



DENTAL PROVIDER MANUAL

Connecticut Dental Health Partnership (The dental plan for HUSKY Health)

The Connecticut Department of Social Services

BeneCare Dental Plans



Welcome to the Connecticut Dental Health Partnership

Dear Doctor:

We are pleased to announce that the State of Connecticut's publicly funded dental care programs, HUSKY A, HUSKY B, HUSKY C (Traditional Medicaid Title XIX Fee For Service) and HUSKY D (Medicaid For Low Income Adults-formerly State Administered General Assistance "SAGA"), now have been combined into one dental plan with a new name: the **Connecticut Dental Health Partnership (CTDHP)**. CTDHP oversees the dental plan for the Department of Social Services (DSS) dental care programs which cover more than 750,000 residents in Connecticut. Participants in the program include the aged, blind and disabled, low income families and adults as well as the state sponsored insurance plan known as SCHIP. The number of beneficiaries is approximately evenly split between children and adults.

DSS is the lead agency for the State of Connecticut which provides a broad range of services to the elderly, people with disabilities, families and individuals who need assistance in maintaining or achieving their full potential for self-direction, self-reliance and independent living. DSS administers over 90 legislatively authorized programs and operates on one-third of the state budget. DSS also administers the Medical Assistance Program which includes the Connecticut Dental Health Partnership.

BeneCare Dental Plans was selected by DSS, in 2008, as the Administrative Service Organization (ASO) to manage the Connecticut Dental Health Partnership for the State of Connecticut. BeneCare is a dental benefit management company that operates dental benefit programs for fully insured and self-insured clients in the Northeast and Mid-Atlantic regions under a wide array of State, County and Municipal government, multi-employer welfare fund and commercial employer sponsored plans.

Please review the material in this manual carefully. The manual is an addendum to the contract you have with the state of Connecticut Medical Assistance Program. Item 10 of the Provider Enrollment Agreement states in part: "To abide by the DSS' Medical Assistance Program Provider Manual(s), as amended from time to time, as well as all bulletins, policy transmittals, notices and amendments that shall be communicated to the Provider, which shall be binding upon receipt unless otherwise noted". Please pay particular attention to the section entitled Connecticut Dental Health Partnership Policy/Standards of Care which contains information on marketing guidelines as well as appointment scheduling guidelines and other important information. The CTDHP will be sharing a variety of programmatic updates and notices with you in the future, so please be on the look-out for communications from the CTDHP and place them in your manual which has been provided in a three ring binder for your convenience.

Thank you for your continued participation in the CTDHP programs and support of Connecticut's neediest residents.

Sincerely,
Connecticut Dental Health Partnership

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Chapter 2 Contracting

Program Enrollment /Re-enrollment Process

On-Line Enrollment Tool

In order to enroll or re-enroll on – line, you must first have all of your material assembled for the enrollment process. Once you begin with the enrollment wizard, you cannot save the application and return to the enrollment application at a later time.

- Go to the www.ctdssmap.com website.;
- Go to the “**Provider**” box and scroll down to “**Provider Enrollment**”;
- Click on “**Next**” to start enrollment wizard. It will walk you through the information needed;
- Please note, you should review materials needed to enroll before beginning the process. *Once you begin the enrollment process, you cannot save the information and return to it at a later date;*
- For information describing the types of documentation that are required to enroll, choose “**Provider**” on the home page. A drop down box will appear,
- Click on “**Provider Matrix**” and scroll down and choose “**Enrollment Requirements for Dental Providers**” (or other dental classifications as the selection may apply to you).

NOTE: Re-enrollments must complete the credentialing process prior to your expiration date. Please submit you re-enrollment information 6 – 8 weeks prior to your expiration date to ensure uninterrupted enrollment in the program.

Dental Taxonomy Assignment Chart

The CTDHP offers personalized assistance with the Enrollment and Contracting processes. By contacting **CTDHP** at **860-507-2307**, we will work personally with you and your office staff to get your office enrolled or re-enrolled with the CTMAP network. Once enrolled in the program, you will need to submit new contracts in the event that you change Tax ID’s, add additional individuals to a group practice, add new office locations open to CTDHP clients or add new provider specialties to a practice. The Department of Social Services recognizes and enrolls providers in the following dental specialties:

Specialty	Taxonomy
Dental Anesthesiologist	122300000X
General Practice Dentist	1223G0001X
Hygienist	124Q00000X
Endodontist	1223E0200X

Oral and Maxillofacial Pathologist	1223P0106X
Oral and Maxillofacial Radiologist	1223D0008X
Oral and Maxillofacial Surgeon	1223S0112X
Orthodontist	1223X0400X
Pedodontist	1223P0221X
Periodontist	1223P0300X
Public Health Dentist	1223D0001X
Prosthodontist	1223P0700X
Dental Resident in Training Program	390200000X

Paper Enrollment Process

Dental providers are required to enroll via the secure web portal as described above. If you are unable to submit your application via the web portal you may submit a paper application to HP with a letter that requests an exception to the requirement with details of the reason for the request.

A PDF of the enrollment form can be downloaded by following the steps outline below:

- Go to the website www.ctdssmap.com;
- Click on **"Information"** and a drop down box will give the option **"Publications"**
- Choose this option, and then scroll down the page to the **"Forms"** section;
- Continue to scroll down the list to **"Provider Enrollment/Maintenance Forms"** and click on **"Provider Enrollment Application"**.
- The enrollment package will download as an Adobe Acrobat (.pdf) file.

For the most up to date enrollment requirements, please consult the ctdssmap.com website

