Claims header, select Dental Claim. Select your organization, claim type is dental claim, choose Humana Dental as the payer and then the Responsibility Sequence (default is Primary).
- Complete the fields in order from top to bottom. You have the option to print the claim entry before submitting. Once submitted, you can review and save the claim confirmation page if needed.
 - Did you know? Diagnosis codes are optional and in general used for medical claims, however, a diagnosis code may be required for treatment performed by an oral surgeon, or if services were because of an accident.
 - Remarks: This field is only used for information not captured within the existing fields on the American Dental Association (ADA) form. It is <u>not</u> a place to indicate a corrected claim. Corrected claims can be indicated by selecting the Replacement of Prior Claim within Ancillary Claim/Treatment Information option.

Remittance information

As a provider treating Humana members, several options are available to you for viewing remittances. It is important to choose the option that works best for your office.

For patients with Humana Dental, you can use Remittance Inquiry (Humana) or Availity's Remittance Viewer. From the Claims & Payments top menu, go to Remittance Viewer.

- Select Remittance Inquiry (Humana) to open the remittance tool. This is the same remittance tool in use on the Humana.com secure portal and requires you to enter a Tax Identification Number (TIN) to search.
- Select Remittance Viewer to open Availity's remittance application. At this time, to use it you need to
 have your Electronic Remittance Advice (ERA) flow through Availity. To learn how to access Explanation
 of Payment/Explanation of Benefit (EOP/EOBs), open the remittance viewer. Look for the links at the top
 right, select "Need help getting access to EOP/EOBs." You can also watch a quick video on using the
 viewer by selecting "Need help? Watch a demo for Remittance Viewer."
- Using Availity's Remittance Viewer includes the ability to search by check or claim number without requiring a TIN.

CompBenefits Remittance Advice

To access remittance for members previously serviced on MyCompBenefits.com we have an application under the Humana Dental payer space.

- Select the CompBenefits Remittance Advice application.
- Once you have selected your organization and entered the facility ID for your location, there are options to search by voucher date, claim number or check number.
- If you're not sure of the facility ID for your location, please reach out to your provider engagement professional or single point of contact (SPOC).

DHMO providers

New DHMO plans are being introduced in select states this spring!

Humana Dental is pleased to introduce new DHMO plans on the existing HD/HS series in Florida, Georgia, Illinois, Indiana, Kentucky, Missouri, Tennessee and Texas. The HD/HS series will now include HD405, HD410, HD415, HS405, HS410 and HS415. These plans help maintain and increase patient flow and continue to position Humana Dental as a leader in the dental benefits industry. Humana Dental anticipates new group membership on the new HD/HS plans started April 1, 2024. Please refer to your eligibility lists to ensure appropriate benefits are administered to Humana-covered patients during the transition. The Schedule of Benefits for these new plans with member copayment details will be made available at the dental and vision benefits summary <u>page</u> prior to plan effectuation. Please be sure to refer to the member copayment listing and obtain a copy for your records prior to seeing patients on the new HD/HS plans. <u>Prior to providing any dental services, please</u> <u>remember to verify the member is on your roster.</u>

New dental claims application available for Humana Dental

Humana Dental is pleased to introduce the ability to submit dental claims and monitor claim status using Availity Essentials. Availity experts have conducted live trainings with insider-tips for using the dental claim tool. Please visit the website (linked below) created just for Humana Dental providers to learn more about the new dental

claim tool and where you will find links to view the recorded trainings.

Learn about Availity Essentials for Humana Dental Providers - Overview

You must be a registered user on <u>www.availity.com</u>. Select "Start Course" and then expand on the section titled "Already a registered Availity user? Build your training plan here." Look for Humana Dental – Dental Claim Submission to find the link to the recorded webinar.

2024 CDT code changes

Annually, the American Dental Association (ADA) updates and adds new Current Dental Terminology (CDT) codes. We would like to share with our providers the ADA changes to existing CDT codes, as well as how Humana plans to cover new codes.

Plan coverage varies by product or group benefits. Check eligibility and benefits on <u>www.availity.com</u>, submit a pre-estimate or call Humana at the number on the back of your patient's ID card.

Fee schedules

- Humana updates all fee schedules to include the new codes when the similar code was on the fee schedule. For example, if there is a fee schedule today for D2931, then we added D2928 with that fee.
- If the fee schedule did not have a similar/like code listed, we did not include it to the fee schedule.
- For preferred provider organization (PPO)-based plans, we have added the new CDT codes to our usual customary rate (UCR) tables starting in 2021 that will help fee schedules pay to the 80% logic.

New CDT codes

Covered codes

(Note: Plans are not available in all states. Plan benefits may vary by state. Refer to plan documents for complete details of coverage.)

CDT code	CDT code description	Additional description	Coverage
D1301	Immunization counseling	A review of a patient's vaccine and medical history, discussion of the vaccine benefits, risks and consequences	Not covered unless mandated by the state
D6089	Accessing and retorquing loose implant screw – per screw	Standard implant frequency limits apply	Covered when implants are covered
D7284	Excisional biopsy of minor salivary glands		Covered if D7285 and D7286 are covered. If those are not covered, then no coverage for this new code.

Deleted CDT codes

No codes were removed for 2024.

Changed CDT code verbiage

The following codes have had verbiage changes. Language that has been added is highlighted in blue. Crossed out phrasing indicates wording that has been removed.

CDT code	CDT code nomenclature	Additional description	Details
D2335	Resin based composite – 4 or more surfaces or - involving incisal angle (anterior)	Incisal angle to be defined as one of the angles formed by the junction of the incisal and the mesial or distal surface- of an anterior tooth.	Nomenclature change only
D5876	Add metal substructure to acrylic full denture (per arch)	Use of metal substructure in removable complete dentures without a framework	Descriptor change only

Flexible allowance on the Humana spending account card

Patients with this benefit can use up to the allowance provided for out-of-pocket dental, vision and hearing services that are covered by their plan. The allowance must be used for services that are covered by the 2024 embedded plan benefits.

- Flex allowance how-to: When using the flex allowance on the spending account card, the dental insurance benefit (DENxxx) should be applied first by submitting a claim to Humana. Patients can then use the flex allowance for out-of-pocket expenses on covered services.
- Questions? Call Provider Customer Service at 800-833-2223.

Medicare Advantage benefits for 2024

Humana supports our in-network dentists by making it simple to work with us and easy for patients to use their benefits. Below highlights our 2024 plan features.

As a reminder, all Medicare Advantage (MA) dental benefits use a PPO network. The patient's ID card may say HMO, but that is only related to the patient's medical benefits.

Our enhanced 2024 MA plan benefits include:

- **Dental coverage on 100% of Medicare plans:** All Humana MA members have preventive dental coverage in 2024.
- **Rich embedded dental benefits:** 87% of members have embedded benefits that cover some major services. Approximately 91% of members have plans that cover periodontal scaling.
- **Dental allowance plans without frequency limitations on covered services:** Some Humana-covered patients have dental allowance benefits, which allows them to use up to the annual maximum of the

plan with no frequency limitations on covered services. Claims process and clinical review still apply. Dental allowance plans are shaded gray in the Dental Office Handbook.

- Flexible allowance on the Humana Spending Account Card: Patients with this benefit can use up to the allowance provided for out-of-pocket dental, vision and hearing services that are covered by their plan. This gives patients the flexibility to choose which expenses they want to pay for with their allowance. It must be used for services that are covered by the 2024 embedded plan benefits.
 - When using the flex allowance on the spending account card, the dental insurance benefit (DENxxx) should be applied first by submitting a claim to Humana, then the flex allowance can be used for out-of-pocket expenses on covered services.

Please remember that benefits vary by plan, and please be sure to verify the specific coverage of your MA patients in the Dental Office Handbook of the corresponding calendar year, which is located at <u>Humana.com/SB</u>. Provider customer service contact information also is available in the handbook.

Helpful links to make your life easier

Have questions? Give us a call! HumanaDental/Medicare Dental 800-833-2223 Monday – Friday, 8 a.m. – 8 p.m., Eastern time

Humana's automated customer service line provides claims and patient information. When calling, please have the following information handy.

- Tax ID number
- Patient's name, date of birth and Humana ID
- Date(s) of service

Helpful Links

- Provider manual
- Dental resources

Have you downloaded the 2024 Dental Office Handbook?

Benefits vary by plan. Please remember to verify your MA patients' specific coverage in the Dental Office Handbook of the corresponding calendar year. You can find the handbook at <u>Humana.com/sb</u>. Provider customer service contact information is also available in the handbook.

HumanaDental Highlights is a quarterly publication for dental providers throughout the Humana network.