

# DentalPro News

A publication for participating HMSA dental care providers, facilities, and their staff

Fall 2020

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# FEATURE ARTICLES

#### **Coreo Update**

HMSA wants to help you deliver the very best dental and medical care to your patients by giving you access to current patient health information, including allergies, medications,

# COREO

and lab values. Since Jan. 1, 2020, Hawaii dental providers have been activating their accounts on Coreo<sup>™</sup>, a technology platform that integrates our health system virtually. By using this platform regularly, you and your dental team can help raise the standard of care available to your patients who have HMSA medical and dental insurance.

#### **Coreo Activation Stipend**

To show our appreciation for activating your Coreo account and joining HMSA's Connected Care<sup>SM</sup> provider community, we're giving a \$100 activation stipend to all providers who activated their Coreo accounts between Jan. 1 and Sept. 30, 2020.

#### **HMSA Certificate of Excellence**

Providers who activate their Coreo account will also receive an HMSA Certificate of Excellence. The certificate will be shipped ready to be displayed in your office's reception area. We want all of your patients to know, as we do, that you're more than just their dentist — you care about them and you're looking out for their total health by using Coreo.



If you have any questions, please contact one of HMSA's dental network managers, Jessica Chang at 538-8904 or Ellie Kelley-Miyashiro at 538-8933, both on Oahu. You can also email us at connectedcare@lsvusa.com. For the registration link, FAQs, and educational resources, visit hmsadental.com/providers/connected-care.

Aileen Lapitan, D.M.D., of Waipahu holding her HMSA Certificate of Excellence.

Coreo is a trademark of Navvis.

Navvis is an independent company that provides Coreo<sup>™</sup>, an online tool providing a virtual integrated health system for HMSA providers on behalf of HMSA.



P.O. Box 1320 Honolulu, HI 96807-1320 Dental Call Center (808) 948-6440 on Oahu Toll-free (800) 792-4672 Fax (808) 538-8996 Hours: 8 a.m. to 5 p.m. Monday through Friday hmsa.com/dental

#### Oral Health for Total Health: Helping you promote better overall health for your patients

As you're likely aware, our Oral Health for Total Health<sup>SM</sup> (OHTH) program offers enhanced dental benefits for enrolled members. These benefits are condition-specific and help to promote better total health outcomes. We want you to have the best opportunities to promote ongoing good health through enhanced dental benefits. If your patient is enrolled in our program, they're eligible for the benefits listed below based on the condition they're enrolled for.

The good news is that Coreo can help you quickly determine which of your HMSA patients are enrolled in OHTH. This makes it easier than ever to appropriately schedule recalls based on the enhanced dental benefits.

Covered Medical Conditions and Enhanced Dental Benefits	Automatic Program Enrollment	Two Additional Cleanings or Periodontal Maintenance Visits per Year	Oral Cancer Screenings Once Every 6 Months & Fluoride Treatments Once Every 3 Months	Periodontal Scaling* Covered 100% with No Out-of-Pocket Expense
Diabetes	1	1		✓
Coronary artery disease	1	1		✓
Stroke	1	1		✓
Pregnancy		1		1
Oral Cancer	1	1	1	
Head and neck cancers	1	1	1	
Sjögren's syndrome	1	1	1	

\*A member's plan must include periodontal coverage to receive this benefit.

#### PPE reimbursement in response to COVID-19

As you welcome patients back to your office, we want to help ensure the safety of you, your staff, and your patients. So HMSA is continuing to authorize participating dental providers to bill charges to HMSA for personal protective equipment (PPE) using CDT code D1999, per visit per member for dates of service from May 1 through Dec. 31, 2020. The reimbursement for this service is \$10.

Please note that this reimbursement isn't applicable for Costco plans. Secondary insurance isn't eligible. Orthodontists will need to file a claim for member visits to receive reimbursement; this won't be included in your monthly scheduled payments.

A maximum allowable charge will be added to the fee schedules. This compensation will be in accordance with the appropriate fee schedule and won't apply to the member's annual maximum. A maximum allowable charge will apply and balance billing isn't permitted.

The use of D1999 requires the explanation "PPE" be typed in the Speed eClaims expanded form.

#### Sign Up for Electronic Funds Transfer

Electronic funds transfer (EFT) is the paperless way to move money from one account to another, helping you manage your cash flow and save time. It's been used successfully for decades in nearly every industry. When you receive a letter from HMSA urging you to embrace EFT, we encourage you to register.

To enroll:

- Go to hmsa.com/dental and sign in to MyDentalCoverage with your user ID and password.
- Click the Electronic Funds Transfer link to access the application.
- Click Step 1 Request PIN. A message will say that your personal identification number (PIN) is being sent to your practice's mailing address. The PIN will arrive within 10 days of your request.
- When you receive your PIN, log in again. Enter your PIN and banking information to activate EFT. You need to do this only once.
- Add your office's bank information and complete the enrollment process.

Don't miss out on the benefits of EFT:

- Receive payments even when you're on vacation or at a conference.
- Skip the trip to the bank to deposit claim payments.
- View electronic records online and print them as needed.
- Worry less and avoid lost or stolen checks. EFT is safer than paper.
- Enjoy security features. Enter, change, or update your banking information as desired. No one but you can access your information.

#### **Questions?**

Call Dental Electronic Services at 1 (800) 633-5430 toll-free.

Monday through Friday before 11 a.m. Hawaii time.

#### **Frequently Asked Questions**

#### Are there any fees from HMSA for EFT?

No. HMSA doesn't charge fees. However, check with your bank to see if it applies any fees to EFT.

#### When will I receive payments via EFT?

When you enroll in EFT, you'll receive your PIN within 10 days of your request. Return to the EFT page on our website and enter your PIN to activate EFT. Following activation, we'll send all claim payments via EFT. On average, from the regularly scheduled Thursday payment cycle, payments are deposited on Tuesday with some exceptions for holidays.

#### Can multiple dentists be included in one EFT enrollment?

Yes. All dentists associated with one tax identification number (TIN) can be simultaneously enrolled in EFT. Log in to the EFT registration page with the user ID and password associated with the group TIN. You may enroll all dentists associated with the group TIN or only selected dentists. If the dentists in your office submit claims under individual TINs, you'll need to individually register each TIN separately for EFT.

#### What information do I need to enroll in EFT?

You'll need your MyDentalCoverage user ID and password, bank routing number, bank account number, and account type.

#### How do I edit or remove EFT?

Log on to the website and select the Electronic Funds Transfer link. Then select the provider(s) to edit or remove EFT and follow the instructions.

#### Will I still receive paper Explanation of Benefits (EOBs) after I sign up for EFT?

No. You won't receive paper EOBs in the mail. If you need to view or print an EOB, log in to MyDentalCoverage and click the Payments and EOBs link. Then view or print your EOBs.

#### How do I know my banking information will remain secure?

This feature is designed to allow only authorized users to access your EFT account. It's recommended that you set up a user ID and password so only those you authorize can view, add, change, or remove your banking information.

#### 2021 MAC Fee Changes

Starting with claims with dates of service on or after Jan. 1, 2021, the posted maximum allowable charge (MAC) fees will be used for payments to all HMSA participating providers. We're increasing our HMSA Dental PPO fee schedule with an emphasis on codes that matter most to your practice.

Changes in reimbursement will vary depending on the mix of services performed. HMSA will continue to review and, if warranted, make annual adjustments to the fee schedule to ensure that the MAC fees remain fair and competitive.

You'll find the 2021 fee schedules posted by Dec. 15, 2020, on hmsa.com/dental on the Provider Secured Site.

#### Welcome HMSA Dental Network Manager Ellie Kelley-Miyashiro



Ellie Kelley-Miyashiro, R.D.H.

We're happy to welcome Ellie Kelley-Miyashiro, R.D.H., as the newest member of our provider network team! Ellie is a 2003 graduate of the University of Hawaii at Manoa Dental Hygiene program. She's worked in private practice for more than 25 years in Honolulu, first as a dental assistant and then as a dental hygienist. Ellie transitioned her clinical experience into dental sales in 2013 as territory manager for Philips Sonicare and most recently for Colgate Oral Pharmaceuticals.

Ellie's dedication to oral health and access to care are evident by her long-standing involvement with the Hawaii Dental Hygienists' Association (HDHA). She's served as president of HDHA twice and continues to mentor new leadership.

Ellie's passion, clinical training, and leadership skills make her a true asset to the HMSA Dental team, our providers, and our members. Please join us in welcoming Ellie to the HMSA Dental ohana.

### **BRUSHING UP**

#### Hawaii General Excise Tax Reimbursement Changes

Administrative enhancements are in effect for the Fed 87, Fed 117 HMO, and Fed 27 Accidental Dental plans.

As of November 2019, the monthly process that manually calculated and paid Hawaii general excise tax (GET) changed to a systematic process that calculated and paid the GET when tax procedure code D9985 was submitted on a claim. The GET is displayed on the explanation of benefits (EOB) and is included with the claim payment. This process applies to both paper and electronic claims.

Here are some key points:

- GET is only covered for Fed87, Fed117, and Fed 27 plans.
- Billing providers must participate with HMSA to receive GET payment.
- GET is calculated based on the performing provider's location.
- GET processing applies to all claim submission types (paper and electronic).
- GET is calculated when the tax procedure code D9985 is submitted on the claim:
  - If there are multiple dates of service on a claim, D9985 must be submitted for each date of service.
  - If the D9985 is omitted in error on a claim form, the provider's office will need to call HMSA Dental customer service at 948-6440 on Oahu or 1 (800) 792-4672 toll-free on the Neighbor Islands to have the procedure code D9985 added to their claim and include the provider's charge.
- GET is calculated based on allowance of taxable services and not the provider's charge for D9985.
- GET payment doesn't exceed the provider's charge for D9985.
- GET isn't paid on non-covered/ineligible services.
- If D9985 is submitted on a predetermination, GET is calculated:
  - If all services from the predetermination are subsequently submitted with the same service date (for payment), the GET applies to all services.
  - If services from the predetermination are subsequently submitted with different service dates (for payment), the GET only applies to one date of service. To obtain GET payment for the other service dates, submit the procedure codes and D9985 on a new claim form or call HMSA Dental customer service to add D9985 to the claim.

#### **Submitting Claims for Members with Two HMSA Plans**

When a member has two HMSA plans, your office will need to first submit the claim under the primary plan, then resubmit under the member's secondary plan. HMSA Dental customer service can help you determine coordination of benefits for the member.

#### Submitting Corrected Claims

When filing a corrected claim, complete the entire claim form. In the remarks section, box 35 of the 2019 ADA claim form, enter the corrected information and the original claim number. We may request the patient's records. Indicate "corrected claim" at the top right corner of the claim form and submit the corrected claim to:

HMSA Dental Attn: Corrected Claims P.O. Box 69437 Harrisburg, PA 17106-9437

Please note that corrected claims should not be sent to the Elk Grove Village address. This would register as a duplicate claim and result in a second denial.

#### Assistance with Speed eClaims and MyDental Coverage – Dental Electronic Services

If you have questions about filing claims electronically or MyDental Coverage, please contact Dental Electronic Services at 1 (800) 633-5430 toll-free, Monday through Friday before 11 a.m. Hawaii time.

#### **Servicing Family Members**

Services for a dentist's immediate family members are not covered. Please note that HMSA plans don't cover services rendered by dentists to members of their immediate family such as parents, children, or a spouse. If payment for a family member is made in error, HMSA will recover all payments made and the member will be responsible for 100% of the charges.

#### **FMX/Bitewing Guidelines**

If bitewings have been taken before an FMX, no limitations apply and both procedures will be paid. If bitewings are taken within 12 months after an FMX is taken, payment will be denied due to the once-in-12-months limit. The member will be responsible for the cost of the bitewings.

#### **Guidelines for D4266**

When considering coverage for D4266 (Guided Tissue Regeneration — Resorbable Barrier, Per Site), please note there are limits. The procedure isn't covered if the tooth is extracted or when done in conjunction with covered periodontal surgical services (D4240, D4241, D4260, and D4261) or oral surgery codes (D7000 – D7999). D4266 will be denied if it's performed on the same day as D4277 or D4278. The frequency limit is once per site in a three-year period and the minimum age is 18 years.

#### **Reminder of Prior Authorizations for PEDI Services**

There are select pediatric dental services that require prior authorization (PA) for patients ages 0 through 18 years. Please refer to the 2020 HMSA CDT Health Care Reform (HCR) manuals for the specific procedure codes that require PA. Services completed without PA from HMSA won't be covered.

PA is also required for medically necessary orthodontic care. Qualified patients must have a cleft lip, cleft palate, or other severe facial birth defect/injury that affects speech, swallowing, or chewing. Only orthodontists may render orthodontic services.

#### **Appeals and Dispute Resolution**

If we deny payment of a claim, you or your patient has the right to appeal. The appeal must be in writing and received by HMSA within a specific time period of the denial depending on the patient's plan (see chart below). We'll immediately acknowledge the appeal and respond in writing within a specific period depending on the patient's plan. You may request an expedited appeal if you feel that any delay would prevent a patient from receiving urgently needed services.

	Private business	Federal Plan 87	FEP Basic and Standard	FEP BlueDental
Submission period to file appeal	One year from the date of denial	Six months from the date of denial	Six months from the date of denial	Six months from the date of denial
Response time by HMSA (non-urgent claims)	60 calendar days from receipt of appeals information	30 days from the date of written request to pay claim, deny claim or request for more information	30 days from the date of written request to pay claim, deny claim or request for more information	30 days from the date of written request to pay claim, deny claim or request for more information
Response time by HMSA (urgent care)	72 hours	72 hours: if more information is needed, we will respond within 24 hours after receipt of claim	72 hours	72 hours
Mailing address for appeals	Dental Claims Administrator P.O. Box 69437 Harrisburg, PA 17106-9436 or Fax to: 1 (888) 667-8388	Dental Claims Administrator P.O. Box 69437 Harrisburg, PA 17106-9436	Dental Claims Reconsideration HMSA – FEP Dental P.O. Box 1346 Honolulu, HI 96807-1346	FEP BlueDental Claims Appeals P.O. Box 551 Minneapolis, MN 55440-0551
Customer service phone number 1 (800) and 1 (855) numbers are toll-free	HMSA Dental Oahu: 948-6440 Neighbor Island: 1 (800) 792-4672	HMSA Dental Oahu: 948-6440 Neighbor Island: 1 (800) 792-4672	Oahu: 948-6281 Neighbor Island: 1 (800) 966-6198	In the U.S.: 1 (855) 504-BLUE or 1 (855) 504-2583 (International) Call Collect: 1 (651) 994-BLUE (2583)

#### Type 1 and Type 2 NPIs

The National Provider Identifier (NPI) is a government-issued, 10-digit identification number for individual health care providers and organizations.

- A type 1 NPI applies to a single individual.
- A type 2 NPI applies to an organization.

The numbers are randomly assigned and contain no coded information about the individual or organization. The NPI will never expire and your individual type 1 NPI will remain the same even if you change jobs or locations.

Both HMSA and federal law require each network dentist to have a type 1 NPI regardless of whether the dentist submits claims electronically. We defer the decision of acquiring and using a type 2 NPI to your office.

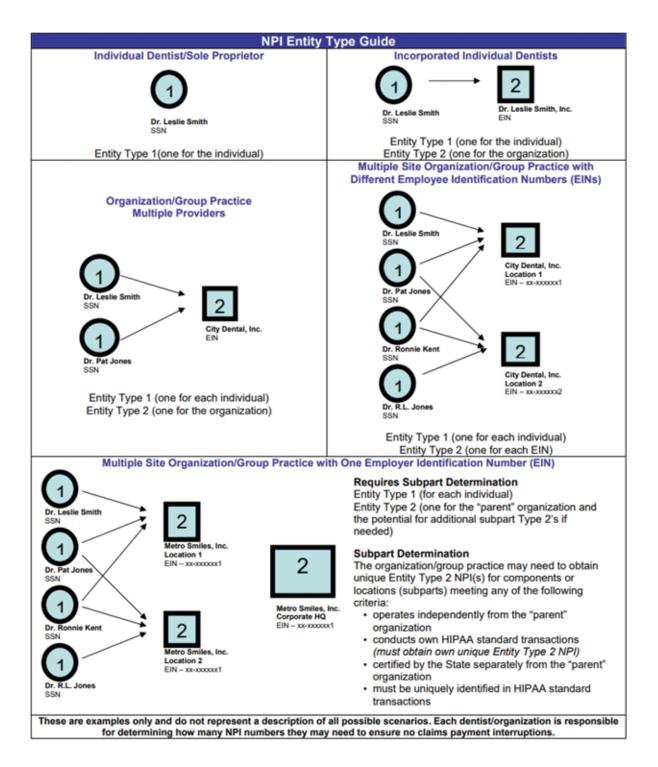
Offices with one provider often file with a type 1 NPI but may apply for and use a type 2 NPI for business reasons. Offices with multiple providers often file with a type 2 NPI but may elect to use a type 1 NPI for business reasons. The decision you make must be relayed to your dental network manager to ensure proper record setup for claims-filing purposes.

#### **Treating Dentist**

Type 1 NPI information should always be applied to the treating provider portions of the claim. This will correlate to the treating provider's appropriate participating status and specialty fee schedule.

#### **Billing Dentist or Dental Entity**

The use of a type 1 or type 2 for the billing portion of the claim is influenced by the provider's business decisions and will impact pay-to information and tax filing.



#### **Reminder to Update Provider Information**

Please report changes to your practice address, phone numbers, tax ID numbers, and practice affiliations to us as soon as possible. This ensures that we have current information in our directories for our members and that you'll receive the materials that we send to you. Up-to-date information also helps to ensure accurate and timely claims payment and 1099 tax form distribution.

Please visit our website at hmsadental.com/find-a-dentist.aspx to double-check information such as your name, practice address, phone number, website, and accepting patient status. If you haven't already provided us with your office email address, please email it to dentalproviderrelations@bshi.net. We periodically conduct provider surveys by email, which are an opportunity for you to give us valuable feedback on how we can better serve you.

To make any changes, call your dental network manager.

# CLINICAL FOCUS

#### Dr. Solomon Brotman to Present a Virtual CE Course

The Hawaii Dental Hygienists' Association (HDHA) is going virtual for their 29th Annual Scientific Session. Solomon Brotman, D.D.S., will kick off presentations with a two-CE course discussing Medical and Dental Trends for Hygienists. Those of you who attended one of our 2019 HMSA CE sessions know what a dynamic and informed speaker he is.



#### Dr. Brotman's course description:

The coronavirus and an aging, medically compromised population makes a dental hygienist's job even more difficult. This program will explain the evolution of health care delivery, which now is responsible for 18% of our nation's gross domestic product.

The impact of the COVID-19 pandemic and what it means to those of us who are used to wearing masks and gloves changes almost daily. Our knowledge of medical conditions is vastly more important now than in the past. The presentation ends with a discussion of the future of the business and science of our professions and what it'll mean for dental hygienists and dentists.



Solomon Brotman, D.D.S.

This event is open to both dentists and hygienists and will be held Nov. 8, 2020. Registration information can be found at hdha.net/services.html. Contact HDHA President Lisa Forbes at lisa.forbes411@gmail.com for assistance.

#### 2021 Hawaii Dental Association (HDA) Convention Canceled

While the 2021 Annual Convention has been cancelled, HDA plans to host a series of virtual CE courses throughout the year. We encourage dental professionals to check updates from HDA and keep up their CE coursework in anticipation of the 2021 Hawaii dental license renewal requirements.

#### **Op-Ed Article by Dr. Michael Nishime**



Michael Nishime, D.D.S.

# Is there any science behind all the recommendations dental practices are inundated with during the COVID-19 pandemic?

As I write this article, we're in the middle of our second two-week shutdown. As an essential business, we're not forced to shut down or go on an emergencyonly schedule. The facts show that there have been no transmission of COVID-19 in dental offices in the U.S.

I think that dentists and dental staff should give themselves a pat on the back for being "the" experts in infection control procedures beyond what medical offices or retail establishments do.

It's been ingrained in us since the early '80s and the AIDS epidemic to practice "universal precaution." If you were in dental school or practicing dentistry in the early '80s and before, you probably were practicing without wearing a mask or gloves but probably wearing protective eye wear. It was called "wet-fingered dentistry." It seems like a miracle we didn't come down with some kind of infection or pass on an infection to our patients. I think you can't discount the fact that humans have an incredible immune system that protects us.<sup>1</sup>

That being said, it's important to take the threat of COVID-19 seriously and there are some extra precautions that we're recommended to take. Although a lot of these recommendations may not be based on science, it makes common sense to follow if they're not costing us an arm and a leg to employ. The CDC, OSHA, and ADA all have guidelines we should follow, and we have the dental/medical experts who are recommending different types of drugs, tests, and PPE and other equipment we need to keep us and our patients alive and safe.

So who do you believe? This is where it gets difficult. As this pandemic evolves, we learn new things and recommendations change. We went from the virus being primarily transmitted from surface contamination to droplet transmission to possible aerosol transmission.

I'm sure the majority of dental offices are taking the extra precautions these days like triaging your patients over the phone when confirming appointments, taking the temperature of your patients and staff, having all staff and patients wear masks, hand sanitizing of patients when they arrive, having the patients sign a form that they have no symptoms, keeping patients physically separated by at least six feet in your waiting room or have them wait outside your office until you call them, controling the traffic flow in your office, minimize talking time with a patient since the critical time for an interpersonal infection while talking seems to be 5 – 15 minutes, having patients double rinse for 30 seconds with a povidone-iodine or H2O2 rinse (note that there's no clinical data that exists on SARS CoV-2 virus being killed by oral rinsing), using a rubber dam, using proper doffing and donning technique for your mask and isolation gown, and using the HVE when using aerosol producing equipment like the high-speed hand piece and Cavitron.

It's also important that your vacuum system has adequate suction. According to Rella Christensen, it should be able to suction 1 liter of water within eight seconds. It was shown in an article written by Harrel and Molinari that the use of the HVE reduces the aerosol produced by the Cavitron by 95%.<sup>2.3</sup>

So what about the 5% that escapes? Is there enough virus in this 5% to cause an infection<sup>4</sup>? No one really knows. How can we further mitigate the risk of aerosol transmission? Would it help to get an extra oral suction device? If you look at research done by Gordon Christensen, it appears that an extra oral suction device has questionable value. How about the use of an air purifier?<sup>5</sup>The CDC has recommended using an air purifier in the dental office long before this pandemic. Most dental offices don't have windows to open to help circulate the air,<sup>6</sup> so an air purifier is recommended to turn over and filter the air.

How about the use of cold fogging?<sup>7</sup> If the virus is in the aerosol we produce, it can hang around in the air for hours. Cold fogging will help decontaminate the air, and the safest disinfectant to use is hypochlorous acid (HOCL).<sup>8</sup> It's quite remarkable that other industries have been using HOCL for years and it's only during this pandemic that dentistry has become aware of HOCL. Not only is it a very effective disinfectant, but it's safe even if you breathe it in since it is basically water, vinegar, and salt. You can buy it already made or you can make it in your office very cheaply.

How about the use of UVC?<sup>9, 10</sup> There is science to show that UV light will kill viruses and bacteria, but it's harmful for humans to be exposed to UVC.<sup>11</sup> If you use UVC, you'll need to vacate the room it is being used in. Is this a practical solution for you? Far-UVC is now coming to the market and does the same job of killing viruses and bacteria, while being safe for humans to be exposed to.<sup>12</sup> If you're thinking of using UVC, you might want to wait till far-UVC becomes readily available.

I think the key takeaway is that none of the experts are exactly sure what works in a dental office to minimize the risk of transmission of the SARS CoV-2, so the best way to protect ourselves and our patients is to use multiple layers of protective procedures and equipment. It's kind of like how we protect our computers from viral infection.

Dentistry will survive this pandemic. Dentists are a very resilient group. We've survived the rigors of dental school and learned to survive opening our own dental practice with no clue about how to run it (LOL). A pandemic doesn't decrease the need for dentistry, so hold your head high and feel fortunate that we're in a great profession.

I just hope the golf courses open soon. Got to have balance in your life, too.

#### References:

- 1. The role of the immune system beyond the fight against infection, Sattler S, Adv Exp Med Biol, 2017
- 2. Aerosols and splatter in dentistry: A brief review of the literature and infection control implications, S Harrel and J Molinari, JADA, 2004
- 3. A laboratory comparison of evacuation devices on aerosol reduction, Jacks, J Dent Hyg, 2002
- 4. Natural ventilation for infection control in health-care settings, Atkinson J, WHO, 2009
- 5. The effectiveness of an air cleaner in controlling droplet/aerosol particle dispersion emitted from a patients mouth in the indoor environment of dental clinics, Chen C, etal, JR Soc Interface, 2010
- 6. The virus inoculum volume influence outcome of influenza A infection in mice, Miller D, etal, Lab Anim, 2013
- 7. Evaluation of liquid and fog based application of Sterilox hypochlorus acid solution for surface inactivation of human norovirus, Park G, etal, App Inviron Microbiol, 2007
- Evaluation of sprayed hypochlorus acid solutions for their virucidal activity against avian influenza virus through in vitro experiments, Hakimullah, etal, J Vet Med Sci, 2015
- 9. Evaluation of an ultraviolet C (UVC) light-emitting device for disinfection of high touch surfaces in hospital critical areas, Casini B, etal, Int J Environ Res Public Health, 2019
- Effectiveness of an ultraviolet-C disinfection system for reduction of healthcare associated pathogens, Yang J, etal, J Microbiol Immunol Infect, 2019
- 11. Ultraviolet light degrades the mechanical and structural properties of human stratum corneum, Lipski Z, etal, J Mech Behav Biomed Mater, 2019
- 12. Far-UVC light (222 nm) efficiently and safely inactivates airborne human coronaviruses, Buonanno M, etal, Sci Rep, 2020

#### Fall 2020

#### **New/Deleted CDT Codes for 2021**

The American Dental Association (ADA) updates its CDT codes every year. The 2020 ADA Code Maintenance Committee provided changes to CDT codes that will be effective on Jan. 1, 2021. To buy the ADA CDT 2021: *Dental Procedure Codes book*, go to catalog.ada.org.

#### **2021 Benefit Manuals and Fee Schedules**

We continue to encourage you to use our comprehensive and secure dental website, hmsa.com/dental. Updated reference manuals and resources will be available by Dec. 15, 2020, such as:

- 2021 Fee Schedules
- 2021 Dental Manual
- 2021 CDT Manual
- 2021 CDT HCR PPO
- 2021 CDT HCR HMO

There are many valuable resources on our website to help you manage your practice effectively.

## WELCOME: E KOMO MAI

#### **New Groups and Providers**

#### New Groups (partial list)

ADP Total Source Hawaii Biowaste Systems MP Management Services Ohia Waikiki Hotel Photonworks Engineering Retina Institute of Hawaii Sky Waikiki Sperber Landscape Companies of Kauai Union Mak Corporation (Olive Garden, IHOP, Applebee's) Vigor Marine

#### **New Participating Providers**

#### **General Dentistry**

HAWAII ISLAND Spivak, Alexander J., D.M.D.

KAUAI Peers, Matthew L., D.M.D. Shimabukuro, Scott S., D.D.S. Shimabukuro, Shea, D.D.S.

LANAI Namkung, Yuree, D.D.S. Oak, Esther W., D.D.S. Shinsato, Shayd T. N., D.D.S.

MAUI Momberg, Landon Michael, D.M.D. Namkung, Yuree, D.D.S. Oak, Esther W., D.D.S. Shinsato, Shayd T. N., D.D.S.

#### OAHU

Catalan, Alec K., D.D.S. Choi, Sung R., D.D.S. Fukada, Keileen M., D.D.S. Hsia, Hsuan, D.D.S. Lau, Tracy L., D.D.S. Morgan, Tyler D., D.M.D. Namkung, Yuree, D.D.S. Oak, Esther W., D.D.S. Shinsato, Shayd T. N., D.D.S. Sicilia, William R., D.M.D. Sjulson, Justin D., D.D.S.

#### **Pediatric Dentistry**

HAWAII Bejasa, Rizza Aurica M., D.D.S. Estelle, Kyle P., D.M.D. Keeton, William J., D.D.S.

KAUAI Bejasa, Rizza Aurica M., D.D.S. Keeton, William J., D.D.S.

MAUI Bejasa, Rizza Aurica M., D.D.S. Keeton, William J., D.D.S.

#### OAHU

Bejasa, Rizza Aurica M., D.D.S. Keeton, William J., D.D.S. Pham, Tuan, D.D.S. Sueda, Stephen Y., D.D.S. Woody, Kevin M., D.M.D. Yim, Christopher E. K. M., D.D.S.

# OUR COMMITMENT TO SERVE YOU

#### Warm Aloha to our Dental Network Providers

As another year draws to a close, we'd like to thank you for your continued support and confidence in HMSA's participating provider program with over 900 dentists statewide and growing. Our members rely on you for their dental care.

As a partner in your patients' well-being, we look forward to making positive strides in their overall health. While we're not meeting as often in person, our call centers are in full operation and our network managers are available to set up virtual meetings with your office as needed.

We wish you and your staff our warmest aloha during this holiday season and best wishes for a happy and healthy 2021.

ROUTING BOX					
Date Received					
Please route to:					
Dentist					
Office Manager					
Dental Hygienist					
Dental Assistant					
Other:					



HMSA Dental Services P.O. Box 1320 Honolulu, HI 96807-1320