

IMPORTANT

- **BIN # 610047**
Please update your system to identify BIN #610047 as **Medavie Blue Cross** (FR: Croix Bleue Medavie).
- By complying with this request, Explanation of Benefits (EOB) and Claim Acknowledgements will properly indicate Medavie Blue Cross. This will alleviate confusion for patients as well as employer groups and secondary payers.
- **CDAnet™ or DACnet™ Version:** Medavie Blue Cross uses version 4 effective October 20, 2014. It is not necessary that dental providers use this same version.
- **Network:** Telus Health Solutions

FREQUENTLY ASKED QUESTIONS

SUBMITTING CLAIMS THROUGH CDANET™ or DACNET™

Q: I have an Interim Federal Health Program (IFHP) client and they do not have a policy number. What do I do for the Policy Number?

A: For all IFHP claims submitted through CDAnet™ or DACnet™, **you must key 91011000 in the Policy Number field.**

Q: When is the Medavie Blue Cross CDAnet™ or DACnet™ claim system available to send claims?

A: You may send claims through CDAnet™ or DACnet™ to Medavie Blue Cross between 6 a.m. to 11 p.m. EST Monday to Saturday and 6 a.m. to 7:30 p.m. EST Sunday.

Q: What if I send a claim outside these hours of service?

A: You will receive a message asking you to submit on the next business day.

Q: How long after the service is performed do I have to submit a claim to Medavie Blue Cross through CDAnet™ or DACnet™?

A: We recommend you send the claim as soon as possible after the services have been rendered to the patient, however, according to CDAnet™ and DACnet™ standards, you have thirty (30) days to submit.

Note: Submission of paper claims for the Interim Federal Health Program will be accepted within six (6) months of the date the service was provided.

Q: Can I submit predeterminations and treatment plans through CDAnet™ or DACnet™?

A: During this phase of Medavie Blue Cross CDAnet™ or DACnet™ predeterminations should be mailed to our offices for consideration. Treatment plans can be submitted electronically via CDAnet™. Electronic predeterminations are being considered for future phases of Medavie Blue Cross's CDAnet™ or DACnet™ functionality.

Note: Prior authorization requests for IFHP clients can be submitted through our online secure Provider portal at <https://provider.medavie.bluecross.ca>, by mail, fax or telephone (IFHP provider contact details are found in the IFHP Handbook for Health Care Professionals.)

CORRECTIONS

Q: I have submitted a claim through CDAnet™ or DACnet™ and need to have it corrected. What do I do?

A: Provider claim reversals are now included in the CDAnet™, version 4, functionality.

If the claim was sent prior to October 20, 2014, it can be voided by contacting our Customer Contact Centre. We will require the following information from the provider to void a CDAnet™ or DACnet™ claim:

- Indicate that the claim was submitted electronically
- Date of submission
- Member's identification number and policy number
- Member's name
- Total amount of the claim
- Dental provider number

CLIENTS

Q: What do I need to provide to my clients after I have submitted their claim?

A: Pay subscriber claims: please provide the patient with a copy of the Explanation of Benefit (EOB) or Claim Acknowledgement along with their original paid-in-full receipt for services rendered. Please keep a copy of this EOB or Claim Acknowledgement on file for a period of at least three years.

Note: Pay subscriber claims are not applicable to Interim Federal Health Program (IFHP) clients.

Pay provider claims: please provide a copy of the EOB or Claim Acknowledgement along with a receipt for the co-payment or ineligible amounts collected from the subscriber. Please keep a copy of the EOB or Claim Acknowledgement on file for a period of at least three years. It is the responsibility of the Dental provider to collect any outstanding amounts not covered by the client's plan. Medavie Blue Cross assumes no responsibility in this matter.

Note: For Interim Federal Health Program (IFHP) clients, only pay provider claims are applicable. Providers are not to collect from the client the difference between the total amount billed for the services and the amount to be reimbursed by Medavie Blue Cross, if any.

REAL TIME DENTAL VS. BATCH PROCESSING

Q: What is Real Time Dental versus Batch electronic claim processing?

A: Real time electronic claims are sent within seconds to the insurer through the dental provider's software. The insurer's adjudication system processes the client's claim and sends a claim result back to the provider. The client's dental claim is automatically reflected on their claim history with the insurer. Batch processing allows a dental office to send the claim information to the insurer electronically within seconds. The insurer collects the information regarding the claim, which is then processed manually by a claim analyst and the resulting payment or rejection is mailed to the subscriber or provider.

Q: Will claims for all procedures for clients with private coverage adjudicate in real time?

A: There may be a minimal number of plan designs or procedures that will not be able to be adjudicated real time due to the manual intervention needed by our Dental Claims Unit to process the claim. Should a claim require manual intervention, you will receive a Claim Acknowledgement and the claim will be assessed by our Dental Unit within our standard five business day turnaround time. The claim result will be mailed to the subscriber for pay-subscriber claims or the provider will receive notification on their next provider payment summary of the claim result. The majority of claims process in real time with minimal manual intervention.

Most clients with Medavie Blue Cross **private** coverage, Royal Canadian Mounted Police (RCMP) members and Interim Federal Health Program (IFHP) clients are eligible for CDAnet™ and DACnet™ claims. Claims for RCMP members may be billed as well but will continue to be processed in batch mode, as opposed to real time.

GUIDELINES TO WHICH MEDAVIE BLUE CROSS CLIENTS ARE ELIGIBLE FOR CDANET™ or DACNET™ CLAIM SUBMISSION

Q: I have clients from the RCMP. How will these claims be adjudicated?

A: RCMP claims will continue to be adjudicated in batch mode at this time. The BIN # remains 610047 for these clients.

Q: I have clients from the Interim Federal Health Program (IFHP). How will these claims be adjudicated?

A: IFHP claims will be adjudicated in real time. The BIN remains #610047 for these clients. For all IFHP claims submitted through CDAnet™ and DACnet™, **you MUST key 91011000 in the Policy Number field.**

Q: I also have Veterans Affairs Canada and Canadian Armed Forces clients. How will these claims be processed?

A: At this time, only Veterans Affairs Canada (VAC) claims can be submitted via CDAnet™. Canadian Armed Forces (CAF) is continuing with the paper claim process currently in place.

Q: Are there any clients for whom I can't bill through CDAnet™ or DACnet™?

A: The following clients/claim types are not able to be billed electronically through CDAnet™ or DACnet™ to Medavie Blue Cross at this time. Please follow the paper claim process for these claims:

- Clients whose primary insurer is not Medavie Blue Cross. The claim must be submitted on paper to Medavie Blue Cross after processing by the primary insurer.
- Clients covered under CAF. Please follow current claim procedures.

- Claims for accidental dental. Please submit a paper claim.
- Claims for which payment is assigned to a party other than the provider or subscriber. E.g.: to an ex-spouse, legal firm, etc.
- Claims for some groups due to benefit plan design. The dental provider will receive the message “Please submit a manual claim” in these instances.
- For clients covered by two Medavie Blue Cross plans. The claim may be submitted through CDAnet™ or DACnet™ for the primary plan. Coordination with the second plan must be done with a paper claim by mail.

ERROR MESSAGES

“Invalid Primary Policy/Plan number”

Our cards indicate a 10-digit Policy Number and do not specify a division/section number. As a Dental provider you will need to drop the first two zeros at the beginning of the policy number and enter the remaining eight digits exactly as shown on the identification card into the policy/group field on your system. The division/section field of your system should be left blank. If you continue to get this message, call our Customer Information Centre for assistance. They will confirm the policy number you have is correct and assist you in submitting the claim.

“Invalid Subscriber Identification Number”

The patient’s identification number (11 digits long), first and last names as well as their date of birth should be entered exactly as shown on the Medavie Blue Cross card. Our system will validate this information. If you need assistance, please contact our Customer Information Centre.

“Missing/Invalid Dental Unique ID”

Please contact our Customer Information Centre. They will confirm your provider information and have your file updated. Once updated, your electronic dental claims should be retransmitted. This process may take approximately 24 hours to complete.

Missing/Invalid Primary Policy/Plan Number (009)

When this message occurs, key a zero (0) in front of the patient’s ID number.

PAYMENTS

Q: For pay subscriber claims, how long before my clients can expect to receive reimbursement?

A: For claims that are adjudicated real time, cheques and an Explanation of Benefits are produced and mailed from our Moncton office the following business day. Clients should allow the necessary mailing time depending on their location. For clients with direct deposit, the deposit will be transmitted to their banking institution the following business day. The date the funds will appear in their account will depend on their banking institution.

Note: For Interim Federal Health Program (IFHP) clients, only pay provider claims are accepted. Providers are not to collect from the client.

Q: For pay provider claims, how will I receive payment for claims submitted through CDAnet™ or DACnet™?

A: You will continue to receive payment for CDAnet™ or DACnet™ claims along with other pay provider claims on your bi-weekly payment summary from Medavie Blue Cross.

Note: IFHP Providers will receive a separate payment summary for IFHP claims payments.

Q: I understand direct deposit of the bi-weekly provider payments is now available for providers using CDAnet™ and DACnet™. How do I sign up? Will my payment schedule change?

A: Direct deposit on a bi-weekly basis is now available for approved dental providers using CDAnet™ and DACnet™. Please contact our Customer Information Centre for an application form. Please fill out the application, attach a copy of a void cheque and fax to the attention of Professional and Provider Affairs at 506-869-9673.

Please allow three to four weeks for registration. Direct deposit payments are generated at the same time as manual cheques, however, the date the funds will appear in your account will depend on your banking institution. You will continue to receive a payment summary by mail according to the current schedule.

Q: How do I verify that a client is active?

A: Log into CDAnet™ and go to Claims Submission. Enter information about the patient as if you were submitting a claim. CDAnet™ will show if the patient has “active” IFHP coverage including what services are allowed or require pre-authorization.

It is recommended that dental practices print the results shown on the screen and keep a copy in the patient’s file to confirm that coverage was checked.

If you are not ready to submit the claim, cancel the request.

Note: This process on CDAnet™ can be used by providers in all provinces, except for Alberta.

OTHER

Q: My dental office is located close to a Quick Pay® office and I don’t offer provider assignment to my patients. Do I have to transmit their claims electronically?

A: In all instances, clients should be asked their preference between having a claim submitted electronically, visiting Quick Pay® or mailing their claim. This service is not mandatory for providers or subscribers.

Reimbursement for electronic pay subscriber claims is by cheque to the cardholder (or direct deposit, if their plan permits) that is mailed from our main offices the business day after claim transmission. Electronic Dental claims cannot be reimbursed at our QuickPay® centres. Note: For Interim Federal Health Program (IFHP) clients, only pay provider claims are accepted. Providers are not to collect from the client.

Q: My software has a feature called a “Request for outstanding Claims Diary”. Does Medavie Blue Cross use this?

A: This is not included in the current phase of functionality for Medavie Blue Cross clients.

Q: Does Medavie Blue Cross currently accept CDAnet™ or DACnet™ claims with digital X-rays?

A: This is not included in the current phase of functionality for Medavie Blue Cross clients.

For assistance with electronic claim submission, please call the Medavie Blue Cross Customer Information Centers at:

Medavie Blue Cross Individual and Group Business Inquiries

1-800-667-4511 in Atlantic Provinces (Weekdays between 8 a.m. and 5 p.m. local time)

1-800-355-9133 in Ontario (Weekdays between 8 a.m. and 5 p.m. local time)

1-888-588-1212 in Quebec (Weekdays between 8:30 a.m. and 5 p.m. local time)

Interim Federal Health Program (IFHP) Inquiries

1-888-614-1880 in Canada (Weekdays between 8:30 a.m. and 4:30 p.m. local time)

Medavie Blue Cross follows CDAnet™ and DACnet™ standards and guidelines. Please refer to the CDAnet™ or DACnet™ user guide and subscription agreement you were required to sign by the Canadian Dental Association or the Denturist Association of Canada or l’Association des Chirugiens Dentistes du Québec for the appropriate circumstances. If you do not have a copy of this user guide or your subscription agreement, please contact the Canadian Dental Association or the Denturist Association of Canada or l’Association des Chirugiens Dentistes du Québec directly at the contact information below.

CDAnet™ Service Centre

Tel: 1-800-267-9701 E-mail: cdanetservice@cda-adc.ca

DACnet™ Help Desk

Tel: 1-877-8DACnet (1-877-832-2638) E-mail: email@dacnet.ca

<https://provider.medavie.bluecross.ca>