Provider Appeal Protocol

Did you know that Appeals are Often Unnecessary?

A resubmission can be filed instead of an appeal. Some denials can be reconsidered by referring to the provider authorization determination reasons and submitting the requested documentation to remedy the deficiencies.

What is the Difference Between an Appeal and a Resubmission?

The resubmission process is a quick and easy way to request a second consideration of your pre-authorization request when it has been denied for missing documentation. Your documentation must be submitted within the 14 - day time frame to request consideration of the original authorization. You can also note the additional items sent in the resubmission in box 35.

If you choose to use the appeal process, it can take up to 90 days for processing the appeal. If both medical necessity and clinical criteria are not met, the appeal will be denied.

The State of Tennessee has established an appropriate process whereby a provider or a member can appeal decisions rendered on prior authorizations. Did you know that all appeals are required to be based upon Medical Necessity? If the patient’s condition does not approach minimal clinical requirements, appeals are considered unwarranted and create expensive and unnecessary work for your office, and all stakeholders. Appeals that are filed that do not meet Medical Necessity or are unwarranted can delay treatment for the patient by up to 90 days.

To avoid wasted time and unnecessary work for your office be sure to verify the clinical criteria and Medical Necessity guidelines to make sure that your procedures are eligible for the Appeal Process.
What is the Deal with the Expedited Appeal?

Will an Expedited Appeal speed up the Appeal Process? The answer is no.

An Expedited Appeal is designed for extreme situations in which a patient’s “life or limb” are in jeopardy. Expedited Appeals are used for patient conditions in which the enrollee’s life, physical health, mental health, or ability to attain, regain, or maintain full function will be jeopardized if the patient waits for up to ninety (90) days for a decision to be made regarding care.

Did you know that this type of condition is a rare occurrence in the dental profession? Unfortunately filing an unwarranted Expedited Appeal will lead to a denial of services. The official criteria for requesting an expedited appeal are as follows:

An appeal will only be expedited if waiting up to ninety (90) days for a decision, “could seriously jeopardize the enrollee’s life, physical health, or mental health or their ability to attain, regain, or maintain full function.”


TennCare Pregnancy & Postpartum Oral Health Program (TPPOHP) Effective: 4/1/22

The primary objective of TennCare’s Pregnancy & Postpartum Oral Health Program (TPPOHP) is to create a dental care system offering quality, medically necessary, covered services to eligible pregnant and postpartum Tennessee residents that results in long-term overall health of the member and her child.

Preventive, diagnostic, and restorative dental treatment is safe throughout pregnancy and is effective in improving and maintaining oral and overall health.

The current standard of care is comprehensive oral health care for pregnant and postpartum women, and it is a safe and effective way to decrease adverse birth outcomes and maternal morbidity.

Maintaining a disease free maternal oral cavity reduces vertical transmission and is the first positive step in achieving oral health in the newborn. Oral health education and nutritional education can help to establish good oral health hygiene habits and dietary habits that will benefit both the mother and child over the course of their lives while leading to improved oral and overall health.

Finally, this program seeks to improve communication between healthcare professionals and establish dental professionals as critical touchstones in the healthcare continuum for this population.
Orthodontic Update

If you resubmit the same information for the same patient within 12 months of consideration, it will not be reviewed, and you will not be paid for a record fee.

Codes D8050 and D8060 can no longer be used. If you submitted one of these codes and it was previously approved please complete the following:

1- Request the previous authorization for these codes to be released from the member’s history
2- Submit an updated treatment plan using a current covered code per TennCare ORM
3- Once the member history is released and the new treatment plan is approved you can proceed with member treatment

If you have any questions Provider Services at 855-418-1623.

Thank you for your continued support in working with us to provide quality dental services to the members of your community.

Sincerely,
Tennessee Network Team- TennesseeProviders@DentaQuest.com

A New DentaQuest Bonus Program Rewards Dental Practices for Focusing on Preventive Care

As part of a long-standing commitment to preventive, value-based care, DentaQuest, TennCare’s dental benefits administrator, introduced a tiered bonus program for providers to prioritize preventive and minimally invasive care. For the contract year ending April 2021, providers were eligible for a total of $252,000 in bonuses.

Providers could earn awards based on meeting and exceeding specific preventive care benchmarks related to silver diamine fluoride (SDF) and sealants, both of which are services clinically proven to stop the progression of tooth decay. The top two provider offices statewide received Program Ambassador status and $15,000 each, while the remaining offices could earn one of 20 gold, 20 silver and 18 bronze awards.

Providers who deliver preventive care to Medicaid enrollees understand just how important treatments like SDF and to a person’s oral health.
One of the Program Ambassadors, Robert Caldwell, DMD, said, “Prevention is the ticket, especially for the youngest patients in our practice. We advise parents how to help their children avoid cavities, and we give them tools to put the odds of not getting a cavity in their favor. Sealants and SDF are two tools with SDF being the newest addition to our arsenal in the battle against tooth decay. These treatments provide more options to parents regarding their children’s oral health. For some of our patients, their diet places them at an especially high risk for developing tooth decay. They also may not receive proper supervision with their home care, so sealants and SDF enable us as dentists to protect our patients’ teeth outside the dental home.”

The other Program Ambassador, William Campbell, DDS, reiterated the importance of prevention, saying, “Preventive care is near and dear to my heart because my father was an early advocate for preventive dentistry and adding fluoride in the water. We follow in his footsteps by incorporating preventive treatments, such as SDF and sealants, into our care plan.”

Always seeking innovative ways to promote minimally invasive care to best improve outcomes for all TennCare enrollees, DentaQuest remains committed to recognizing and celebrating the focused work to prioritize preventive care and improve the oral health of all. (See Pictures Below)
Contact Information

Provider Service
- TennCare: 855.418.1623
  - Press 1 Automated Eligibility (via IVR system)
  - Press 2 Benefits, Eligibility and History
  - Press 3 Claims and Payment Options
- Credentialing Hotline: 800.233.1488

Department Emails
- Electronic Claims Setup and Questions – ddua_providerrelations@dentaquest.com
- Claims Payment Questions – denclaims@dentaquest.com
- Eligibility or Benefit Questions – Dentelig.benefits@dentaquest.com

Utilization Review
- 888.294.9850

Provider Web Questions
- 888.560.8135
- www.dentaquest.com

Corporate
- Main Corporate: 800.417.7140