



**Electronic Data Interchange (EDI):  
Electronic Claim Submission**

**You can print this course at any time.**

At CIGNA, we want to help you make the most of your time and provide you with the tools to help you lower your administrative costs.

## Course Objective

This course is designed to provide you with information on how to use electronic claim submission to submit dental claims to CIGNA Dental. It should take less than 15 minutes to complete and it can be printed for future reference.

## Return on Investment

The savings can be substantial when your office submits claims electronically instead of on paper. The National Dental EDI Council's Return on Investment calculator has been developed to help dental offices determine their potential savings.

<http://www.ndedic.com/home/Publications/ROI Calculator/tabid/78/Default.aspx>



# What is EDI?

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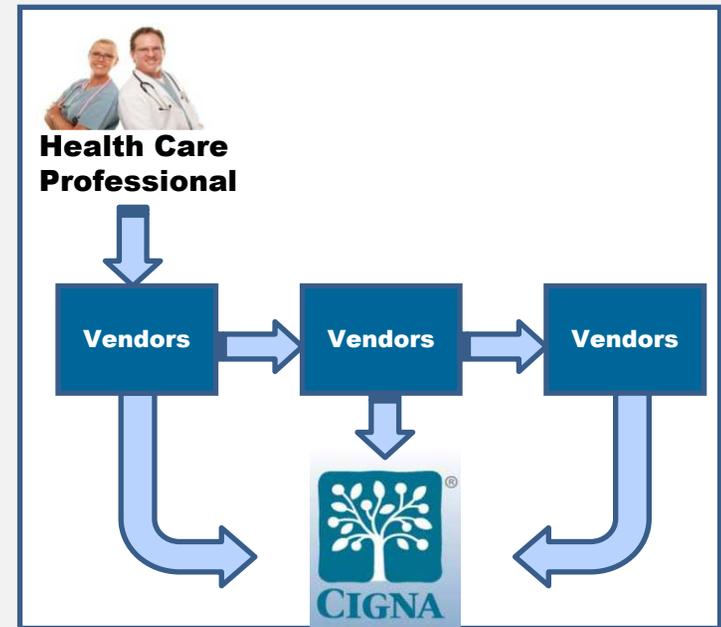
Also known as electronic data interchange, this is the electronic exchange of health care information between health care professionals, payers, and vendors.

*EDI enables patient information to be transferred between health care professionals and payers in a standardized and secure way.*

## Benefits of EDI

Research\* has shown that health care professionals who use EDI transactions can save time and money through:

- Reducing paperwork, and eliminating printing and mailing expenses
- Improving claim accuracy, while decreasing the chance of transcription errors or missing data
- Eliminating the need to submit claims to multiple locations



## Dental offices can use EDI for these HIPAA transactions:

- **270/271: Eligibility & Benefit Inquiry/Response**  
Through this transaction, you can see whether the patient has coverage, along with benefit details such as DPPO coinsurance and copays.
- **837: Electronic Claims Submission**  
Dentists can submit their claims electronically to CIGNA using either special software or a clearinghouse.
- **276/277: Claim Status Inquiry**  
Dentists can view whether a claim is pended or paid.
- **835: Electronic Remittance Advice (ERA)**  
This is the HIPAA-compliant detailed explanation of how a submitted claim was processed.



## What is Electronic Claim Submission?

This is a type of EDI transaction that allows dental offices to submit claims quickly to payers (such as CIGNA) through their computer. It allows health care professionals to track claims received and saves time on resubmissions.

## Claim Types

You can electronically submit various types of dental claims - including Coordination of Benefits (secondary) and corrected claims - through your clearinghouse, practice management system, or EDI vendor.

## CIGNA Payer IDs for Submitting Electronic Dental Claims

Submitting Dentist	Payer ID
DPPOs DHMO General Dentists DHMO Specialists	62308*
DHMO General Dentists (capitation only)	10050 or 62308*

\* *All 62308 claims, including Coordination of Benefits/Secondary claims, can be submitted electronically.*

## Information Needed For a Successful Electronic Claim Submission

### Patient Information

- ID number (can be submitted with or without the suffix, i.e., U12345678 or U12345678 01)
- Date of birth
- First and last name
- Address
- If the patient is not the subscriber: subscriber's name, ID number, and date of birth
- Student status, if applicable

### Dental Office Information

- Name, address, Tax ID, and National Provider Identifier (NPI) of the billing provider
- NPI of the rendering provider
- Rendering location

### Claim Detail

- Date of service (include seat date or prep date if applicable)
- Procedure codes from Current Dental Terminology (CDT)
- Standard office fee / Usual Customary Reasonable (UCR) fee for each procedure
- Narrative, if applicable

### Predetermination

- Submitting a request – Indicate the type of transaction as “Request for Predetermination / Preauthorization”
- Performing approved services – Send in a claim and refer to the predetermination number in the “Remarks” section

## Submitting COB Claims Electronically

- **Submit the Primary Claim First**

When submitting a claim for a patient with primary and secondary insurance benefits, be sure to enter both the primary and secondary insurance information on the claim.

This includes:

- Insurance company name
- Insurance company address
- Patient's ID numbers
- Group number
- Subscriber's name
- Subscriber's address
- Subscriber's date of birth

- **Then Submit the Secondary Claim**

When submitting claims for COB, you will need to supply the primary claim payment information in the fields supplied by the vendor, including paid amount and patient responsibility.



## What is a Corrected Claim?

This is a claim that was originally submitted with incorrect or missing information, and is resubmitted with the correct or updated information.

## How Do I Submit Corrected Claims?

Corrected claims can be submitted electronically. You will be able to indicate that you are sending a corrected claim through your vendor's software.





A primary benefit of submitting claims electronically is the timely notification of whether your claims have been accepted or rejected.

## Claim Validation

- Your claim's data integrity is initially validated by your vendor to improve claim accuracy. This includes ensuring required fields are complete and that only active codes are being submitted.
- If a claim passes the initial validation, it is sent to CIGNA. Data is then validated to confirm that the patient is a CIGNA customer with active coverage. *A claim acceptance at this point can serve as proof of timely filing.*
- If a claim is not accepted, your claim acknowledgment will indicate whether the patient does not have CIGNA coverage or there is a data error within the claim.



## Timely Filing Guidelines

It is best to submit claims as soon as possible, but these are CIGNA's guidelines:

- **DHMO General Dentist Claims**  
Submit within 90 calendar days\* after the date of service
- **DHMO Specialist Claims**  
Submit within 180 calendar days\* after the date of service
- **DPPO Claims**  
Submit within calendar 365 days\* after the date of service

\* *Other state guidelines may apply.*

## Vendor Choices

- You have flexibility in working with the software, clearinghouse, or application vendor of your choice to submit claims and perform other EDI functions electronically.
- You do not always have to purchase additional software in order for you and your vendor to work with CIGNA.

## The Role of the Vendor

- Through your vendor, claims are submitted electronically to CIGNA.
- CIGNA transmits the status information about your submitted claims in the ANSI X12 format back to your vendor.
- Your vendor changes this information into a readable format and transmits it back to you. *How the information is displayed can vary by vendor.*



## Equipment and Connectivity

You will need just a few things: a computer, internet access, and a scanner if your X-rays are not already digital and you want to submit them electronically. You will also need a connection to CIGNA, either through a clearinghouse or software.

- **Connecting by Clearinghouse**

Third-party clearinghouses, such as Emdeon®, can be used to electronically submit claims to CIGNA.

Visit [www.transact.emdeon.com](http://www.transact.emdeon.com) or call Emdeon at **1.877.469.3263**.

- **Connecting by Software**

You can submit claims to CIGNA using many different software products. Discounted options for CIGNA network dentists are listed on the next page.

- **Attaching Documents**

You can submit claims electronically using the National Electronic Attachment tool, NEA *FastAttach*™, [www.fast-attach.com](http://www.fast-attach.com). (see page 14).



## CIGNA Network Rewards Program® Software Discounts

### Claim Submission Software

- **Post-n-Track** interacts with your existing dental office software to send claims electronically. To download **free** software, visit [www.Post-n-Track.com](http://www.Post-n-Track.com) and click "Enroll."
- **Apex EDI** works with most practice management software. To sign up online visit [www.apexedi.com](http://www.apexedi.com). Click the "OneTouch™" button, then click "Sign Up" and enter your registration information. To sign up for a year with 60 days free service, enter code **APCIG2017**. To sign up for service on a month-to-month basis, enter code **APCIG4617**.

### Practice Management Software

- **Patterson EagleSoft** manages all front-office, clinical, and imaging procedures using a single patient record. You may be eligible to receive:
  - FREE first three months of eClaims
  - FREE phone training
  - FREE practice management software\*
  - FREE data import

Call **1.800.294.8504** and mention that you are a CIGNA participating dentist.

*\* One-time offer per new EagleSoft customer. Requires 12-month support commitment. Offer may be withdrawn at any time without notice.*

# Submitting Attachments

## Electronic Submissions

A dental office can electronically submit X-rays and other attachments using NEA *FastAttach*.

Register to use NEA *FastAttach* by calling **1.800.782.5150**. The \$200 registration fee will be waived for CIGNA dentists if you use the code **CIGNAZ**. *FastAttach* works with Post-n-Track and all dental practice management software.

## Other Methods

You can also mail supporting documentation to the CIGNA address on the back of your patient's ID card.



# Congratulations! You have completed this course.

We hope this course has been informative and that you will submit your claims to CIGNA Dental electronically. For our two-page Electronic Claim Submission flyer, click on the icon below. If you have any questions, contact your Professional Relations Manager.



Electronic Claims  
Submission

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