



PROVIDER BULLETIN

BT 200616

AUGUST 25, 2006

To: All Providers

Subject: 2006 Indiana Health Coverage Programs Provider Seminar

Overview

The Office of Medicaid Policy and Planning (OMPP), the Children’s Health Insurance Program (CHIP), and EDS invite Indiana Health Coverage Programs (IHCP) providers to attend the **2006 IHCP Provider Seminar October 2-4, 2006**. This seminar is presented at no cost. Seminar sessions are offered at various times during the three-day event. EDS provider field consultants and representatives from AmeriChoice, Health Care Excel (HCE), provider associations, other EDS departments, and current Managed Care Organizations (MCOs), and the 2007 procurement award winners will be present.

The seminar will be held at the following location:

Indianapolis Marriott East
7202 E. 21st St.
Indianapolis, IN 46219
1-800-228-9290 or (317) 352-1231 (for hotel arrangements only)

Important: Please do not call the hotel to register for seminar sessions.

To receive the special rate of \$89 plus tax, per night, seminar attendees must indicate that they are attending the EDS 2006 IHCP Provider Seminar and must reserve on or before September 15, 2006.

Seminar Session Descriptions

To register, registrants must specify the seminar sessions they want to attend. Table 1 provides a description of the material to be covered in each of the seminar sessions.

Note: The information provided in these sessions is specific to the IHCP fee-for-service (FFS), Hoosier Healthwise Medicaid Select, Medical Review Team (MRT), Pre-Admission Screening and Resident Review (PASRR), First Steps, and Hoosier Healthwise risk-based managed care (RMBC) programs

Table 1 – Session Descriptions

Session Name	Description
<p>CMS-1500 Physician Billing Presented by EDS provider field consultants and representatives from each MCO</p>	<p>This session provides an overview on the completion of the CMS-1500 claim form and billing guidelines. There will also be time to address general questions from the audience. An EDS provider field consultant will lead the opening session. Each MCO will present a one-hour individual session that will include information about its claim and prior authorization (PA) requirements. See the session layout for specific dates and times.</p>
<p>Dental Presented by EDS provider field consultants</p>	<p>This session provides an overview of dental policy changes. It focuses on Health Information Portability and Accountability Act (HIPAA) requirements and Web interChange updates. The session also reviews frequent billing errors and addresses provider questions.</p>
<p>Durable Medical Equipment (DME) Presented by EDS provider field consultants and representatives from each MCO</p>	<p>This session provides an overview of recent updates and recurring topics related to DME policy and billing guidelines. This session also reviews the most common claim denial reasons. An EDS provider field consultant will lead the opening session, and each MCO will present a one-hour individual session related to its specific DME policy and billing guidelines. See the session layout for specific dates and times.</p>
<p>HIPAA Updates Presented by EDS HIPAA business and technical representatives</p>	<p>This session provides an overview of recent updates and information about the next phase of the HIPAA implementation. This session is designed for providers, vendors, and clearinghouses.</p>
<p>IHCP 101 Presented by EDS provider field consultants</p>	<p>This session provides an overview of the IHCP, eligibility verification systems, Restricted Card Program (RCP), Managed Care Programs, and more. This session is ideal for new IHCP billing providers or those needing an IHCP refresher course.</p>
<p>Medical Policy Presented by HCE Medical Policy Department representatives</p>	<p>This session is designed to educate providers on the processes, procedures, and coordination techniques used for the development and revision of medical policy for the IHCP. The status and implementation of certain provider specialty code sets are addressed during this session.</p>
<p>Medical Review Team (MRT) Presented by EDS provider field consultants</p>	<p>This session provides an overview of recent changes in the billing requirements for MRT claims. This session reviews frequent billing errors and addresses provider questions.</p>
<p>Mental Health Presented by EDS provider field consultants</p>	<p>This session provides an overview of recent updates and recurring topics related to mental health policy and billing guidelines. This session also reviews the most common claim denial reasons.</p>
<p>Pharmacy Presented by EDS provider field consultants and representatives from each MCO</p>	<p>This session includes agenda topics such as <i>Changes to Pharmacy Points of Contact, Claim Submission and Processing</i>, and other key points related to Pharmacy Benefits Management for Traditional Medicaid members. The session also provides the most up-to-date information about Medicare Part D coverage policies and procedures. An EDS provider field consultant will lead the opening session. Each MCO will present a one-hour individual session that includes information about its claim and PA requirements. See the session layout for specific dates and times.</p>

(Continued)

Table 1 – Session Descriptions

Session Name	Description
<p>Post-Payment Auditing Practices in the IHCP Presented by HCE Surveillance and Utilization Review representatives</p>	<p>This session is designed to educate providers about the auditing efforts made by the OMPP through the Surveillance and Utilization Program and the Payment Integrity Initiative. The session focuses on the policies and procedures of auditing activities and provides information on standard guidelines and procedures developed to report findings.</p>
<p>Prior Authorization (PA) Presented by HCE Prior Authorization Unit representatives</p>	<p>This session provides an overview of PA policies and procedures. The session presents a summary of services and supplies that require PA, methods of submitting a PA, and an overview of the administrative review and hearings processes.</p>
<p>Prior Authorizations of Traditional Medicaid Home Health Services Presented by the OMPP</p>	<p>This session provides information about the PA process, sources of PA information including regulations and guidelines, description of the home health benefit, types of home health agency services and limitations, member and caregiver indicators (family situation), and key issues.</p>
<p>Provider Enrollment Presented by an EDS provider field consultant</p>	<p>This session provides an overview of the process and requirements for completing the newly revised <i>Provider Enrollment Application</i> and <i>Provider Profile Maintenance</i> forms.</p>
<p>Restricted Card Program Presented by HCE Medical Policy Department representatives</p>	<p>This session focuses on maximizing claims payment of services and prescriptions for members who are in the Restricted Card Program (RCP). Topics include: checking eligibility to determine if the member is restricted, the role of the primary care physician, addition and removal of providers to a member's lock-in list, referral procedures, and RCP claims submission guidelines. Participants are welcome to ask questions. This session is lead by representatives from the HCE Surveillance and Utilization Review (SUR) Department.</p>
<p>Spend-down Presented by EDS provider field consultants</p>	<p>This session contains information about the automation of spend-down. This course includes topics such as <i>Claims Submission and Adjudication</i>, Medicare crossovers, remittance advice (RA) statements, eligibility verification system (EVS), member monthly obligation notice, and other key points related to the automation of spend-down.</p>
<p>Third Party Liability (TPL) Presented by EDS provider field consultants</p>	<p>This session provides information about TPL claims identification, file updates, denial letters, 90-day rule, attachments, and other helpful hints. This session is designed for advanced billing providers.</p>
<p>Transportation Presented by EDS provider field consultants and representatives from each MCO</p>	<p>This session provides an overview of recent updates and frequently asked questions about transportation billing on the CMS-1500 claim form. An EDS provider field consultant will lead the opening session, and subcontractors for the MCOs will present one-hour individual sessions.</p>
<p>UB-92 Presented by EDS provider field consultants and representatives from each MCO</p>	<p>This session provides an overview on the completion of a UB-92 claim form and billing guidelines. There will also be time to address general questions from the audience. An EDS provider field consultant will lead the opening session. Each MCO will present a one-hour individual session that includes information about the UB-92 claim and PA requirements. See the session layout for specific dates and times.</p>

(Continued)

Table 1 – Session Descriptions

Session Name	Description
Waiver Auditing Presented by EDS waiver auditors	This session provides an overview of the waiver audit process. The session is designed to help home- and community-based services (HCBS) waiver providers achieve IHCP compliance with the documentation and billing standards. The session is applicable to supported living services and support waivers [developmentally disabled (DD), autism, and support services) and medical model waivers (aged and disabled (A&D), traumatic brain injury (TBI), and medically fragile children (MFC)].
Waiver Enrollment and Billing Updates Presented by EDS waiver field consultants	This session reviews billing guidelines with an emphasis on frequent claim errors. The session also reviews the provider enrollment process as it relates to waiver providers. <i>This session is specifically designed for new waiver providers and case managers billing waiver program services.</i>
Waiver Roundtable Moderated by EDS waiver auditors	This session allows waiver providers to ask questions and discuss issues about HCBS Waivers. <i>This session is specifically designed for waiver providers.</i>
Web interChange Basic Presented by EDS provider field consultants	This session provides information about use of the member eligibility, check write, claim inquiry, and claim submission features available through Web interChange.
Web interChange Advanced Presented by EDS provider field consultants	This session provides information about the administrator function that allows providers to assign access to their office staff; change passwords; and create, maintain, and delete users or user groups. This session demonstrates how to use the claim void and replacement feature, on-line PAs, TPL updates, and bill crossover claims.
Who, What, Where, and When Presented by EDS provider field consultants	This session provides information to assist providers in determining the correct person or unit to call or write regarding program administration and claims processing procedures as they relate to the IHCP.
First Steps Presented by EDS provider field consultants	This session provides instructions on enrolling, credentialing, and re-credentialing. The session also provides step-by-step instructions on how to submit claims, read an RA, and review PAs online.
National Provider Identifier (NPI) Presented by EDS provider field consultants and representatives from CareSource, Molina, Harmony, MDwise, and MHS	This session provides an overview of the requirements for an NPI. The focus is on how to obtain and NPI, update the IHCP provider enrollment profile, and bill using the NPI. Representatives from the currently contracted MCOs will also provide information regarding the NPI.

Registration

Web registration is available. Providers may register for the 2006 IHCP Provider Seminar online from the IHCP Web site at <http://www.indianamedicaid.com>. To access online registration, click on **Provider Services, Education Opportunities**. The registration page provides instructions. By registering online, registrants receive immediate enrollment confirmation.

In addition to online registration, registrants may enroll in seminar sessions using the paper registration form contained with this bulletin. **If registering using the paper registration form, the deadline for registration is September 15, 2006.** Registrations may be faxed or mailed. All registrations sent by mail

must be postmarked no later than September 15, 2006. The IHCP will not accept registrations postmarked after September 16, 2006. **Only two individuals will be allowed to register, per IHCP provider number. Non providers may also register for the seminar. Each registrant must submit his or her own registration form (only one name per form).** Individuals can also register in person at the seminar on a space-available basis; however, this is not recommended.

After the paper registration form is processed, the registrant will receive a confirmation letter. This letter confirms that the registrant was either successfully registered for at least one seminar session or was denied for one or more sessions due to seating capacity. Each registrant is encouraged to bring this confirmation letter to the seminar check-in to alleviate any possible discrepancies.

Registered individuals must check in no later than five minutes before the start of their assigned sessions or their seats could be reassigned. Walk-in registration for those not pre-registered begins five minutes before the start of each session. Failure to pre-register may result in sessions not being available due to space limitations. If there are any questions, please call EDS at (317) 488-5072. Calls will be returned within 48 hours.

For comfort, business casual attire is recommended. Consider bringing a sweater due to possible room temperature variations.

Seminar Session Availability

EDS processes registrations in the order received; however, time and meeting space may preclude EDS from honoring all requests. If space is available, individuals who do not register online, via fax, or by mail may register for sessions on a walk-in-basis.

Failure to pre-register can result in sessions not being available due to space limits.

Directions

The Indianapolis Marriott East hotel is located on the near northeast side of Indianapolis, on 21st Street, east of Shadeland Avenue, west of I-465, and south of I-70.

A map of Indianapolis indicating the general location is shown in Figure 1 and a map showing the specific location of the Marriott Hotel and Conference Center is shown in Figure 2. For more specific directions from your location, please visit the IHCP Web site at <http://www.indianamedicaid.com>.

To reserve a room at the Marriott East hotel:

- Contact the hotel at (317) 352-1231
- Indicate that you are attending the EDS 2006 IHCP Provider Seminar to obtain a special rate of \$89 per room, per night, plus tax
- Reserve a room no later than September 15, 2006

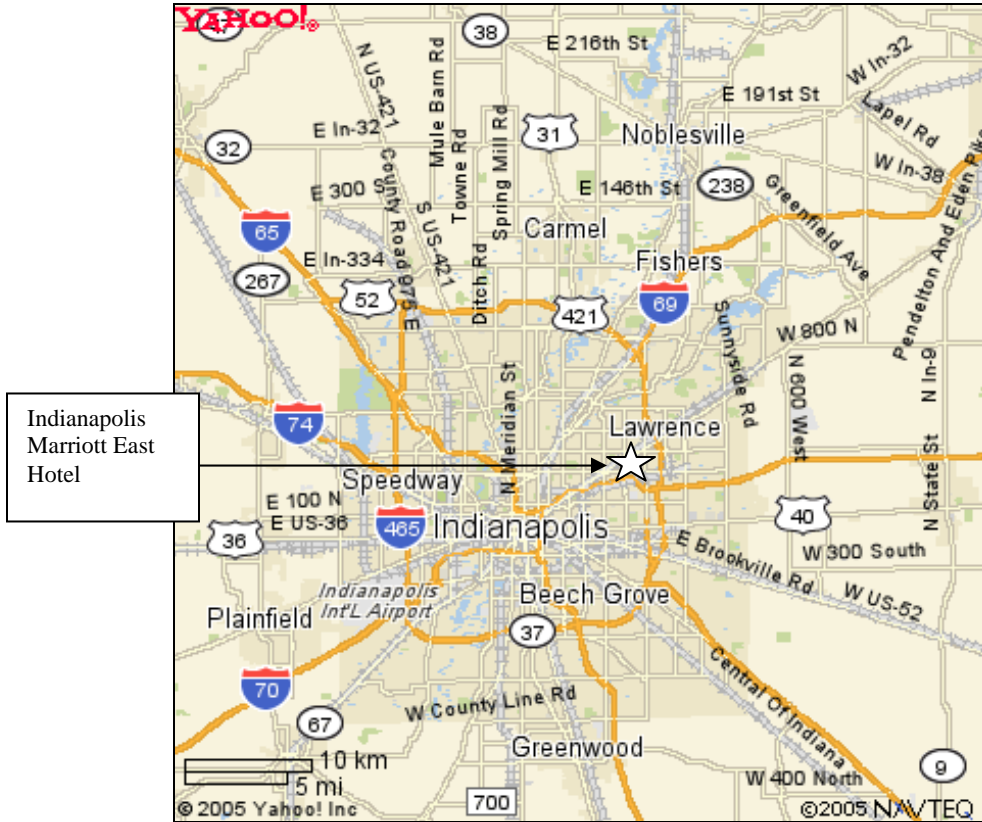


Figure 1 – Indianapolis Map Showing Location of Indianapolis Marriott East Hotel

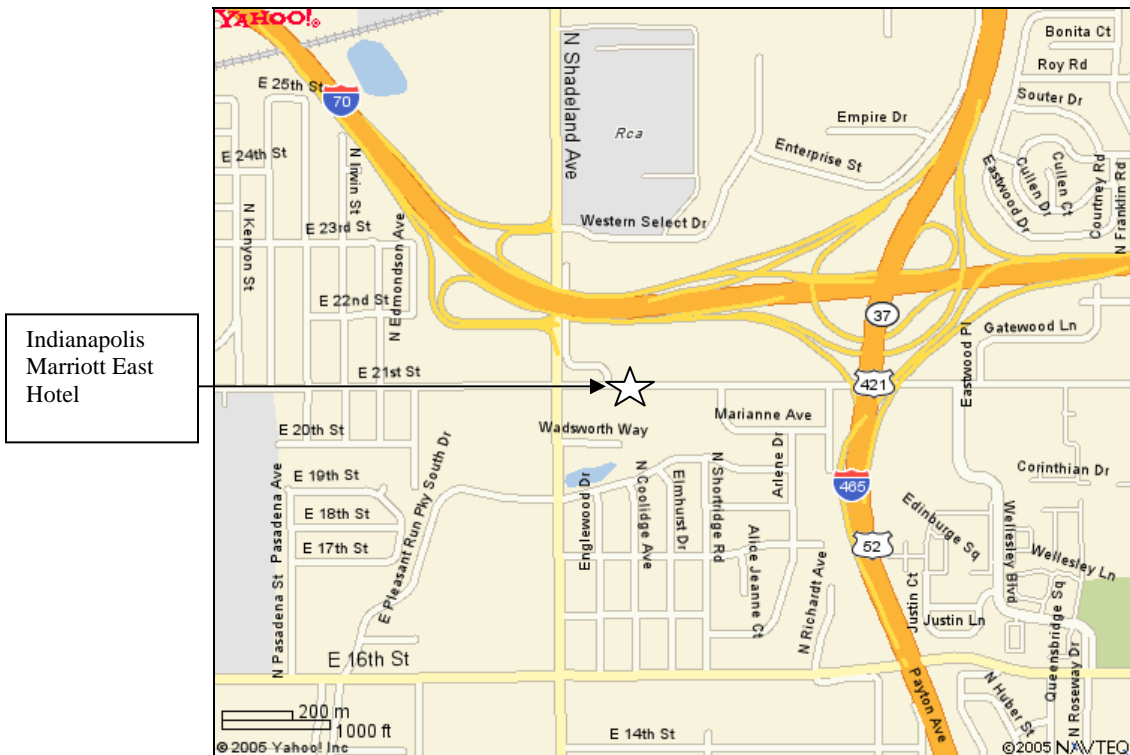


Figure 2 – Map of Specific Location of Indianapolis Marriott East Hotel

Table 2 – Session Schedule for Monday, October 2, 2006

	Room A	Room B	Room C
8 a.m.	DME (EDS)	Transportation (EDS)	
8:15 a.m.	8 a.m. – 9 a.m.	8 a.m. – 9:30 a.m.	
8:30 a.m.			
8:45 a.m.			
9 a.m.	Break		IHCP 101
9:15 a.m.	DME (MDwise)		9 a.m. – 10:30 a.m.
9:30 a.m.	9:15 a.m. – 10:15 a.m.	Break	
9:45 a.m.		Transportation (LCP, subcontractor for MHS)	
10 a.m.		9:45 a.m. – 10:45 a.m.	
10:15 a.m.	Break		Break
10:30 a.m.	DME (CareSource)		
10:45 a.m.	10:30 a.m. – 11:30 a.m.	Break	MRT
11 a.m.		Transportation (MTM, subcontractor for CareSource, Molina, and Harmony)	10:45 a.m. – 11:45 a.m.
11:15 a.m.		11 a.m. – Noon	Break
11:30 a.m.	Break	Break	Web interChange – Basic
11:45 a.m.		Transportation (MDwise)	Noon – 1 p.m.
Noon		12:15 pm. – 1:15 p.m.	Break
12:15 p.m.			
12:30 p.m.	DME (Molina)		
12:45 p.m.	12:30 p.m. – 1:30 p.m.		
1 p.m.		Break	Mental Health
1:15 p.m.		Spend-down	1:15 – 2:15 pm
1:30 p.m.	Break	1:30 – 2:30 pm	
1:45 p.m.	DME (Harmony)		Break
2 p.m.	1:45 p.m. – 2:45 p.m.		
2:15 p.m.		Break	Web interChange - Advanced
2:30 p.m.		NPI (EDS and MCOs)	2:30 p.m. – 4 p.m.
2:45 p.m.	Break	2:45 p.m. – 4:45 p.m.	
3 p.m.	DME (MHS)		
3:15 p.m.	3 p.m. – 4 p.m.		
3:30 p.m.			
3:45 p.m.			
4 p.m.			Anthem
4:15 p.m.			4:00 pm – 4:30 p.m.
4:30 p.m.			
4:45 p.m.			
5 p.m.			

Note: Registration and booths are open from 8 a.m. until 5 p.m.

Table 3 – Session Schedule for Tuesday, October 3, 2006

	Room A	Room B	Room C		
8 a.m.	CMS-1500 Physician Billing (EDS) 8 a.m. – 9:30 a.m.	Anthem 8:45 a.m. – 9:15 a.m.	MRT 8 a.m. – 9a.m.		
8:15 a.m.					
8:30 a.m.					
8:45 a.m.					
9 a.m.					
9:15 a.m.	Break	TPL 9:30 a.m. – 10:30 a.m.	Web interChange - Advanced 9:15 a.m. – 10:45 a.m.		
9:30 a.m.					
9:45 a.m.					
10 a.m.					
10:15 a.m.					
10:30 a.m.	Break	Who What When Where 10:45 a.m. – 11:45 a.m.	Break		
10:45 a.m.	Break				
11 a.m.	CMS-1500 Physician Billing (MHS) 11a.m. – Noon			Break	Medical Policy 11a.m. – Noon
11:15 a.m.					
11:30 a.m.					
11:45 a.m.					
Noon	Break	Dental Noon – 1:30 p.m.	Break		
12:15 p.m.	CMS-1500 Physician Billing (Harmony) 12:30 p.m. – 1:30 p.m.			Restricted Card 12:15 p.m. – 1:15 p.m.	
12:30 p.m.					
12:45 p.m.					
1 p.m.					
1:15 p.m.					
1:30 p.m.	Break	Break	Post-Payment Auditing Practices in the IHCP 1:30 p.m. – 2:30 p.m.		
1:45 p.m.	CMS-1500 Physician Billing (MDwise) 1:45 p.m. – 2:45 p.m.	Provider Enrollment 1:45 p.m. – 2:45 p.m.			
2 p.m.					
2:15 p.m.					
2:30 p.m.					
2:45 p.m.	Break	Break	Prior Authorization 2:45 p.m. – 3:45 p.m.		
3 p.m.	CMS-1500 Physician Billing (Molina) 3 p.m. – 4 p.m.	HIPAA Updates 3 p.m. – 4:30 p.m.			
3:15 p.m.					
3:30 p.m.					
3:45 p.m.					
4 p.m.					
4:15 p.m.					
4:30 p.m.					
4:45 p.m.					
5 p.m.					

Note: Registration and booths are open from 8 a.m. until 5 p.m.

Table 4 – Session Schedule for Wednesday, October 4, 2006

	Room A	Room B	Room C
8 a.m.	UB-92 (EDS)		Pharmacy (EDS)
8:15 a.m.	8 a.m. – 9:30 a.m.	First Steps	8 a.m. – 9 a.m.
8:30 a.m.		8:15 a.m. – 10:15 a.m.	
8:45 a.m.			
9 a.m.			Break
9:15 a.m.			Pharmacy (Harmony)
9:30 a.m.	Break		9:15 -10:15 am
9:45 a.m.	UB-92 (Molina)		
10 a.m.	9:45 a.m. – 10:45 a.m.		
10:15 a.m.		Break	Break
10:30 a.m.		Prior Authorization of Traditional Medicaid and Home Health	Pharmacy (Care Source)
10:45 a.m.	Break	10:30 a.m. – 11:30 a.m.	10:30 a.m. – 11:30 a.m.
11 a.m.	UB-92 (MHS)		
11:15 a.m.	11 a.m. – Noon		
11:30 a.m.		Break	Break
11:45 a.m.		Waiver Enrollment and Billing Updates	
Noon	Break	11:45 a.m. – 1:15 p.m.	Pharmacy (MDwise)
12:15 p.m.			Noon – 1 p.m.
12:30 p.m.	UB-92 – (CareSource)		
12:45 p.m.	12:30 p.m. – 1:30 p.m.		
1 p.m.			Break
1:15 p.m.		Break	Pharmacy (MHS)
1:30 p.m.	Break	Waiver Auditing	1:15 p.m. – 2:15 p.m.
1:45 p.m.	UB-92 (Harmony)	1:30 p.m. – 2:30 p.m.	
2 p.m.	1:45 p.m. – 2:45 p.m.		Break
2:15 p.m.			
2:30 p.m.		Break	Pharmacy (Molina)
2:45 p.m.	Break	Waiver Roundtable	2:30 p.m. – 3:30 p.m.
3 p.m.	UB-92 (MDwise)	2:45 p.m. – 3:45 p.m.	
3:15 p.m.	3 p.m. – 4 p.m.		Anthem
3:30 p.m.			3:45 p.m. – 4:15 p.m.
3:45 p.m.			
4 p.m.			
4:15 p.m.			
4:30 p.m.			
4:45 p.m.			
5 p.m.			

Note: Registration and booths are open from 8 a.m. until 4 p.m.

2006 INDIANA HEALTH COVERAGE PROGRAMS PROVIDER SEMINAR REGISTRATION FORM

Registration Deadline: September 15, 2006

Fax to: (317) 488-5376 or Mail to: EDS IHCP Seminars, PO Box 7263, Indianapolis, IN 46207-7263

If you have questions, please call (317) 488-5072.

Instructions

Please print or type the information requested. **Submit a separate form for each registrant (one registrant per form). Providers may register only two individuals per provider number.**

Please use a checkmark to indicate the sessions you wish to attend. Registrants can attend only one session during each time period. Registration forms received with requests for more than one session at the same time will be fulfilled for only one of those sessions.

Registrant Information

Name of Registrant:		Provider Number:	
Provider Name:			
Provider Address:			
City:	State:	ZIP:	
Provider Telephone Number:	Fax Number:	E-mail Address:	

Seminar Sessions Monday, October 2, 2006

Seminar Sessions Tuesday, October 3, 2006

DME - 8 a.m. to 4 p.m. <i>Select individual sessions</i> <input type="checkbox"/> 8 a.m. to 9 a.m. DME (EDS) <input type="checkbox"/> 9:15 a.m. to 10:15 a.m. DME (MDwise) <input type="checkbox"/> 10:30 a.m. to 11:30 a.m. DME (CareSource) <input type="checkbox"/> 12:30 p.m. to 1:30 p.m. DME (Molina) <input type="checkbox"/> 1:45 p.m. to 2:45 p.m. DME (Harmony) <input type="checkbox"/> 3 p.m. to 4 p.m. DME (MHS)		CMS-1500 Physician Billing - 8 a.m. to 4 p.m. <i>Select individual sessions</i> <input type="checkbox"/> 8 a.m. to 9:30 a.m. CMS-1500 (EDS) <input type="checkbox"/> 9:45 a.m. to 10:45 a.m. CMS-1500 (CareSource) <input type="checkbox"/> 11 a.m. to Noon CMS-1500 (MHS) <input type="checkbox"/> 12:30 p.m. to 1:30 p.m. CMS-1500 (Harmony) <input type="checkbox"/> 1:45 p.m. to 2:45 p.m. CMS-1500 (MDwise) <input type="checkbox"/> 3 p.m. to 4 p.m. CMS-1500 (Molina)	
Transportation – 8 a.m. to 1:15 p.m. – <i>Select individual sessions</i> <input type="checkbox"/> 8 a.m. to 9:30 a.m. Transportation (EDS) <input type="checkbox"/> 9:45 a.m. to 10:45 a.m. Transportation (LCP, subcontractor for MHS) <input type="checkbox"/> 11 a.m. to Noon. Transportation (MTM, subcontractor for CareSource, Molina, and Harmony) <input type="checkbox"/> 12:15 p.m. to 1:15 p.m. Transportation (MDwise)		<input type="checkbox"/> 8 a.m. to 9 a.m. MRT <input type="checkbox"/> 8:45 a.m. to 9:15 a.m. Anthem <input type="checkbox"/> 9:15 a.m. to 10:45 a.m. Web interChange – Advanced <input type="checkbox"/> 9:30 a.m. to 10:30 a.m. TPL	
<input type="checkbox"/> 9 a.m. to 10:30 a.m. IHCP101 <input type="checkbox"/> 10:45 a.m. to 11:45 p.m. MRT <input type="checkbox"/> Noon to 1 p.m. Web interChange – Basic <input type="checkbox"/> 1:15 p.m. to 2:15 p.m. Mental Health <input type="checkbox"/> 1:30p.m. to 2:30 p.m. Spend-down <input type="checkbox"/> 2:30 p.m. to 4 p.m. Web interChange – Advanced <input type="checkbox"/> 2:45 p.m. to 4:45 p.m. NPI <input type="checkbox"/> 4 p.m. to 4:30 p.m. Anthem		<input type="checkbox"/> 10:45 a.m. to 11:45 p.m. Who, What, When, Where <input type="checkbox"/> 11 a.m. to Noon Medical Policy <input type="checkbox"/> Noon to 1:30 p.m. Dental <input type="checkbox"/> 12:15 p.m. to 1:15 p.m. Restricted Card Program <input type="checkbox"/> 1:30 p.m. to 2:30 p.m. Post-Payment Auditing Practices <input type="checkbox"/> 1:45 p.m. to 2:45 p.m. Provider Enrollment <input type="checkbox"/> 2:45 p.m. to 3:45 p.m. Prior Authorization <input type="checkbox"/> 3 p.m. to 4:30 p.m. HIPAA Updates	

Seminar Sessions Wednesday, October 4, 2006	
UB-92 - 8 a.m. to 4 p.m. <i>Select individual sessions</i> <input type="checkbox"/> 8 a.m. to 9:30 a.m. UB-92 (EDS) <input type="checkbox"/> 9:15 a.m. to 10:45 a.m. UB-92 (Molina) <input type="checkbox"/> 11 a.m. to Noon a.m. UB-92 (MHS) <input type="checkbox"/> 12:30 p.m. to 1:30 p.m. UB-92 (CareSource) <input type="checkbox"/> 1:45 p.m. to 2:45 p.m. UB-92 (Harmony) <input type="checkbox"/> 3 p.m. to 4 p.m. UB-92 (MDwise)	Pharmacy - 8 a.m. to 3:30 p.m. <i>Select individual sessions</i> <input type="checkbox"/> 8 a.m. to 9 a.m. Pharmacy (EDS) <input type="checkbox"/> 9:15 a.m. to 10:15 a.m. Pharmacy (Harmony) <input type="checkbox"/> 10:30 a.m. to 11:30 a.m. Pharmacy (CareSource) <input type="checkbox"/> Noon to 1 p.m. Pharmacy (MDwise) <input type="checkbox"/> 1:15 p.m. to 2:15 p.m. Pharmacy (MHS) <input type="checkbox"/> 2:30 p.m. to 3:30 p.m. Pharmacy (Molina)
<input type="checkbox"/> 8:15 a.m. to 10:15 a.m.	First Steps
<input type="checkbox"/> 10:30 a.m. to 11:30 a.m.	Prior Authorization of Traditional Medicaid and Home Health
<input type="checkbox"/> 11:45 a.m. to 1:15 p.m.	Waiver Enrollment and Billing Updates
<input type="checkbox"/> 1:30 p.m. to 2:30 p.m.	Waiver Auditing
<input type="checkbox"/> 2:45 p.m. to 3:45 p.m.	Waiver Roundtable
<input type="checkbox"/> 3:45 p.m. to 4:15 p.m.	Anthem

Current Dental Terminology (CDT) (including procedures codes, nomenclature, descriptors, and other data contained therein) is copyrighted by the American Dental Association. ©2002, 2004 American Dental Association. All rights reserved. Applicable Federal Acquisition Regulation System/Department of Defense Acquisition Regulation System (FARS/DFARS) apply.

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