CENTENE

DENTAL SERVICES

Centene Dental Services is a leader in exceptional, tailored dental benefits and services for Medicaid, Medicare, and Marketplace member products. Each quarter we give you key information you can use to best serve your patients.

A BRIGHTER, HEALTHIER FUTURE. ONE SMILE AT A TIME.

Envolve Dental Doing Business As Centene Dental Services

As previously shared, Envolve Dental is now operating as Centene Dental Services.

Envolve Dental began a rebranding initiative to allow us to better align with our parent company, Centene Corporation. The rebranding resulted in Envolve Dental now being able to do business as Centene Dental Services. This is a name change only and will not impact our operations.

Moving forward you will begin seeing communications from Centene Dental Services; however, all other terms and conditions contained in your agreement with Envolve Dental shall remain unchanged and in full force and effect.

Please note the full implementation of this change will gradually occur throughout 2024. You should continue to utilize the same emails, mailing addresses, and phone numbers you are accustomed to.



Thank you for your continued partnership with Centene Dental Services to provide quality dental care to our members. Should you ever have any questions or concerns, please visit <u>dental.centene.com</u> and select your state to find contact information for your market.

Don't Risk Medicaid Payment Suspension

If you are a provider who is serving Medicaid patients but are not actively enrolled with your state's Medicaid agency, your claim payments may be suspended and/ or you could be terminated from our Medicaid provider network.

Federal regulation requires that all providers who

receive payment for Medicaid services must be screened and actively enrolled with their state's Medicaid office to receive payment. This may include rendering and billing providers, groups, and facilities depending on state-specific requirements.

Be sure to check your enrollment status and keep it

active! If your enrollment lapses, we are notified by the state and we are unable to pay claims for dates of service after your Medicaid enrollment end date. The member cannot be held liable for charges.

Please note: Many state Medicaid offices send several notices and post reminders in their provider portals to make sure providers have the information they need to keep their enrollment active.



Not sure if you are enrolled?

Click here to read more about your state's Medicaid provider registration requirements and who to contact for assistance. We are glad to help!

Record-Breaking Year for Marketplace ACA Plans

In its tenth anniversary since launching in 2014, the Affordable Care Act (ACA) signed up more people than ever to Marketplace plans in 2024, a 30 percent increase year over year.

Through Centene's Ambetter plans, we serve 390,000 members, offering a variety of plans and healthcare services to meet our members' health needs. Currently we provide Adult Dental Buy-Up benefits in 24 states across the country to adults 19 years of age and older in most markets (age 21 and older in Kentucky).

Recently we were pleased to add Delaware to the list of Ambetter states we serve.

Don't miss out on this growing population of dental patients. Make sure they can easily find you by double-checking that your contact information is up-to-date in our Find A Provider directory. If you are not already contracted to see Ambetter members, please reach out to our Network team so we can add you to our Ambetter provider directory soon.

Improve Oral Health Through HEDIS® Measures

Centene Dental Services is committed to improving the health of our community by helping members live healthier lives. Oral health is an important part of a child's tooth and gum development and overall well-being.

Because of your vital role in our members' health, we are asking for your help to ensure our pediatric and adolescent members schedule the following services yearly:

Oral Evaluation, Dental Services (OED)

- Medicaid members under 21 years of age who received a comprehensive or periodic oral evaluation with a dental provider
- Applicable CDT Codes: D0120, D0145, D0150

Topical Fluoride for Children (TFC)

- Medicaid members 1-4 years of age who received at least two fluoride varnish applications
- Applicable CDT Code: D1206

In support of our commitment to disease prevention and the oral health of our members, here are a few ways our providers can help:

- Educate parents/caregivers on the importance of routine dental care and regular fluoride treatments for children
- Reach out to patients who have not had an oral evaluation and help schedule an appointment
- Schedule 6-month appointment while patient is on site and make reminder calls to reduce no-show rates

Why Is Cultural Competency Important?

Cultural competency guidelines are in place to help provide quality care to every member. These guidelines help to prevent health disparities. According to the CDC, even though health overall is better as a nation, there are still a higher "incidence of illness and death among African Americans, Latino/Hispanic Americans, Native Americans, Asian Americans, Alaska Natives, and Pacific Islanders, as compared with the US population as a whole."

Small habits in your office can make a huge impact on the care each member receives. Making sure to have a medical interpreter for a member whose first language is not English will ensure that member understands what they are being told. Completing trainings to understand cultural beliefs, behaviors will help to recommend appropriate care plans for members whose beliefs, customs differ from your own.

Centene Dental Services has embraced the Culturally and Linguistically Appropriate Services Standards, as formulated by the Department of Health and Human



Services, Office of Minority Health. These standards serve as a crucial resource in providing services that are attuned to cultural sensitivities.

We encourage you to complete the U.S. Department of Health and Human Services Physician Practical Guide to Culturally Competent Care, which equips healthcare professionals with the skills necessary to better treat the diverse populations that they serve.

Source: Cultural Competence In Health And Human Services

Poor Dental Health Tied to Worse Brain Health



Brain health may be improved by good oral hygiene, according to a December 2023 study published online in Neurology.

In an observational study of more than 40,000 adults with a mean age of 55 years old with no stroke or dementia history, poor dental care was associated with a variety of markers of white matter brain injury. Those with poor dental health were more likely to be older and male with a higher prevalence of diabetes, hypertension, high cholesterol and obesity.

"Our results suggest that oral health, an easily modifiable process, may be a promising target for very early interventions focused on improving brain health," wrote the authors, led by Cyprien Rivier, MD, MS, with the Department of Neurology, Yale University School of Medicine, New Haven, Connecticut.

Source: Poor Oral Health Tied to Worse Brain Health

Centene and Peach State Health Plan Support Rural Georgia Dental Care

The Centene Foundation and Centene's Georgia subsidiary, Peach State Health Plan, recently announced a \$2.2 million funding commitment to Augusta University. In addition to expanding the university's medical college, the donation will support the launch of a new loan forgiveness program for the university's Dental College of Georgia (DCG) students who commit to five years of practice in rural and underserved areas.

In 2022, the Georgia Board of Health Care Workforce's Annual Dentist Workforce Report found that there were 22 counties in Georgia with no practicing dentist, while the Georgia Department of Community Health found that 127 counties in Georgia are experiencing at least partial shortages in dental care.

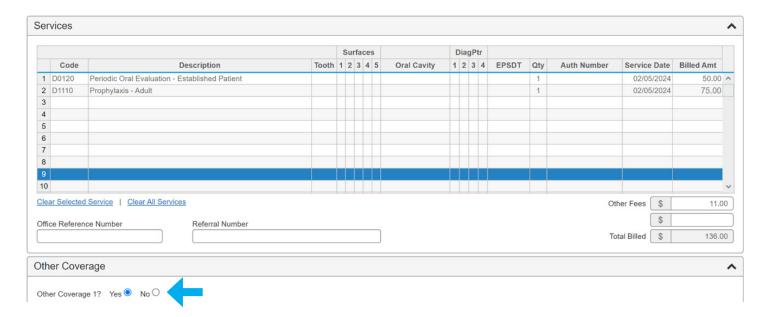
"The DCG's new partnerships with Peach State Health Plan and the rural dentistry program is an innovative milestone in making sure our new dentists are financially capable of opening new practices in rural areas of the state," said Nancy Young, DMD, MED, dean of the DCG at Augusta University.

Coordinating Claims for Faster Payment

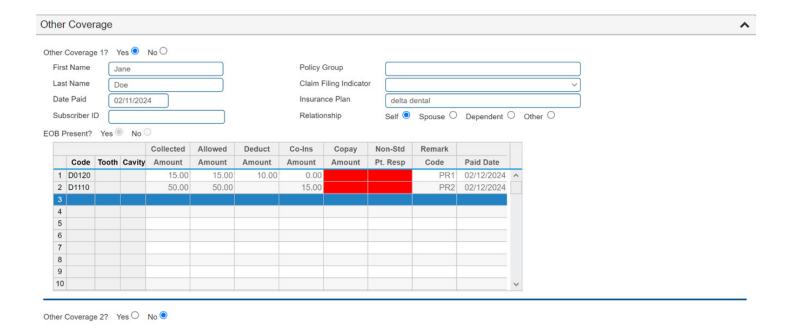
Sometimes patients have other dental insurance, such as through Medicare. Medicaid is the payor of last resort by law, so it is important to coordinate other dental insurance to be sure the claim is paid correctly and avoid having to resubmit a corrected claim.

To submit a claim with primary Explanation of Benefits (EOB) information, follow these steps in the Provider Web Portal (PWP):

- Start your claim in the PWP as you would normally do.
- Select Yes for Other Coverage.



• Complete the primary insurance information including line for line of what the primary insurance paid.



- Provider is responsible for entering the coordination of benefits. This should match line for line what was processed through the primary insurance.
 - > Breakdown of needed information:
 - Collected Amount: The collected amount is what the primary insurance paid to the provider for services rendered.
 - Allowed Amount: The allowed amount is what the primary insurance allows for the services rendered according to the benefit plan.
 - Deduct Amount: If the primary EOB states the member has a deductible for the service rendered, this filed should indicate that amount; if no deductible, please enter in 0.00.
 - Co-Ins Amount: If the primary EOB states the member has a co-insurance amount for the services rendered, this field should indicate that amount; if no co-insurance, please enter in 0.00.
 - Remark Code: A remark code will need to be noted under this section based on what the primary states:
 - Remark code PR1 should be indicated if the primary EOB indicates a deductible.
 - Remark code **PR2** should be indicated if the primary EOB indicates a co-insurance.
- Attach the primary EOB via the attached documents section.



You are now able to submit the claim for coordination of benefits.

Local Market Reminders

Nebraska Medicaid – Starting this year, we are the new dental administrator for Nebraska Total Care Medicaid members.

Ohio Medicaid – All providers contracted with us and registered to administer Medicaid benefits with the state must be displayed in the Find A Provider (FAP). Provider suppression is not allowed for Medicaid.

Louisiana Medicaid – Adult value-add dental benefits were terminated with Louisiana Healthcare Connections as of December 31, 2023.

DENTAL CARE BY THE NUMBERS

Centene Dental Services Proudly Serves



28 STATES



77,000 PROVIDERS







About Us

Envolve Dental, doing business as **Centene Dental Services**, is a wholly owned Centene Corporation. Our innovative client solutions, education programs, personal attention, and provider support create a comprehensive dental care system that reduces administrative burden for providers and offers quality dental services for our clients' members. Questions? Please contact our Customer Service team.



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