

**Ford Enrollee - Give this information sheet to your dentist.**

Dentists may use the American Dental Association's claim form or their own to bill dental Services to Blue Cross and Blue Shield of Michigan. Blue Cross and Blue Shield of Michigan no longer uses a special Dental Claim Form. Please note: It is important for dentists to obtain a predetermination of benefits when the dental work will cost more than \$200. If you have questions, you may call **1-800-426-4610** (Retired enrollee) and **1-800-482-5146** (Active enrollee).

## **Blue Cross and Blue Shield of Michigan Ford Dental Program Benefits and Billing Instructions for Dentists**

**To Determine Benefits:**

Call our computerized information system, CARENplus, 1-(800)-482-4047 for eligibility and benefit information.

**To Request Predetermination of Benefits:**

- Submit a predetermination of benefits request for dental work that will exceed \$200.
- Send predetermination x-rays and supporting documentation for gold restorations, crowns, periodontal procedures, bridgework or partial dentures, etc.

**Predetermination Process**

Before treatment begins:

- Prepare a treatment plan, leaving the service date blank and indicating "Dentist's Pre-Treatment Estimate" on the claim form.
- Submit the treatment plan to Blue Cross and Blue Shield of Michigan.

Blue Cross and Blue Shield of Michigan will:

- Determine the amount of benefits available.
- Give consideration to alternative procedures and courses of treatment.
- Notify you (through a computer-generated form that can be used to bill actual services) and the member of estimated benefits.

After treatment is completed, return the computer-generated form (or a claim form) to Blue Cross and Blue Shield of Michigan with the following information:

- Service date
- Procedure code(s)
- Signature

The treatment agreed on by you and the member may not be covered by the dental plan. However, we will pay up to the predetermined amount for the alternative service. Predetermination estimates are subject to copayments and plan maximums. Therefore, the actual payment may differ from the estimate.

## **To Prepare a Claim (include important ADA claim form filing information as follows):**

- Complete the form using the boxes.
- Enter your federal tax identification (box 24) and state license numbers (box 25).
- Enter the procedure code using the ADA's most current coding system. (Be sure to include the tooth number, surface and/or quadrant, where appropriate.)
- Attach x-rays and supporting documentation, when required. A complete list of procedures and the documentation required is in the *Blue Cross and Blue Shield of Michigan Guide for Dental Care Providers*. To obtain a Guide, call 1-(800) 962-2276.
- Include either the patient's signature or the statement "Signature on file" in box 20 to have payment sent to you.
- Leave box 20 blank, if payment is to the subscriber.
- Sign the claim form to certify that services were provided as billed.

*(Note: If the ADA claim form is not used, this information is still required.)*

## **To File a Claim:**

Send claims for payment to:

Blue Cross and Blue Shield of Michigan  
P. O. Box 49  
Detroit, MI 48231-0049  
Inquiries: 1-(800) 482-5141

## **To Status a Claim:**

Submit either a Blue Cross and Blue Shield of Michigan Status Inquiry form or an American Dental Association Claim Form. If the ADA claim form is used, please write the word "inquiry" on the form. To order a Dental Status Inquiry Form, #CB6812, send a request to:

Mail Services - Mail Code L800  
Blue Cross and Blue Shield of Michigan  
53200 Grand River Avenue  
New Hudson, MI 48165-9797