



Tips for submitting claims to Aetna Aetna Dental® Plans

Submit claims electronically

Electronic claims and encounters (including those for DMO® plans, orthodontic claims and predeterminations) typically experience faster reimbursement and fewer rejections. Electronic submissions must indicate the billing dentist's National Provider Identifier (NPI) and the pay-to dentist's NPI, if they're not the same.

Claims attachments are not always necessary

Review the "Claim Documentation Guidelines." Or, submit claims without attachments. We will request any attachments if needed. Please note: Encounter submissions never require attachments.

Submit attachments electronically: Use an electronic attachment vendor such as National Electronic Attachment, Inc. (NEA). Submitting attachments this way helps expedite reviews of X-rays, Explanation of Benefits (EOB) statements, periodontal charting and more for the processing of electronic claims. For more information, visit www.aetnadental.com.

Review our paper claims tips

If you cannot submit claims electronically, review a list of dos and don'ts for submitting paper claims at www.aetnadental.com.

Send only one claim

Our system will automatically reject/deny exact duplicates of claims previously submitted. You only need to submit a claim once.

Check the status of a claim

Visit www.aetnadental.com or call the Aetna Voice Advantage® telephone self-service system at **1-800-451-7715**. The Aetna Voice Advantage system can also fax the information back to you.

Call in date(s) of service for existing predeterminations

A predetermination is not required, but is suggested, to help the patient understand his or her benefits before a procedure is performed. If you submit a predetermination, you will not need to submit a final claim as long as the services match. Once the service is performed, simply call our National Dentist Line, **1-800-451-7715**, with the date(s) of service. A final claim is not needed.

Double-check patient information

Claims processing might be delayed if the claim has incorrect patient information.

Include full-time student information

Your patient's dental plan may require student verification for applicable dependents. Full-time student information can be provided in two ways:

1. Submit a completed claims form that includes the full-time student information.
2. Have the member call us with the information.

Use the appropriate CDT* code

Submit dental treatment using the appropriate CDT codes. Invalid and obsolete codes may cause a delay or denial of your claim.

Include tooth number(s)

A claim for a periodontal procedure must include the quadrant ID. If it is not a full quadrant, include the tooth numbers involved in the procedure. Submit prior periodontal history for patients covered under a new policy.

Also, include the numbers of all other missing teeth and dates of extraction when submitting claims for prosthodontics.

Submit initial and replacement detail

When submitting a claim for:

- **Initial placement of a denture or bridgework** — include the numbers of all missing teeth and dates of extraction.
- **Dentures or bridgework** — include the date the original appliance was placed, the date that any additional teeth were extracted and the tooth number for any other teeth missing in that arch.
- **Crowns** — indicate if it is the initial placement or include the date of prior placement.

Always use the date services are actually completed

Dental work is considered completed on the actual date the patient receives the crown/denture/bridge. Or, the date root canal therapy is completed. **Please use the completion or seat date** when you submit for payment of these procedures.

Sign up for electronic funds transfer (EFT)

With EFT, your claims and DMO monthly compensation payments will be deposited directly into the bank account you select. Visit www.aetnadental.com for information on how to enroll.

Sign up for electronic remittance advice (ERA)

Stop receiving paper EOBs via mail. For additional information on ERA, or to register, visit www.aetnadental.com.

Include other dental coverage information on all claims submissions

When Aetna is the secondary payer, please submit the claim only after the primary payer has fully processed the claim. Be sure to include all information about other dental coverage.

For tips on submitting orthodontic claims, please visit www.aetnadental.com.

*CDT = current dental terminology.

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