Supplement to the current Dental Blue Book eManual, November 2021 edition Please see below corrections and additions. Blue Cross and Blue Shield of North Carolina has updated the Emdeon Payer # related to Medical/Pediatric Dental and FEP claim filings.

Section 2.1

- Page 2-5
 - The correct Emdeon Payer number is #61472 (it is incorrectly stated as #61473).

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- FEP
- The below two pages are part of section 2.1.

Federal Employee Health Benefit Plan (BCBS medical coverage includes some dental benefits) Sample BASIC identification card (front only) BlueCross BlueShield Basic **BASIC OPTION** Federal Employee Program. Covers: Routine exams www.fepblue.org Cleanings I M Sample Member ID: R30048852 Federal Employee member ID numbers begin with the letter "R". X-rays Fluoride Sealants \$25 copayment per visit for in-network only, and NO COVERAGE for out-of-network Enrollment Code Effective Date RxGrp 65006500 01/01/2006 610415 ABC1234567 Sample STANDARD identification card (front only) BlueCross. BlueShield. STANDARD OPTION Government-Wide Service Benefit Plan PPO Federal Employee Program. Preventive and diagnostic Member Name: www.fepblue.org Minor restorative I M Sample Member ID: Extractions Federal Employee member ID numbers begin with the letter "R". + Pays very limited flat fee based on the R30048850 service provided Enrollment Code RxGrp RxBIN 65006500 Provides coverage for in- and out-of-network services ABC1234567 01/01/2006 **RxPCN**







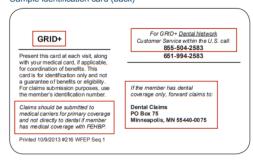
Sample identification card (front)



This card is of a FEP Blue Dental for Federal Employees identification.

Always file claims for services that include the patient's complete identification number, which includes both numbers and letters.

Sample identification card (back)



GRID+ logo identifies that a member is participating in the GRID+ dental network (see **Chapter 6** for additional information)

Customer Service: 1-855-504-BLUE (2583)

Paper Claims – Mail to: Dental Claims PO Box 75, Minneapolis, MN 55440-0075

Claims must be submitted to the member's medical carrier first. If the member has the BCBS service benefit plan as their medical coverage, the claim will automatically be transferred to FEP Blue Dental for processing/payment.

CLAIMS FEP BLUE DENTAL CLAIMS Mail claims to: PO Box 75, Minneapolis, MN 55440-0075 WEBSITES bcbsnc.com/content/providers/index.htm providers.bcbsnc.com/providers/login.faces

Important Note: FEP Blue Dental dental daims must be submitted to the member's medical carrier first using the 2012 ADA claim form. If the member has the BCBS service benefit plan as their medical coverage, the claim will automatically be transferred on a 2012 ADA claim form to FEP Blue Dental for processing/payment. If the member has coverage other than a Federal Employee Health Benefits Plan, a copy of the EOB is needed and must be submitted to the address below for processing:

FEP Blue Dental Claims PO Box 75, Minneapolis, MN 55440-0075

Section 7.1.2 (Page 7-1)

The below statement has been updated to reflect the correct Emdeon Payer #61472

In addition, ACA mandated "Pediatric Dental benefits" such as diagnostic and preventive, basic, major, and medically necessary orthodontia are covered under the medical plan for certain members. If the patient does not have pediatric dental benefits under a Blue Cross NC medical benefit plan but does have a Dental Blue policy from Blue Cross NC, then submit pediatric dental electronic claims to Emdeon payer #61472.