

Provider Newsletter

Spring/Summer 2025



Diagnosing and Supporting D4346: Scaling in Presence of Inflammation

Procedure D4346 is used for scaling in the presence of generalized moderate or severe gingival inflammation—without attachment or bone loss. It bridges the gap between routine prophylaxis (D1110) and periodontal scaling and root planing (D4341/D4342).

When to Use D4346

D4346 may be appropriate when the patient presents with:

- Generalized moderate to severe gingival inflammation ($\geq 30\%$ of teeth)
- No radiographic bone loss
- No clinical attachment loss
- Presence of plaque, calculus, and bleeding on probing

This procedure is typically used for patients who have not been treated regularly, are returning to care, or are transitioning from neglect to preventive maintenance.

Diagnostic Support

To support the use of D4346:

- Document generalized moderate to severe gingival inflammation in the clinical notes
- Record bleeding on probing and plaque levels
- Include periodontal charting showing pocket depths within normal range ($\leq 3\text{mm}$)
- Take radiographs confirming the absence of bone loss

Clinical and Billing Considerations

- D4346 is therapeutic, not preventive—it requires diagnosis and documentation.
- It can only be used once the oral evaluation has been completed and the need for treatment identified.
- Do not use with D1110, D4341, D4342, or D4355 on the same date of service.

D4346 is the correct code when moderate to severe inflammation is present without periodontal disease. Accurate diagnosis, detailed documentation, and clear communication with patients and insurers are key to appropriate use.

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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 Relations 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.

Reminder, please respond to the California Senate Bill 137 mailers sent to the office to confirm that the information we currently have in our provider directory is correct and up to date.

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.

New Policy: Encouraging Nonpharmacological Treatments

Nonpharmacological therapies seek to give patients a sense of control and decrease fear, distress, anxiety, and pain without the use of medications. Nonpharmacological therapies are relatively inexpensive and safe when compared with traditional pharmacological treatments. Pursuant to AB 2585, as codified in Health & Safety Code § 124962, Western Dental Services, Inc. ("WDS" or the "Plan") encourages the use of evidence-based non-pharmacological therapies for pain management. Refer to the Provider Guide on the Western Dental website at www.westerndental.com to review the entire policy.

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>.