



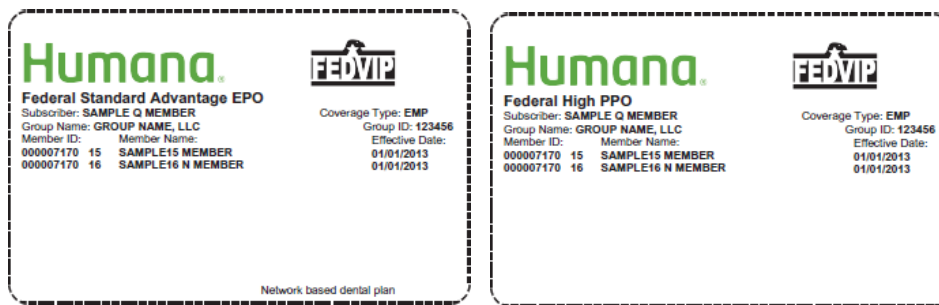
## Frequently asked questions

**1. Q. Where can I get a copy of my contracted federal fees?**

A: You can access your fee schedule by registering on the Humana.com secure dentist portal. Visit [Humana.com/provider/dentists/](http://Humana.com/provider/dentists/) and select "Register now."  
You also can call us at **877-692-2468** and choose Option 1 to request a fee schedule by mail, fax or email.

**2. Q. How would I recognize a Humana member with the federal plan?**

A: Federal plan members will present one of the identification cards shown below.



**3. Q. Where do I go for eligibility and claims information?**

A: You can check eligibility and claims at [Humana.com](http://Humana.com). The instructions on the website will guide you through the registration process. You also can receive claims and eligibility information by calling **877-692-2468**.

**4. Q. How should I submit claims?**

A: For faster processing, we encourage you to send your claims electronically. Our payer ID is 73288. Humana accepts electronic claims and attachments through various clearinghouses.

Dental providers can transmit radiographs, periodontal charts, photographs, explanation of benefits forms, narratives and other attachments via FastAttach™. Call National Electronic Attachment at **800-782-5150** and select Option 2, or go to [nea-fast.com](http://nea-fast.com) for additional information.

Paper claims should be sent to: Humana, P.O. Box 14611, Lexington, KY 40512-4611.

**5. Q. What if I need to perform a procedure that is not on the patient's copayment list?**

A: Unlisted procedure codes are not covered. The dentist determines the appropriate fee for these procedures.

**6. Q: What if there is no federal fee listed for a procedure covered under the Federal Advantage EPO Plan?**

A: Please refer to the language at the top of your federal fee schedule. Covered procedures not listed on the fee schedule (excluding orthodontics) will be reimbursed at up to 80% of the maximum allowable fee, less the patient's copayment.



**7. Q. I'm not a licensed orthodontist, but I perform orthodontic procedures. How am I reimbursed?**

A: Only licensed orthodontists are contracted to receive supplemental payments in addition to the patient copayments.

**8. Q. Can I refer patients to a specialist?**

A: Yes, you can refer them to any specialist in the Federal Advantage EPO Plan or PPO network. To find a network specialist, visit **feds.humana.com**. Under the Dental tab, look for the Dentist finder under the Plan Options. You also can ask the patient to call a customer care specialist at **877-692-2468** for help finding a participating specialist.

**9. Q: What is the First Payor Process for FEDVIP?**

A: Coverage for members in the Federal Employees Health Benefits Program (FEHB) and the Federal Employees Dental and Vision Insurance Program (FEDVIP) is governed by the Office of Personnel Management (OPM). This agency requires the medical carrier to be the first payor when a member has a medical plan with embedded dental coverage. When treating a FEDVIP member, generally the FEDVIP allowance will prevail. However, in cases where the provider participates in both FEHB and FEDVIP, the lesser of the contractual plan allowance will prevail. FEDVIP members will be held harmless – made whole in accordance with this guidance.

Below is a step-by-step process to ensure timely processing of your FEDVIP claims:

## First Payor Guidelines for Federal Employees

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Coverage for members in the Federal Employees Health Benefits Program (FEHB) and the Federal Employees Dental and Vision Insurance Program (FEDVIP) is governed by the Office of Personnel Management (OPM). This agency requires the medical carrier to be the first payor when a member has a medical plan with embedded dental coverage. To help us process your claims quickly, please follow these steps:



**1.** Verify the enrollee's medical coverage. If the plan has an embedded dental benefit, submit the claim to the medical carrier first.



**2.** Apply payment from the medical carrier to the member's responsibility first.



**3.** After the adjustment is made, attach a copy of the medical explanation of benefits to the claim form for the secondary insurance and send it to:

**Humana**  
**P.O. Box 14287**  
**Lexington, KY 40512-4287**

The member is financially obligated to pay only his or her member responsibilities on the schedule of benefits. If you have questions, please call **877-692-2468**, 9 a.m. – 7 p.m., Eastern time.



**10. Q: Can I get reimbursed for Personal Protective Equipment (PPE) expenses when treating FEDVIP members?**

A: Currently Humana is not reimbursing providers for PPE. The OPM guidelines state that PPE costs cannot be passed on to FEDVIP members