



# Annual Dental CAP Report

2025 Contracting



BlueCross BlueShield  
**Kansas**

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## Introduction

Blue Cross and Blue Shield of Kansas (BCBSKS) is the insurer Kansans trust with their health. Much of that status can be attributed to the high-quality care delivered by our network providers. This document outlines the details related to our 2025 Competitive Allowance Program (CAP) offer and includes the specifics of our Quality-Based Reimbursement Program (QBRP), which has been designed to reward your efforts toward maintaining high-quality standards.

BCBSKS continues to offer contracting providers top-notch services, including professional relations representatives and provider network services. After almost two years of hybrid service with providers, our field staff have resumed in person visits, trainings, and workshops. We are also available to conduct these activities virtually based on the provider's preference. We want to thank you for your versatility in working with our professional relations team to meet your needs. We also want to extend our appreciation to you and your staff for caring for our members in these unprecedented times.

Lastly, many new national and local laws, including but not limited to the Consolidated Appropriations Act (CAA), took effect in 2022 and have caused significant changes for both BCBSKS and providers. We try to the extent possible to limit any burden to providers as we comply with these new requirements. We appreciate your understanding and cooperation as we both fulfill our responsibilities under law.

If you need clarification or additional information related to any information included herein, contact your professional relations representative or provider network services.



## Introduction

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## By the numbers

Blue Cross and Blue Shield of Kansas provides the best service in the industry and strives to be the health insurance company of choice for our members and providers.

**#1**

BCBSKS is top-ranked for Member Satisfaction.

**10.80%**

BCBSKS spent 10.80 percent of annual premium income on administrative expenses for the year of 2023.

**261,926**

BCBSKS and its subsidiaries serve 261,926 members with dental coverage as of May 31, 2024

**92%**

BCBSKS contracts with 92 percent of all dentists in the Plan area for CAP and about 57 percent for the Dental PPO.

**100%**

BCBSKS is 100 percent URAC accredited in health plan, case management, and disease management.

## 2025 Reimbursement and Policy Memo changes

Highlights of policy memo changes are noted in red.

Reimbursement for 2025 is aligned to continue RVU-based pricing and promote the incentives available through the Quality-Based Reimbursement Program (QBRP), see pages 5-8. The 2025 reimbursement changes include increasing allowances for lower-valued codes and maintaining allowances for high-valued codes.

Additional increases can be achieved through QBRP. BCBSKS continues to be sensitive to the challenges experienced in rural Kansas related to access to dental care and recruitment of dentists. As such, BCBSKS will continue to increase the base allowances 5 percent for services performed by dentists (CDT codes) in counties with a population of 13,000 or less (see page 9).



# The value in contracting

BCBSKS provides business services that bridge the gap between the delivery and financing of healthcare. Services creating significant value for contracting providers include:

<p><b>Local member contracts</b> structured to allow charges up to 100 percent of the MAP for participating CAP providers (subject to member benefits).</p>	<p><b>Opportunity to earn additional revenue</b> through the Quality-Based Reimbursement Program (QBRP).</p>
<p><b>Detailed claim-payment information</b> provided to both you and the member explaining their financial responsibilities.</p>	<p><b>Direct payment from BCBSKS</b>, which minimizes your collection efforts and increases cash flow.</p>
<p><b>A dedicated field staff</b> available to visit your office to address any operational issues.</p>	<p><b>Electronic remittance advice</b> and payment capabilities.</p>
<p><b>Access to Provider Network Services</b> personnel to answer policy questions or obtain assistance with claim coding questions.</p>	<p><b>Opportunity to participate on specialty liaison committees</b> and provide direct input in the development of medical policies and emerging issues.</p>
<p><b>Opportunity to participate</b> in the BCBSKS Dental PPO network and/or Medicare Advantage (as applicable).</p>	<p><b>Periodic workshops</b> conducted by Professional Relations staff that delivers continuous training for new and experienced medical assistant staff, helping update your staff on new administrative procedures to ensure timely claim payments.</p>
<p><b>Website (bcbsks.com) and self-service</b> access through Availity, which improves your office efficiencies and maximizes your employee resources.</p> <ul style="list-style-type: none"> <li>• Secure services include detailed claims payment information, member eligibility, remittance advice, and provider enrollment information.</li> <li>• Other services include training modules, podcasts, newsletters, manuals, policy memos, and medical policies/guidelines.</li> </ul>	<p><b>Contracting providers' names made available to BCBSKS members</b> through a number of sources including the internet, employer groups, and other contracting providers for referral purposes, which increases the potential for new patients.</p>

**NOTE —** In 2025, for the majority of our business, non-contracting providers' services will be paid direct to the member at a charge up to 80 percent of the MAP (i.e. there is a 20-percent penalty for members receiving services from a non-contracting provider), subject to member benefits. In addition, assignment of benefits to non-contracting providers is not allowed. Also, non-contracting providers do not qualify for QBRP incentives.



## 2025 Dental Providers QBRP

The BCBSKS Quality-Based Reimbursement Program (QBRP) is designed to promote efficient administration, improved quality, and better patient care and outcomes. Contracting BCBSKS providers have an opportunity to earn additional revenue through add-ons to allowances for meeting the defined quality metrics. BCBSKS claims data is used to determine qualification for any applicable metric requiring data.

The 2025 QBRP program is effective for services performed January 1, 2025 through December 31, 2025. Since the 2025 CAP letter is sent out in July 2024, providers have several months to prepare to meet the various QBRP metrics and qualify for incentives effective January 1, 2025, in accordance with the metric review schedule (see page 7). Please read the requirements and metrics for the 2025 QBRP program so you are prepared to maximize the available incentives. Any subsequent pertinent information or clarification will be communicated accordingly.

### Criteria for 2025

In accordance with the 2025 Dental Policy Memo, Section XXI. Reimbursement for Quality, this document describes the components of our QBRP effective January 1, 2025 through December 31, 2025. This program applies to all BCBSKS CAP, Dental PPO, and BlueCross BlueShield of Kansas Solutions, Inc. (a wholly owned subsidiary of BCBSKS) dental providers and services except for clinical lab (using codes on the Medicare clinical lab fee schedule) pharmacies, and pharmaceuticals. This program will offer an opportunity for eligible providers to earn increased reimbursement based on meeting the metrics in Groups 1 and 2 described on page 6. This reimbursement will be in addition to the respective base MAPs for CAP, Dental PPO, and Solutions for 2025.

**Please note — Changes in CDT and CPT codes (added/deleted) will be effective prospectively. QBRP adjustments/corrections will be effective the first of the following month, unless otherwise specified.**

An eligible provider may independently qualify for each metric, except when measured on a group basis. The QBRP metrics are multiplied individually by the applicable MAP, then totaled with the applicable MAP to determine the total reimbursement “QBRP MAP.” BCBSKS will allow the lesser of the provider’s charge or the “QBRP MAP.”

In order for incentive payments to begin January 1, 2025, BCBSKS will use information on file or available from outside sources to determine which incentives providers qualify for based on unique provider individual NPI numbers, billing NPI numbers or tax ID, whichever is applicable.

**Please note —** BCBSKS built enhancements to the provider information portal to include self-service QBRP information.

**All metrics, with the exception of the Provider Information Portal, will be reviewed on a semi-annual basis and any incentives earned will be effective either January 1, 2025 or July 1, 2025 as applicable.**



## 2025 Dental Providers QBRP

We will conduct a QBRP refresh in the first and second quarters (depending on the metric) of 2025 for an effective date of July 1, 2025 to determine if providers are continuing to meet the performance standards for the metric(s) earned for the incentive payments effective January 1, 2025. If the refreshed data indicates a provider is no longer meeting the performance standards for the metric(s), then the associated QBRP incentive(s) will cease beginning July 1, 2025 for the remainder of the year. Confirmation of QBRP measure can be obtained real time on the provider portal. The portal will reflect effective and termination dates of all applicable QBRP measures.

QBRP PREREQUISITES AND GROUPS FOR PROVIDERS	
<b>QBRP Participation Prerequisites</b>	Providers must conduct business with BCBSKS electronically (i.e. turn off paper remittance advices (R/A)). Providers must submit all eligible claims electronically, accept electronic remittance advice documents (ERAs: either through receiving the ANSI 835 transaction or by downloading the RA from the BCBSKS secured website (and turn off printed RAs), and receive all communications (newsletters, etc.) electronically. Provider must be in good standing with BCBSKS to qualify for and receive QBRP. QBRP will cease if provider is no longer in good standing.
<b>Group 1</b>	Applies to all eligible contracting dental providers and to all eligible/covered CDT and CPT codes (excludes Clinical Lab, Pharmacy, and Pharmaceuticals).
<b>Group 2</b>	Applies to all eligible contracting dental providers and to all eligible/covered CDT codes (excludes Clinical Lab, Pharmacy, and Pharmaceuticals).

Metric	%	Group	Description	Qualifying Period
<b>Electronic Self-Service (ES3, ES2)</b>	<b>2.0 (ES3)</b> (96% or >) <b>1.0 (ES2)</b> (86-95%)	1	Must use Availity portal or ANSI 270/271 & 276/277 transactions to electronically obtain BCBSKS patient eligibility, benefit, and claims status information. Electronic access must meet one of the percentages at left compared to the provider's total number of queries to BCBSKS, regardless of the mode of inquiry to receive the corresponding incentive. Providers billing under a single tax ID number will have their inquiries combined for determining the applicable percent.	Semi-annual
<b>Electronic Provider Message Board (EPM)</b>	1.0	1	Must sign agreement to supply needed information for claim processing review/completion. Time frame for return of the requested information must be within the agreement time frame (15 days) through the provider message board portal.	Semi-annual
<b>Provider Information Portal (PRD)</b>	3.0	2	Must verify and attest to provider information every 90 days according to the qualifying schedule below. Each individual provider's information within a group must be verified. Verification must be completed within the BCBSKS provider information portal. <b>Providers who do not attest every 90 days will be suppressed from the provider directory</b>	Every 90 days



## 2025 Dental Providers QBRP

### Qualifying for Electronic Self-Service Incentive (ES3, ES2)

The following is a list of incentive effective dates and the corresponding qualifying periods:

Qualifying Period	Incentive begins
August 1 - October 31, 2024	January 1, 2025
February 1 - April 30, 2025	July 1, 2025

### Qualifying for Electronic Provider Message Board (EPM)

The following is a list of incentive effective dates and the corresponding qualifying periods:

Qualifying Period	Incentive
June 2024 - November 2024	January 1, 2025
December 2024 - May 2025	July 1, 2025
If the electronic provider message board (EPM) is used as outlined in the EPM agreement, one-time authorization allows for continuation of qualifying period without interruption.	

### Qualifying for Provider Information Portal (PRD)

The following is a list of incentive effective dates and the corresponding qualifying periods.

Qualifying Period	Incentive
September 2024 - November 2024	January 1, 2025
December 2024 - February 2025	April 1, 2025
March 2025 - May 2025	July 1, 2025
June 2025 - August 2025	October 1, 2025





## 2025 Dental Providers QBRP

QBRP CHANGES FOR 2025		
Metric	Change	Reason
	No changes	

## Rural Access Counties

The following (page 9) is a list of counties with a population of 13,000 or less that qualify for a Rural Access incentive. The 5 percent rural access payment is separate and distinct from QBRP. However, the same QBRP procedure code exclusions apply to the rural access incentive. (Source: U.S. County 2023 Estimated Census)

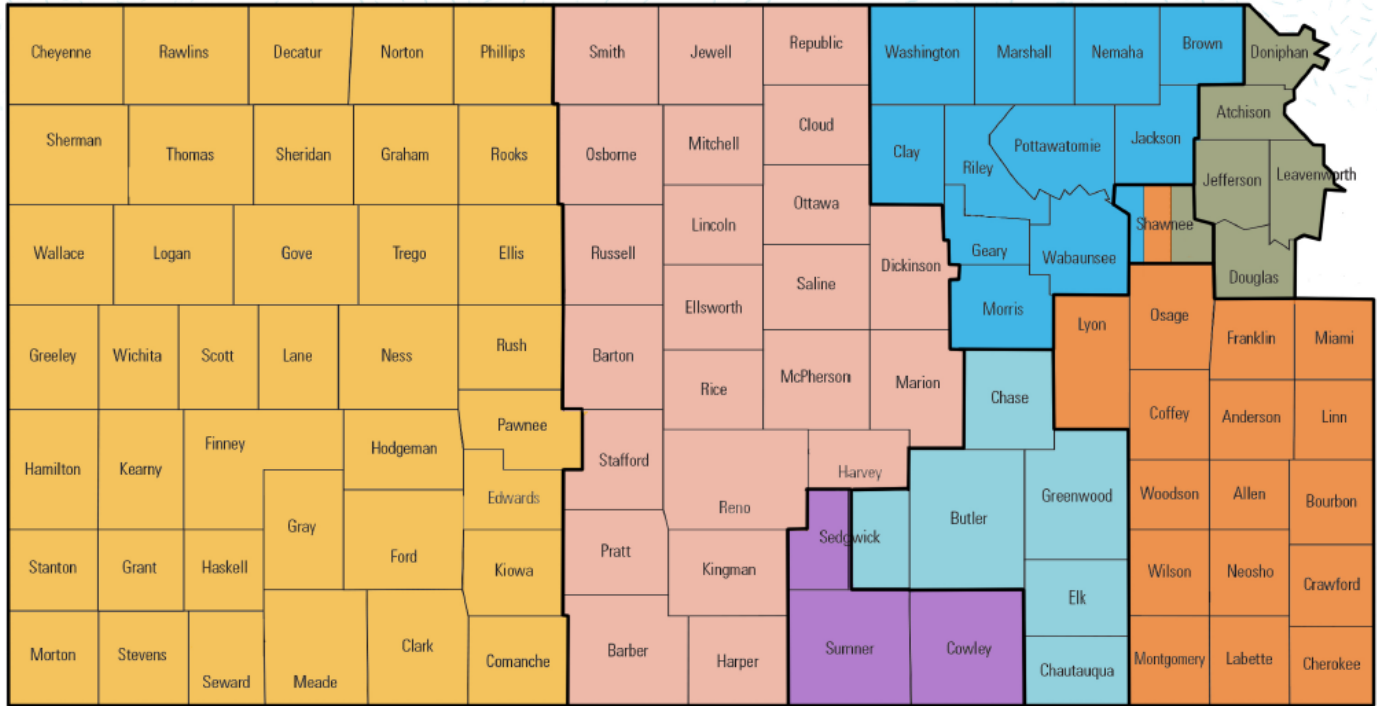
Please note — Changes will be effective prospectively and will be effective the first of the following month, unless otherwise specified.



## Rural Access Counties

County	Population
Allen	12,412
Anderson	7,838
Barber	4,071
Brown	9,250
Chase	2,579
Chautauqua	3,347
Cheyenne	2,636
Clark	1,847
Clay	8,007
Cloud	8,854
Coffey	8,251
Comanche	1,655
Decatur	2,712
Doniphan	7,493
Edwards	2,733
Elk	2,467
Ellsworth	6,357
Gove	2,735
Graham	2,376
Grant	7,147
Gray	5,743
Greeley	1,181
Greenwood	5,870
Hamilton	2,437
Harper	5,435
Haskell	3,630
Hodgeman	1,655
Jewell	2,847
Kearny	3,823
Kingman	7,066
Kiowa	2,374
Lane	1,529
Lincoln	2,920
Linn	9,860
Logan	2,665

County	Population
Marion	11,690
Marshall	9,933
Meade	3,911
Mitchell	5,719
Morris	5,334
Morton	2,580
Nemaha	10,114
Ness	2,618
Norton	5,330
Osborne	3,427
Ottawa	5,818
Pawnee	6,126
Phillips	4,761
Pratt	9,082
Rawlins	2,463
Republic	4,627
Rice	9,260
Rooks	4,778
Rush	2,830
Russell	6,723
Scott	4,922
Sheridan	2,423
Sherman	5,844
Smith	3,590
Stafford	3,909
Stanton	1,901
Stevens	5,077
Thomas	7,865
Trego	2,731
Wabaunsee	7,057
Wallace	1,509
Washington	5,504
Wichita	2,082
Wilson	8,382
Woodson	3,115



MD, DO, DPM, DC, DDS, PA, APRN, CRNA, LSCSW, PHD, OD, OOD, OSAF, CCC-SLP (speech), OTR, RPT

- Gwen Nelson - Topeka - Rep. Code C
- Jennifer Falk - Topeka - Rep. Code Z
- Jennie Fellers - Topeka - Rep. Code D
- Brandon Taylor - Hays - Rep. Code R

**Pharmacy and Infusion Therapy**

Tiffany Liesmann, PharmD - Topeka - Rep. Code B

- Kayla Straub - Hutchinson - Rep. Code K
- Vickie Kloxin - Wichita - Rep. Code M
- Kyle Abbott - Wichita - Rep. Code P

CCC-A (AUD), Hearing Aid Dispenser (HAD), HME, Orthotists, Private Duty Nurses, Prosthetists, Sleep Labs (SLAB), AMB, ABA

Heather Schultz - Topeka - Rep. Code V

**Medicare Advantage**

Patrick Artzer - Topeka

TriWest

Holli Dieckmann - Topeka



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