



# DentaQuest

## TEXAS ROUNDUP

PROGRAM UPDATES FOR OUR TEXAS DENTISTS

VOL 41 | December 2014

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### HEALTH PLAN UPDATES

Amerigroup has updated its Medicare benefit filing with CMS for the 2015 calendar year.

- Amerigroup Classic Select will offer members a preventive dental benefit in select counties.
- The comprehensive benefit maximum for the Amerigroup Classic plan will not change from \$250 per quarter; however, this plan is now limited to Bexar and El Paso County.
- The comprehensive benefit maximum for the Amerigroup Specialty plan will not change from \$425 per quarter.

Superior HealthPlan has updated its Medicare benefit filing with CMS for the 2015 calendar year.

- The comprehensive benefit maximum for the Advantage by Superior plan will change from \$750 to \$350 per benefit year effective 1/1/2015.

Superior HealthPlan will expand its Ambetter by Superior product into the following counties: Willacy, Brooks, Hidalgo, Bandera, Kendall, Blanco, Fayette and Lee.

Please remember that the Interactive Voice Response (IVR) system is available 24 hours a day, 7 days a week to provide up-to-date information regarding member eligibility, claim status and much more. In addition, eligibility and benefits associated with our programs can be found in the Office Reference Manual online at [www.dentaquesttexas.com](http://www.dentaquesttexas.com), or you may contact us directly via phone at 888-308-9345.





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## **RESTORATIVE ELIGIBILITY UPDATE FROM HHSC**

HHSC has implemented a new process to automatically restore managed care enrollment when a member's Medicaid eligibility is reinstated without a gap in Medicaid coverage. Under the new process, members will be re-enrolled into the Managed Care Plan previously responsible for the member's care upon restoration of eligibility. Previously, members would be covered by fee-for-service prior to being enrolled in a managed care plan for the prospective month. Under the new process, impacted members will be enrolled in Managed Care both retroactively and prospectively, replacing any fee-for-service coverage periods

MCOs are currently notified of re-enrollments on a weekly basis, and process for daily updates is under development.

Providers should be aware of this process change and check member eligibility with MCOs/DMOs prior to rendering care. If the MCO/DMO information conflicts with eligibility information received from TMHP or another source, providers should contact the MCO/DMO to resolve the discrepancy.

## **HAPPY HOLIDAYS!**

Best wishes from DentaQuest for a safe and happy holiday season, and a bright, successful new year!

