



July 28, 2009

Re: Utilization Review for New Mexico Medicaid Fee-For-Service Dental Services

Dear Dental Office/Office Manager/Medical Records staff:

Molina Healthcare of New Mexico, Inc. (Molina Healthcare) is pleased to announce that as of August 1, 2009, Molina Healthcare will now do administration of utilization review (UR) for the New Mexico (NM) Medicaid fee-for-service (FFS) dental program, among other Medicaid FFS programs administered by the NM Human Services Department/Medical Assistance Division.

Beginning August 1, 2009, dental prior authorization (PA) requests must be submitted to Doral Dental. As per current practice, the PA request is submitted on an ADA dental claim form (2006 version is required). Doral Dental has been subcontracted by Molina Healthcare to perform FFS dental UR. During the transition of UR services to Molina Healthcare, Blue Cross Blue Shield of New Mexico (BCBSNM), the previous FFS UR administrator, will complete dental review requests that are received by July 31, 2009 or prior.

Doral Dental is able to accept either electronic or paper submissions.

Paper claim submissions must be sent to:

Doral Dental USA
12121 North Corporate Parkway
Mequon, WI 53209

Electronic submissions can be sent directly to Doral Dental in the 837 file format from a clearinghouse vendor. For more information on electronic submissions, please contact your clearinghouse vendor directly, or call Molina Healthcare provider services at: 1-866-916-3250 (toll-free) or 505-348-0311 (local in Albuquerque).

Once Doral Dental makes a determination, the x-rays and supporting documentation will be returned to your office along with a copy of the authorization determination letter. This authorization determination letter will list the requested service and inform you if the authorization was approved or denied. For timely review and processing of your dental authorization, please ensure that you submit all supporting documentation along with your authorization request. In addition, please ensure that copies of x-rays and other supporting documentation are clearly labeled with your office name and the Medicaid recipient's name and Medicaid identification number (i.e. SSN).

If you or your office has any questions regarding your dental PA request or the determination letter, please call Molina Healthcare provider services at: 1-866-916-3250 (toll-free) or 505-348-0311 (local in Albuquerque). Any disagreements with an adverse review decision made by Doral Dental should be directed to Molina Healthcare provider services.

As always, thank you for your cooperation and for partnering with us to improve the health of individuals, families, and communities.

Sincerely,

Molina Healthcare