

Provider Newsletter

Spring/Summer 2020



PLAN
GROUP AND INDIVIDUAL

Welcome Back!

We welcome you back and want to share what we learned during this global pandemic. Each patient visit requires: disinfect and clean, continuous COVID-19 screening, social distancing, Personal Protective Equipment (PPE)...

After Each Patient Visit: Wipe down chairs, countertops and equipment in the reception and treatment areas after each patient visit. This includes pens, clipboards, and common touch surfaces such as doors. Kids toys and magazines should be removed.

Continuous COVID-19 Screening:

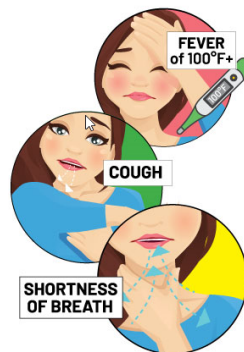
Following safety guidelines from the Centers for Disease Control (CDC) and the American Dental Health Association (ADA), Screen all patients and visitors for common coronavirus symptoms. Ask all patients if they have recently had a fever, shortness of breath, a dry cough, sore throat, or had contact with a confirmed COVID-19 patient. If they are having any suspicious symptoms, please advise them to stay home and contact their physician.

Personal Protective Equipment (PPE)

Doctors and supporting staff should replace their protective masks and coverings between each patient visit. Thorough disinfection and sanitization procedures based on CDC and ADA guidelines.

Social Distancing:

- Seating 6 feet apart in the lobby
- Only patients and guardians allowed inside
- Patients asked to wait outside or in their car; and called when its their turn



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Public Policy

The Plan welcomes Provider Participation on its Public Policy Committee, which meets quarterly at the Plan's corporate office in Orange, California. In order to be considered for membership, please write or call the Plan's Provider Services department at 1-800-811-5111.

Provider Dispute

Resolution Process

As previously notified, providers have the right to utilize the WDS provider dispute resolution process, which was developed to provide a fast, fair and cost-effective dispute resolution mechanism. WDS will not discriminate or retaliate against a provider (including, but not limited to, the cancellation of the provider's contract) because the provider filed a provider dispute. The provider dispute process is available at no cost to the provider. For additional information regarding the provider dispute process, please contact the Provider Relations Department at 1-800-811-5111.

Disclosure of Review Processes

Upon request, the WDS Member Services department will send you a copy of the guidelines and criteria that are used to determine if a service is covered or not when a dentist or WDS provider sends requests to WDS for benefits and/or claims for payment to an enrollee, a dentist or a member of the general public. You may ask for this information by writing to Western Dental Services, Inc., P.O. Box 14227, Orange, CA 92863, or by calling WDS Member Services at 1-800-992-3366.

Credentials

To ensure that your credentials are always current, don't forget to submit your renewed credentials to WDS **prior** to the expiration of the previous credentials. WDS must maintain copies of your current, valid California dental license, malpractice insurance cover page and DEA certificate in your provider file. Also, please remember to notify WDS Provider Relations whenever your office has a new associate dentist or dental specialist or when there are changes or updates to your credentials.

WDS is pleased to announce that in our continued efforts to make provider participation as simple as possible, WDS utilizes the services of Verifpoint, a credentialing organization with whom many of you may already be familiar due to your participation with other dental plans. Verifpoint will collect your credentials on behalf of WDS so that you do not have to provide duplicate information to WDS.

Encounter Data Submission

The California Knox-Keene Act requires all Dental HMOs to monitor plan enrollee utilization. The WDS Utilization Management (UM) Committee meets on a quarterly basis to review utilization trends to ensure that Plan enrollees are receiving services. WDS also uses the utilization data to develop new plans and review existing provider compensation for the managed care dental program.

Please submit your encounter data by the 10th day of the month for the previous month's encounters. To submit monthly encounter data, please use a standard ADA claim form.

Language Assistance Program

Many people who live in Western Dental's service area speak a language other than English. Even if they know some English, they may prefer to speak another language when discussing their dental health or dental plan benefit matters. Having a fully functioning Language Assistance Program ("LAP") in your office is a state requirement that became effective January 1, 2009. Since 2009, we have contacted our provider network seeking services in a foreign language to determine if your offices knew how to handle such requests. Thank you to all offices that have provided the proper language assistance. For those who did not know how, the phone call then changed into an instructional call so that your offices could properly handle such calls in the future. As a reminder, here are some of the most important facts:

- Language Assistance is always available at no cost to both the provider and the member.
- If you need assistance with a Western Dental member calling your office requesting services in another language, you may instruct the patient/member to contact the Member Services department at **1-800-992-3366**, or you may call for them. Simply request to speak to someone who speaks the preferred language, and the Western Dental member service representative will make arrangements for an interpreter to join the call. Please allow time for connection to this service.
- Face-to-face interpreters in languages other than English (including Sign Language) may be available in



some circumstance for special instructions. Western Dental Member Services department at **1-800-992-3366** has more information available about this service.

- Vital Documents such as plan brochures, provider directories, important forms and letters about Western Dental services, language rights and certain outreach materials are produced in English and Spanish in accordance with LAP requirements. You may instruct your patients who need these documents in Spanish to call the plan to receive these materials.

As a reminder, the Language Assistance Program (LAP) bulletin is included with your rosters each month for reference. Additionally, we have sent out a reminder card that you can post near your reception desk to make it easy for your office to contact Western Dental when language assistance is needed. We will continue to make "secret shopper" calls to confirm that our providers understand and know how to use the LAP. If you need more information regarding LAP requirements for contracting dentists, please contact Provider Relations at **1-800-811-5111**.

To Report a PROVIDER DIRECTORY Inaccuracy

In compliance with State requirements for providing an accurate provider directory, Western Dental Services now offers several easy ways to update your information or report a potential provider directory inaccuracy. The regulation requires WDS to verify and confirm with all contracted providers that their information is current and up to date. Notifications will be sent to all contracted providers every six months and will require an affirmative response within 30 days acknowledging the notification was received and information about any applicable changes to the data on file. To report any updates or provider directory inaccuracies contact Provider Relations at 1-800-811-5111, via email at **ProviderDirectoryUpdate@westerndental.com** or by using the online change form available on our website, **<http://www.westerndental.com>**.