



Provider IVR

Interactive Voice Response

Instructions



In order to better serve you and to minimize the duration of your calls, your call will be answered by our automated Provider IVR telecom system.

The IVR starts with a greeting then instructs you to make your selection from the following (6) IVR Options:

- For **Eligibility** and benefit for general dentistry **Press 1**
- For **Claims Press 2**
- For **Pre-Estimate Press 3**
- For **Referral** and **Specialty Pre-Authorization Press 4***
- To **Request Materials Press 5**
- For **General Information** such as claims mailing address or payers ID **Press 6**

When selecting from IVR Options 1-3 you will be asked to provide the following information for our system to HIPPA Authenticate you:

- **Office Zip Code**
- **Office Access Code**
- **Treating Dentist NPI**
- **Member ID you are calling about**
- **Members DOB**

Continued on the next page



Detailed instructions for each Provider IVR Options:

1 Option 1 for Eligibility

The system will ask you the following:

- For authentication, please enter your office access code
- Please enter offices 5-digit zip code
- Please enter members DOB (4-digit year, 2-digit month and 2-digit day of the month)
- In some cases, it will ask for treating Dentist NPI Number

Once those parameters are entered, the system will play the eligibility information for that member. Once it is done, you will have the option to check eligibility for another member.

2 Option 2 for Claims

The system will ask you the following:

- For authentication, please enter your office access code
- Please enter offices 5-digit zip code
- Please enter members DOB (4-digit year, 2-digit month and 2-digit day of the month)
- In some cases, it will ask for treating Dentist NPI Number

Once it is authenticated, the **Claims Menu** asks the following:

1. If you like to enter **Date of Service Press 1** (the IVR will ask to enter 4-digit year, 2-digit month and 2-digit day. IVR then will play the claim information based on the date you entered)
2. To enter **Claims Number Press 2** (the IVR will ask to enter to enter 10-digit claim number. Once it is entered, it will play the claim information)

3 Option 3 for Pre-Estimate

The **Pre-Estimate Menu** plays the following:

- The most recent Pre-Estimate on file is pre-estimate (plays pre-estimate number) received on (plays the date).

The recording will play that this pre-estimate is either approved or denied and it will play the dollar amount.

4 Option 4 for Referral and Specialty Pre-Authorization

This feature will be available March 2019

5 Option 5 for Request Materials

You will select from the following 6 options:

- For **Claims Form Press 1**
- For **California Referral Form Press 2**
- For all other **State Referral Form Press 3**
- For Justification for **Prosthodontics Form Press 4**
- For **Alternate Treatment Form Press 5**
- For **Provider Dispute Form Press 6**
- For **Provider Handbook, Reference Guide** and **Orientation Brochure**, please visit our website
- For all other **Forms Press 0** to speak to a Member Services Representative

Once the above selections are entered, it will ask you for 10-digit fax number, it will play back the number to confirm. Once it is confirmed, it will send out the fax. *This menu will play twice and if nothing is selected, it will transfer you to an MSR.

6 Option 6 for General Information

You will select from the following 5 options:

- For **Payer ID Press 1** (it will play the Payer ID)
- For **Claims Mailing Address for California and Missouri Press 2** (It will play the mailing address)
- For **Claims Mailing Address for Florida Press 3** (It will play the mailing address)
- For **Claims Mailing Address for All Other States Press 4** (It will play the mailing address)
- For all other **General Information Press 0** to speak to a Member Services Representative