



# Annual Dental CAP Report

2023 Contracting



BlueCross BlueShield  
**Kansas**

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## Introduction

Blue Cross and Blue Shield of Kansas (BCBSKS) is the insurer Kansans trust with their health. Much of that status can be attributed to the high-quality care delivered by our network providers. This document outlines the details related to our 2023 Competitive Allowance Program (CAP) offer and includes the specifics of our Quality-Based Reimbursement Program (QBRP), which has been designed to reward your efforts toward maintaining high-quality standards.

BCBSKS continues to offer contracting providers top-notch services, including professional relations representatives and provider network services. After almost two years of hybrid service with providers, our field staff have resumed in person visits, trainings, and workshops. We are also available to conduct these activities virtually based on the provider's preference. We want to thank you for your versatility in working with our professional relations team to meet your needs. We also want to extend our appreciation to you and your staff for caring for our members in these unprecedented times. We all look forward to a more normal 2023.

Lastly, many new national and local laws, including but not limited to the Consolidated Appropriations Act (CAA), took effect in 2022 and have caused significant changes for both BCBSKS and providers. We try to the extent possible to limit any burden to providers as we comply with these new requirements. We appreciate your understanding and cooperation as we both fulfill our responsibilities under law.

If you need clarification or additional information related to any information included herein, contact your professional relations representative or provider network services.



## Introduction

PR Staff	Location	Toll-Free Phone #	Local Phone #	Email
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Robyne Goates, Manager	Topeka	(800) 432-0216 ext. 8206	(785) 291-8206	robyme.goates@bcbsks.com
Gwen Nelson	Topeka	(800) 432-0216 ext. 8716	(785) 291-8716	gwen.nelson@bcbsks.com
Darin Fieger	Topeka	(800) 432-0216 ext. 8207	(785) 291-8207	darin.fieger@bcbsks.com
Jennifer Falk	Topeka	(800) 432-0216 ext. 8651	(785) 291-8651	jennifer.falk@bcbsks.com
Heather Schultz	Topeka	(800) 432-0216 ext. 7724	(785) 291-7724	heather.schultz@bcbsks.com
Kyle Abbott	Wichita	(800) 432-0216 ext. 1674	(316) 269-1674	kyle.abbott@bcbsks.com
Vickie Kloxin	Wichita	(800) 432-0216 ext. 1674	(316) 269-1674	vickie.kloxin@bcbsks.com
Patrick Romm	Hutchinson	(800) 432-0216 ext. 4273	(620) 663-1313	patrick.romm@bcbsks.com
Jennie Fellers-Morgan	Hays	(800) 432-0216 ext. 4223	(785) 261-9969	jennie.fellers-morgan@bcbsks.com
Provider Network Services	Topeka	(800) 432-3587 option 1 or 3	(785) 291-4135 option 1 or 3	prof.relations@bcbsks.com

## By the numbers

Blue Cross and Blue Shield of Kansas provides the best service in the industry and strives to be the health insurance company of choice for our members and providers.

# #1

BCBSKS is top-ranked for Member Satisfaction.

# 11.78%

BCBSKS spent 11.78 percent of annual premium income on administrative expenses for the year of 2021.

# 263,171

BCBSKS and its subsidiaries serve 263,171 members with dental coverage as of July 2022

# 91%

BCBSKS contracts with 91 percent of all dentists in the Plan area for CAP and about 49 percent for the Dental PPO.

# 100%

BCBSKS is 100 percent URAC accredited in health plan, case management, and disease management.

## 2023 Reimbursement and Policy Memo changes

On June 24, 2022, the BCBSKS Board of Directors met and approved policy memo changes and the CAP dental MAPs that will be applicable for 2023. **Highlights of policy memo changes are noted in red.**

Reimbursement for 2023 is aligned to continue RVU-based pricing and promote the incentives available through the Quality-Based Reimbursement Program (QBRP) (see pages 5-8). 2023 reimbursement changes include increasing allowances for lower-valued codes and maintaining allowances for high-valued codes.

Additional increases can be achieved through QBRP. BCBSKS continues to be sensitive to the challenges experienced in rural Kansas related to access to dental care and recruitment of dentists. As such, BCBSKS will continue to increase the base allowances 5 percent for services performed by dentists (CDT codes) in counties with a population of 13,000 or less (see page 9).

A charge comparison report reflecting reimbursement for 2023 is available by contacting your Professional Relations representative or our provider network services area. The charge comparison is based on services billed by you during January 2022 through May 2022. The charge comparison format provides the lesser of your charge or the CAP dental MAP for each procedure code you performed during the January through May time frame.

## The value in contracting

BCBSKS provides business services that bridge the gap between the delivery and financing of health care. Services creating significant value for contracting providers include:

<p><b>Local member contracts</b> structured to allow charges up to 100 percent of the MAP for participating CAP providers (subject to member benefits).</p>	<p><b>Opportunity to earn additional revenue</b> through the Quality-Based Reimbursement Program (QBRP).</p>
<p><b>Detailed claim-payment information</b> provided to both you and the member explaining their financial responsibilities.</p>	<p><b>Direct payment from BCBSKS</b>, which minimizes your collection efforts and increases cash flow.</p>
<p><b>A dedicated field staff</b> available to visit your office to address any operational issues.</p>	<p><b>Electronic remittance advice</b> and payment capabilities.</p>
<p><b>Access to Provider Network Services</b> personnel to answer policy questions or obtain assistance with claim coding questions.</p>	<p><b>Opportunity to participate on specialty liaison committees</b> and provide direct input in the development of medical policies and emerging issues.</p>
<p><b>Opportunity to participate</b> in the BCBSKS Dental PPO network and/or Medicare Advantage (as applicable).</p>	<p><b>Periodic workshops</b> conducted by Professional Relations staff that delivers continuous training for new and experienced medical assistant staff, helping update your staff on new administrative procedures to ensure timely claim payments.</p>
<p><b>Website (bcbsks.com) and self-service</b> access through Availity, which improves your office efficiencies and maximizes your employee resources.</p> <ul style="list-style-type: none"><li>• Secure services include detailed claims payment information, member eligibility, remittance advice, and provider enrollment information.</li><li>• Other services include training modules, podcasts, newsletters, manuals, policy memos, and medical policies/guidelines.</li></ul>	<p><b>Contracting providers' names made available to BCBSKS members</b> through a number of sources including the internet, employer groups, and other contracting providers for referral purposes, which increases the potential for new patients.</p>

**NOTE** — In 2023, for the majority of our business, non-contracting providers' services will be paid direct to the member at a charge up to 80 percent of the MAP (i.e. there is a 20-percent penalty for members receiving services from a non-contracting provider), subject to member benefits. In addition, assignment of benefits to non-contracting providers is not allowed. Also, non-contracting providers do not qualify for QBRP incentives.



## 2023 Dental Providers QBRP

The BCBSKS Quality-Based Reimbursement Program (QBRP) is designed to promote efficient administration, improved quality, and better patient care and outcomes. Contracting BCBSKS providers have an opportunity to earn additional revenue through add-ons to allowances for meeting the defined quality metrics. BCBSKS claims data is used to determine qualification for any applicable metric requiring data. 2023 will begin the eleventh year for QBRP incentives.

The 2023 QBRP program is effective for services performed January 1, 2023 through December 31, 2023. Since the 2023 CAP letter is sent out in July 2022, providers have several months to prepare to meet the various QBRP metrics and qualify for incentives effective January 1, 2023, in accordance with the metric review schedule (see page 7). Please read the requirements and metrics for the 2023 QBRP program so you are prepared to maximize the available incentives. Any subsequent pertinent information or clarification will be communicated accordingly.

### Criteria for 2023

In accordance with the 2023 Dental Policy Memo, Section XXI. Reimbursement for Quality, this document describes the components of our QBRP effective January 1, 2023 through December 31, 2023. This program applies to all BCBSKS CAP, Dental PPO, and BlueCross BlueShield of Kansas Solutions, Inc. (a wholly owned subsidiary of BCBSKS) dental providers and services except for clinical lab (using codes on the Medicare clinical lab fee schedule) pharmacies, and pharmaceuticals. This program will offer an opportunity for eligible providers to earn increased reimbursement based on meeting the metrics in Groups 1 and 2 described on page 6. This reimbursement will be in addition to the respective base MAPs for CAP, Dental PPO, and Solutions for 2023.

**Please note** — Changes in CDT and CPT codes (added/deleted) will be effective prospectively, including QBRP. The quality-based incentives will be earned at the individual provider level unless otherwise specified.

An eligible provider may independently qualify for each metric, except when measured on a group basis. The QBRP metrics are multiplied individually by the applicable MAP, then totaled with the applicable MAP to determine the total reimbursement “QBRP MAP.” BCBSKS will allow the lesser of the provider’s charge or the “QBRP MAP.”

In order for incentive payments to begin January 1, 2023, BCBSKS will use information on file or available from outside sources to determine which incentives providers qualify for based on unique provider individual NPI numbers, billing NPI numbers or tax ID, whichever is applicable.

**Please note** — BCBSKS built enhancements to the provider information portal to include self-service QBRP information. We have seen an uptick in the number of providers who are viewing their QBRP results through the portal. At some point, the portal may replace the email confirmation process. More information and instructions will be communicated if any changes are made to the notification process.

**All metrics, with the exception of the Provider Information Portal and Provider Message Board (will be monthly, effective the 1st of the month when signed up by the 15th of the preceding month) will be reviewed on a semi-annual basis and any incentives earned will be effective either January 1, 2023 or July 1, 2023 as applicable.**



## 2023 Dental Providers QBRP

We will continue monthly reviews for 2023 to identify providers who did not qualify for incentive(s) beginning January 1, 2023 because of not meeting prerequisites, or new providers/groups after January 1, 2023, but may subsequently qualify for incentive(s). Qualifying will be based on the most current data/reports available and in accordance to the schedule(s) listed in this document. If/when one of these two situations occur, the incentive(s) will be effective the first of the following month. A confirmation notice will be emailed to the provider to include the new incentive category and effective date. Any corrections will be effective the first of the following month unless otherwise specified.

We will conduct a QBRP refresh in the first and second quarters (depending on the metric) of 2023 for an effective date of July 1, 2023 to determine if providers are continuing to meet the performance standards for the metric(s) earned for the incentive payments effective January 1, 2023. If the refreshed data indicates a provider is no longer meeting the performance standards for the metric(s), then the associated QBRP incentive(s) will cease beginning July 1, 2023 for the remainder of the year. If a provider no longer meets the performance standards for the metric(s), a new communication advising of the change in QBRP incentive(s) qualifications will be sent.

QBRP PREREQUISITES AND GROUPS FOR PROVIDERS	
<b>QBRP Participation Prerequisites</b>	Providers must conduct business with BCBSKS electronically (i.e. turn off paper <b>remittance advices (R/A)</b> ). Providers must submit all eligible claims electronically, accept electronic remittance advice documents (ERAs: either through receiving the ANSI 835 transaction or by downloading the RA from the BCBSKS website (and turn off printed RAs), and receive all communications (newsletters, etc.) electronically. Provider must be in good standing with BCBSKS to qualify for and receive QBRP. QBRP will cease if provider is no longer in good standing.
<b>Group 1</b>	Applies to all eligible contracting dental providers and to all eligible/covered CDT and CPT codes (excludes Clinical Lab, Pharmacy, and Pharmaceuticals).
<b>Group 2</b>	Applies to all eligible contracting dental providers and to all eligible/covered CDT codes (excludes Clinical Lab, Pharmacy, and Pharmaceuticals).

Metric	%	Group	Description	Qualifying Period
<b>Electronic Self-Service (ES3, ES2)</b>	<b>2.0 (ES3)</b> (96% or >) <b>1.0 (ES2)</b> (86-95%)	1	Must use Availity portal or ANSI 270/271 & 276/277 transactions to electronically obtain BCBSKS patient eligibility, benefit, and claims status information. Electronic access must meet one of the percentages at left compared to the provider's total number of queries to BCBSKS, regardless of the mode of inquiry to receive the corresponding incentive. Providers billing under a single tax ID number will have their inquiries combined for determining the applicable percent.	Semi-annual



## 2023 Dental Providers QBRP

Metric	%	Group	Description	Qualifying Period
<b>Electronic Provider Message Board (EPM)</b>	1.0	1	Must sign agreement to supply needed information for claim processing review/completion. Time frame for return of the requested information must be within the agreement time frame (15 days) through the provider message board portal.	Monthly - Registration
<b>Provider Information Portal (PRT)</b>	2.0	2	Must verify and attest to provider information every 90 days according to the qualifying schedule below. Each individual provider's information within a group must be verified. Verification must be completed within the BCBSKS provider information portal.	Every 90 days

### Qualifying for Electronic Self-Service Incentive (ES3, ES2)

The following is a list of incentive effective dates and the corresponding qualifying periods:

Qualifying Period	Incentive begins
August 1 - October 31, 2022	January 1, 2023
February 1 - April 30, 2023	July 1, 2023

### Qualifying for Electronic Provider Message Board (EPM)

The following is a list of incentive effective dates and the corresponding qualifying periods:

Qualifying Period	Incentive
1st - 15th of any given month	1st of the following month
16th - 31st of any given month	1st of the 2nd month after receipt
If the electronic provider message board (EPM) is used as outlined in the EPM agreement, one-time authorization allows for continuation of qualifying period without interruption.	

### Qualifying for Provider Information Portal (PRT)

The following is a list of incentive effective dates and the corresponding qualifying periods.

Qualifying Period	Incentive
September 2022 - November 2022	January 1, 2023
December 2022 - February 2023	April 1, 2023
March 2023 - May 2023	July 1, 2023
June 2023 - August 2023	October 1, 2023





## 2023 Dental Providers QBRP

QBRP CHANGES FOR 2023		
Metric	Change	Reason
	No changes.	



## Rural Access Counties

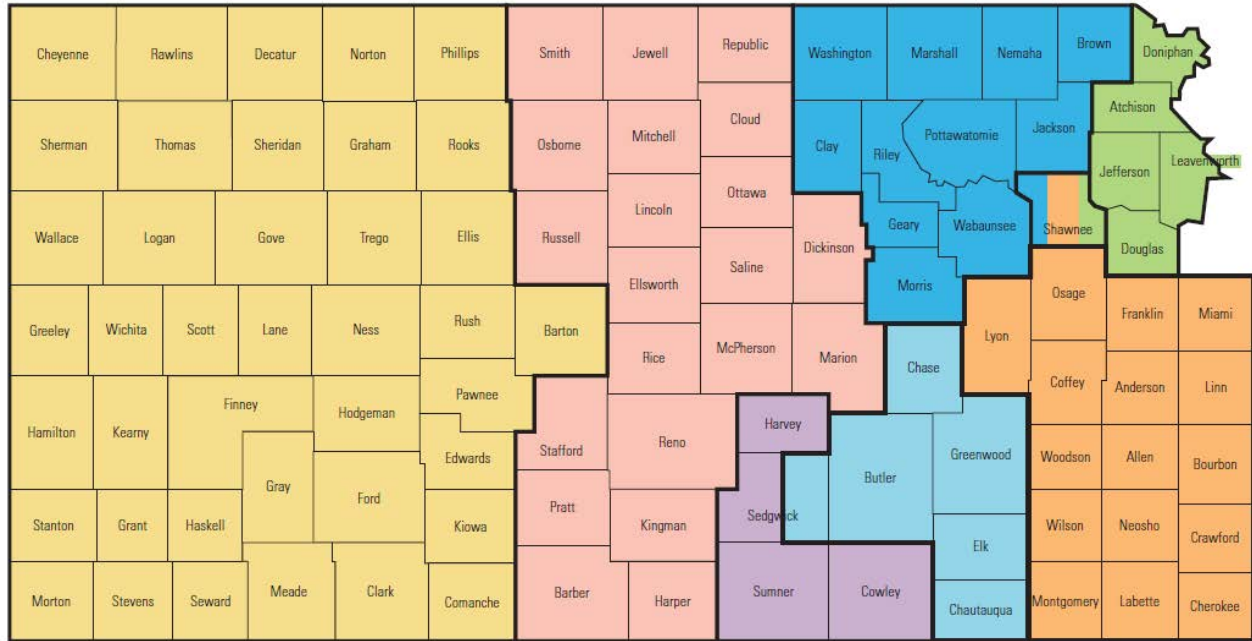
The following is a list of counties with a population of 13,000 or less that qualify for a Rural Access incentive.  
(Source: U.S. County 2021 Estimated Census)

County	Population
Allen	12,464
Anderson	7,778
Barber	4,110
Brown	9,455
Chase	2,598
Chautauqua	3,395
Cheyenne	2,633
Clark	1,977
Clay	8,077
Cloud	8,928
Coffey	8,338
Comanche	1,670
Decatur	2,751
Doniphan	7,471
Edwards	2,832
Elk	2,441
Ellsworth	6,336
Gove	2,755
Graham	2,400
Grant	7,324
Gray	5,644
Greeley	1,304
Greenwood	5,939
Hamilton	2,484
Harper	5,331
Haskell	3,668
Hodgeman	1,710
Jewell	2,937
Kearny	3,891
Kingman	7,392
Kiowa	2,392
Lane	1,565
Lincoln	2,903
Linn	9,747
Logan	2,722

County	Population
Marion	11,712
Marshall	9,979
Meade	4,022
Mitchell	5,748
Morris	5,356
Morton	2,692
Nemaha	10,216
Ness	2,672
Norton	5,342
Osborne	3,498
Ottawa	5,838
Pawnee	6,225
Phillips	4,815
Pratt	9,181
Rawlins	2,549
Republic	4,662
Rice	9,390
Rooks	4,831
Rush	2,953
Russell	6,703
Scott	5,131
Sheridan	2,478
Sherman	5,895
Smith	3,576
Stafford	4,034
Stanton	2,044
Stevens	5,293
Thomas	7,877
Trego	2,793
Wabaunsee	6,966
Wallace	1,508
Washington	5,511
Wichita	2,082
Wilson	8,526
Woodson	3,102



Professional Relations Field Representative Territorial Map



MD, DO, DPM, DC, DDS, PA, APRN, CRNA, LSCSW, PHD, OD, OOD, OSAF, CCC-SLP (speech), OTR, RPT

- Gwen Nelson – Topeka – Rep. Code C
- Vickie Kloxin – Wichita – Rep. Code M
- Kyle Abbott – Wichita – Rep. Code P
- Jennie Fellers-Morgan – Hays – Rep. Code R
- Patrick Romm – Hutchinson – Rep. Code K
- Jennifer Falk – Topeka – Rep. Code Z
- Darin Fieger – Topeka – Rep. Code D

Pharmacy and Infusion Therapy

Ken Mishler, PharmD, MBA – Topeka – Rep. Code B

CCC-A (AUD), Hearing Aid Dispenser (HAD), HME,  
Orthotists, Private Duty Nurses, Prosthetists, Sleep Labs  
(SLAB), AMB, ABA

Heather Schultz – Topeka – Rep. Code V



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