

Continuation of Care Provisions

Subject: Ensuring Seamless Care for Your Patients

DentaQuest is on a mission to improve oral health for all. We are working with partners, clients, patients, and providers across the state to make oral health care more affordable and easier to access with a focus on prevention.

As DentaQuest enters into new contracts with the Agency for Health Care Administration (Agency) effective February 1, 2025, we want to reassure you of our unwavering commitment to continuity of care. We have policies in place to ensure continuity of care and will honor ongoing treatments or routine special appointments authorized prior to the enrollee's enrollment. This applies to both in-network and out-of-network providers, and the continuation period is up to 120 days after the effective date of enrollment.

Continuity of Care Requirements:

COC requirements ensure that when enrollees transition from one health plan to another, or one service delivery system to another (i.e., fee-for-service to managed care), their services continue seamlessly throughout their transition. The Agency has instituted the following COC provisions:

- Health care providers should not cancel appointments with current patients.
- Providers will be paid by the enrollee's new managed care plan.
- Providers will be paid promptly by the enrollee's new managed care plan.
- Prescriptions will be honored by the enrollee's new managed care plan.

Our Promise to You and Your Patients:

- **Seamless Transition:** DentaQuest will honor any ongoing course of treatment for up to 120 days after the new plan's start date if it was authorized prior to enrollment in our plan.
- **Prompt Payment:** DentaQuest guarantees timely reimbursement for your services, whether you're in-network or out-of-network during the transition period.
- **Honoring Existing Authorizations:** All pre-authorized treatments and scheduled appointments will be respected.
- **Support for Non-Participating Providers:** DentaQuest will reimburse non-participating providers at the rate they received prior to the enrollee transitioning for a maximum of 60 days unless the provider agrees to an alternative rate.
- **Uninterrupted Orthodontic Care:** Active orthodontia services will continue until the completion of care, extending beyond the standard 120-day period.

Continuity of Care Claim Submission:

- ❁ Complete an ADA claim form and list all services provided. In Box 35 of the ADA claim form, or in the remarks section for electronic submissions, include the keyword **MCNACOC** (exactly as shown here, no spaces, one word).
- ❁ Attach supporting documentation, include a copy of the member's prior approval letter, and ensure the approved case fee is clearly visible on the attached letter.
- ❁ If submitting electronically, enter **MCNACOC** (exactly as shown here, no spaces, one word) in the designated remarks or notes field, ensure all required attachments are properly scanned and included.

Verification steps:

- ✓ Double-check that all services are accurately listed
- ✓ Confirm the **MCNACOC** keyword is present and correctly spelled, no spaces, one word.
- ✓ Verify that all necessary documentation is included
- ✓ For paper claims, mail to the address specified below
- ✓ For electronic claims, submit through our authorized claims submission portal or clearing house using payer ID CX014.

By following these detailed steps, you'll ensure proper identification and processing of continuity of care claims, potentially reducing delays and improving accuracy in claim handling.

Our Commitment to You:

At DentaQuest, we value our partnership with providers like you. We are dedicated to making this transition as smooth as possible, ensuring that you can focus on what matters most – providing excellent care to your patients.

Thank you for your continued dedication to patient care. We look forward to working together to ensure the best outcomes for our members and your patients.

- ❁ For additional questions regarding COC requirements, please contact us via email at floridaproviders@dentaquest.com or call our Provider Services team at 1-877-468-5581.
- ❁ For questions about fee schedules or reimbursement or to join our network, contact us via email at floridaproviders@dentaquest.com
- ❁ For any other questions: Call our Provider Services team at 1-877-468-5581

Important reminder:

After the Continuity of Care (COC) period ends, you would need to be contracted with our network to continue treating our members as an in-network provider. We encourage providers to consider joining our network as soon as possible to ensure seamless care for patients and to maintain in-network status. Please contact our Provider Engagement department for information

on how to become a contracted provider. We will provide information to complete the online application form with your practice information, credentials, and other required details.

	DentaQuest Participating Provider	DentaQuest Non-Participating Provider
Provider Enrollment Qualifications	Provider must be enrolled in Medicaid and meet all provider requirements at the time the service is rendered.	Provider must be enrolled in Medicaid and meet all provider requirements at the time the service is rendered.
Florida Provider Services	DentaQuest General Provider Services Queue: (877) 468-5581 floridaproviders@dentaquest.com	DentaQuest General Provider Services Queue: (877) 468-5581 floridaproviders@dentaquest.com
Credentialing Hotline	Credentialing Department (800) 233-1468	Credentialing Department (800) 233-1468
Claims	DentaQuest receives dental claims in four possible formats. These formats include: <ul style="list-style-type: none"> • Electronic ADA claims via DentaQuest’s website • Electronic submission via clearinghouses - Payer ID CX014 (dentist only) • HIPAA Compliant 837D File • Paper ADA claims form 	DentaQuest receives dental claims in three possible formats. These formats include: <ul style="list-style-type: none"> • Electronic submission via clearinghouses - Payer ID CX014 (dentist only) • HIPAA Compliant 837D File • Paper ADA claims form
Claims (Paper) Requests and Authorizations (Paper) Requests	DentaQuest –UM Department PO Box 2906 Milwaukee, WI 53201-2906 Non-Emergent Review Fax: (262) 241-7150 or (888) 313-2883 ER Review Fax line: (262) 387-3736	DentaQuest – UM Department PO Box 2906 Milwaukee, WI 53201-2906 Non-Emergent Review Fax: (262) 241-7150 or (888) 313-2883 ER Review Fax line: (262) 387-3736
Short Procedure Unit (SPU) for review of Operating Room (OR) cases:	DentaQuest - SPU Department PO Box 2906 Milwaukee, WI 53201-2906 Fax line: (262) 834-3575	DentaQuest - SPU Department PO Box 2906 Milwaukee, WI 53201-2906 Fax line: (262) 834-3575
Provider Trainings and Education Opportunities	Contact your local Provider Engagement Representative for personalized assistance	Send an email to floridaproviders@DentaQuest.com
Case Management Department	Direct members or authorized representatives to our Member Services Department: 1-888-468-5509	Direct members or authorized representatives to our Member Services Department: 1-888-468-5509
Florida Member Services	Statewide Medicaid Dental Health Program 888-468-5509	Statewide Medicaid Dental Health Program 888-468-5509