

## **BlueCross BlueShield of Tennessee Amended and Restated Preferred Dental Provider Agreement** **Frequently Asked Questions**

**1. Does this new contract replace my current contract with BlueCross BlueShield of Tennessee?**

Yes, it will replace all current dental contracts that you may currently hold with BlueCross effective Jan. 1, 2017. This includes Commercial PPO, BlueChoice (HMO)<sup>SM</sup>, BlueCare Plus (HMO SNP)<sup>SM</sup> and the Federal Employee Program (FEP).

**2. Why is the new contract/agreement needed?**

The new agreement is needed to move all currently contracted dental providers to one agreement. Currently, there are multiple dental provider agreements being managed and makes it difficult to administer from a network perspective.

**3. If I reject this agreement, will I be terminated from all networks?**

Yes, rejecting this core agreement may result in termination from all networks.

**4. The cover letter states that I will be considered participating for certain dental services covered under medical. Will this include TMJ and sleep appliances?**

Yes, this will apply to TMJ and sleep appliances when covered under a **Commercial member's medical benefit plan** regardless if he or she has dental coverage with BlueCross. Any questions regarding coverage, reimbursement, how to file claims, etc., will need to be handled by the applicable customer service area. Members can find the contact information on the back of their BlueCross member identification card. **Note: Benefit information for these services will not be available prior to Jan. 1, 2017.**

**5. Will my name be shown in the online medical directory as a provider for TMJ, sleep appliances, etc.?**

No, it will not. These are not recognized specialties listed in our online directory.

**6. The 2017 Commercial Dental Fee Schedule was included with the Agreement. Where can I obtain a copy of the 2017 Dental Fee Schedules for BlueChoice<sup>SM</sup> and BlueCare Plus<sup>SM</sup> and FEP?**

BlueChoice and BlueCare Plus use the Commercial Dental Fee Schedule. A copy of the 2017 FEP Dental Fee Schedule can be obtained by calling the FEP Customer Service at 1-800-572-1003 after Dec. 1, 2016.

**7. I would like to terminate from all networks. What is the procedure for doing so?**

If you do not want to accept this Agreement, you must provide written notice of your rejection within 30 days of this notice. **The preferred method to return a written rejection is via email at [CDReturns@bcbst.com](mailto:CDReturns@bcbst.com).** However, written rejections may also be faxed to (423) 591-9506 or mailed to:

BlueCross BlueShield of Tennessee  
Attn: Provider Contract Development 2.4  
1 Cameron Hill Circle, Ste. 007  
Chattanooga, TN 37402-0007

**8. With whom can I speak to discuss any additional questions or concerns?**

Please contact Amy Miller, Dental Network Manager, at (423) 535-3672 or via email at [amybeth\\_miller@bcbst.com](mailto:amybeth_miller@bcbst.com).