

DC 37 Health & Security Plan – Dental Claims

How to File a Dental Claim

- If treatment does not need pre-authorization, the member should submit the [ADA claim form](#) (pdf format*) signed by the member and the dentist with the proper address within 90 days of completion of treatment.
- If a pre-authorization was submitted, the claim for payment should be returned on the computer generated pre-authorization form after the dentist inserts the dates of treatment. The member and the dentist should sign the claim form. BEFORE THE MEMBER SIGNS THE CLAIM FORM, HE/SHE SHOULD MAKE SURE THAT ALL THE PROCEDURES, SIGNED FOR, WERE DONE. REMEMBER THAT MEMBERS WILL BE HELD RESPONSIBLE FOR ALL TREATMENT BILLED WHETHER ACTUALLY PROVIDED OR NOT. IF THE PLAN IS BILLED, THE APPROPRIATE RESTRICTION(S) WILL BE PUT IN PLACE. If only a partial payment is requested, the member still has to submit a claim on the same computer-generated form. A new pre-authorization form will be generated by the computer, and sent to the member and the dentist, for the remainder of the work.
- If information is missing from the claim relating to the treatment, or if additional treatment was done that was not pre-authorized, the claim may be pended. The member and the dentist will then be informed why the claim was not paid and the dentist will be requested to provide us with the necessary information so that payment can be made.

It is the member's responsibility to make sure that the dentist completes and signs his/her portion of the claim and that the form is submitted within 30 days after the completion of work.

All pre-authorizations and claims should contain:

- Personal Identification number (PID)
- Tax I.D. of the dentist
- Signatures of dentist and member
- CDT Codes
- Treatment descriptions, tooth #'s and quadrants
- Complete patient information
- Complete provider information
- Total fee amount (box #32 on the ADA claim form)

If any of the above information is omitted, the pre-authorization or claim cannot be processed and will be returned to the member or dentist.

Issued by the
District Council 37 Health and Security Plan
125 Barclay Street, New York, N.Y. 10007 – (212) 815-1234