



## PROVIDER NETWORK COMMONLY ASKED QUESTIONS

DNoA PREFERRED NETWORK	
Does it cost anything to join?	No, there is no charge to participate in the DNoA Preferred Network.
How will patients know I participate with DNoA?	Our Customer Service Dept can make active referrals to your office. Members also have access to our online and printed directories.
Where do I send claims?	Please refer to the back of the member ID card for the claim address and phone number for assistance.
I need a copy of my Administrative Guide. How do I obtain one?	Please call us at 800-972-7565 and we will be happy to send you a new copy.
Can I add an associate to my practice?	Yes, new associates can be added to your practice. The associate will need to complete the necessary paperwork and fax or mail the documents to DNoA for processing.
I need a copy of my fee schedule. How do I get one?	Please contact us directly at 800-972-7565 and we will be happy to provide you with copies of your contract and fee schedule.
How do I add another Tax ID to my profile in <a href="http://WWW.DNoAConnect.com">WWW.DNoAConnect.com</a>	Log into your account The upper right corner, use the drop down and click on Profile Click on the plus (+) sign to enter another Tax Id, Click SAVE.
Why am I not able to see my claims on <a href="http://WWW.DNoAConnect.com">WWW.DNoAConnect.com</a>	Please review the profile that was set up to ensure that the TaxID used on the claim is present within your profile.
Reconsiderations (One-Time Provider Request for Benefit/Payment Review)	Providers can file a reconsideration to request a review of the denial of a service or benefit determination. All reconsideration requests will be resolved and communicated in a timely manner, depending upon the urgency of the situation and the requirements of specific state laws. It is important you provide all relevant documentation needed to support your reconsideration request (i.e., records, X-rays, treatment notes, etc.). In addition, you should include a complete explanation of why you believe a reconsideration of the benefit, authorization of services, or claim denial should be overturned. A decision on an appeal will be in writing and is considered a final determination.  <a href="https://www.dnoa.com/join-network/notice-of-grievance-and-appeal-updates">https://www.dnoa.com/join-network/notice-of-grievance-and-appeal-updates</a>
Can an Out of Network provider be able to register for <a href="http://www.dnoaconnect.com">www.dnoaconnect.com</a>	Yes, both Out of Network and In Network providers are able to register for <a href="http://www.dnoaconnect.com">www.dnoaconnect.com</a> to review benefit information.

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\*\*Subject to Benefit Coverage

Dental Network of America, LLC (DNoA) is a wholly owned subsidiary of Health Care Service Corporation (HCSC), a Mutual Legal Reserve Company.

DNoA Connect is a service provided by Dental Network of America, LLC, a separate company that acts as the administrator of dental programs for Blue Cross and Blue Shield of Illinois, Blue Cross and Blue Shield of Montana, Blue Cross and Blue Shield of New Mexico, Blue Cross and Blue Shield of Oklahoma, and Blue Cross and Blue Shield of Texas.



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