## Select Health Dental Claims History Key

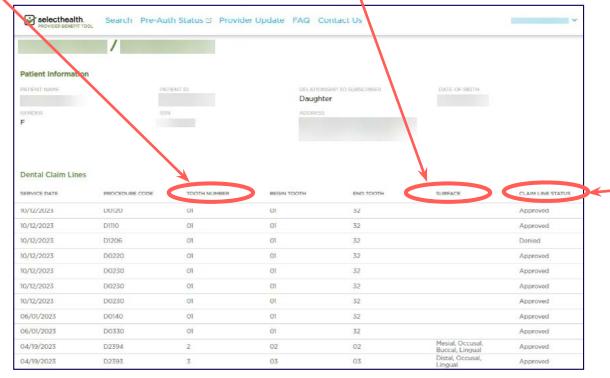
The dental claims history functionality gives providers an historical summary of dental code procedures performed for a member/patient over the last five years, offering better insight about frequencies, limitations, and exclusions. Keep in mind that some of these procedures may have been performed by a provider other than those within your practice and that you won't have access to those claim details if this is the case.

Please review the Dental Payment Summary (DPS) for further details on dental coverage (access the DPS key for guidance).

If the procedure code is performed on a singular tooth, the specific tooth number will display here. And the begin tooth and end tooth listed below will reflect the same tooth number.

If the procedure code is done for the whole mouth, the begin tooth will always display as "01" (with an "A" for pediatric patients), and the end tooth will always display as "32" (with a "T" for pediatric patients).

This column displays the surface of the tooth on which the procedure code was performed (i.e., distal, facial, labial, buccal, incisal, lingual, mesial, occlusal, or proximal)



This column displays the determination made when the claim was processed by Select Health.

**QUESTIONS? CONTACT MEMBER SERVICES AT 800-538-5038.** 

