

The Principal Plan Dental Network
Provider Operations Guide



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Welcome to the Principal Plan Dental Network

Principal Life Insurance Company welcomes you to the Principal Plan[®] Dental Network. We are excited to work with you and your practice, and look forward to helping you serve our members covered by dental insurance from Principal Life. It takes quality providers like you to keep our network strong and our members covered.

This guide will help you in your day-to-day operations as a participating provider in our network.

Please contact us with questions:

Principal Plan Dental Network

Attn: Provider Relations

711 High Street

Des Moines, IA 50392-2556

800-832-4450

Hours: 7 a.m. to 7 p.m. CST

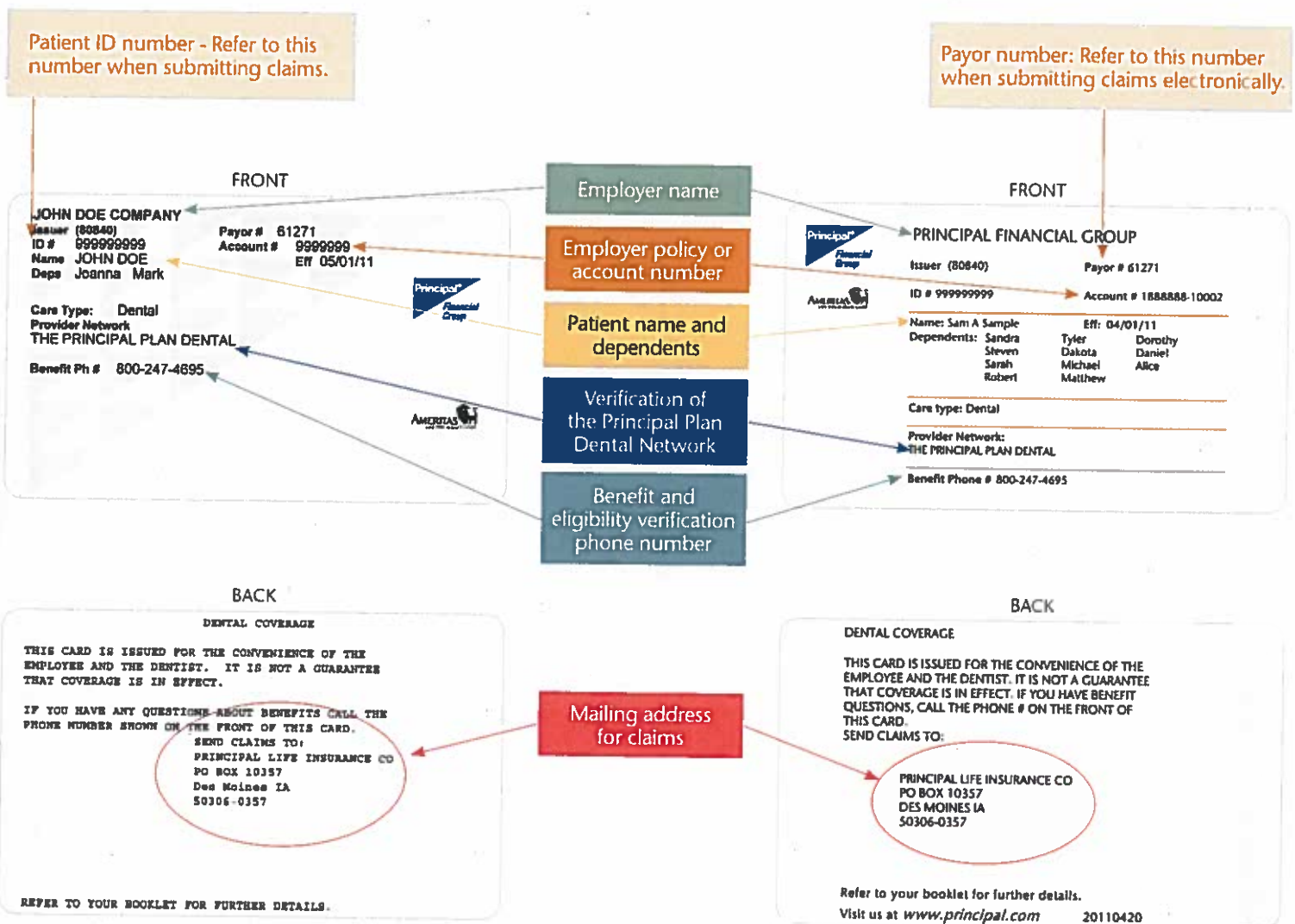
www.principal.com

Dental ID Card

When our insured members visit your office, please review their Principal Life dental ID card. As shown on the sample card below, you will find the employer's name and account number, patient and dependent names, verification of the network, a benefit verification phone number and an address to submit claims.

Insured members can also provide a copy of their dental ID card via the Principal Mobile[®] application. The app is free and can be downloaded to Apple[®] iPhones/iPads or Android[™] phones or tablets.

Depending on coverage, you could see either of these cards:



Overview of Claim Procedures

Claim submission

Your office is responsible for submitting all claim forms. Please bill your normal charge.

Claims may be submitted using the following:

- Electronic claim submission
- ADA standard claim form

Claim forms must contain the following information (items in bold can be found on the patient's ID card):

- **Patient Name**
- Patient Date of Birth
- Employee Name and Address
- Employee ID Number
- Employer Name and Policy or Account Number
- Date of Service
- Procedure(s) using current ADA Codes
- Billed charge
- Clinical Diagnosis and X-rays (if applicable)
- Other Insurance

If mailing the claim form, send it to the address found on the back of the ID card.

Electronic claims submission

Principal Life has been receiving claims via Electronic Data Interchange (EDI) since 1982. EDI is an efficient, cost-effective way of filing claims. If you have the capability to file claims electronically or are interested in doing so with Principal Life, we have clearinghouses available for receiving claims electronically.

Call or visit them online:

- Emdeon: www.emdeon.com or 877-363-3666
- Capario: www.capario.com or 800-586-6870
- Tesia: www.tesia.com or 800-724-7240 x4, or Renaissance Systems Services LLC: www.RSS-LLC.com or 866-712-9584

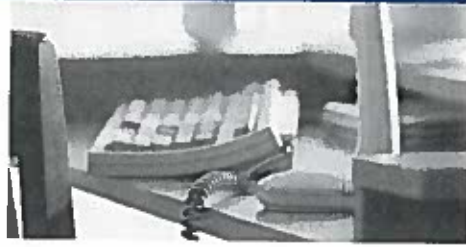
The Principal Financial Group payer number is 61271.

Electronic claim attachment

Principal Life utilizes the services of National Electronic Attachment, Inc. (NEA) and Tesia Clearinghouse, an RHSC Company (Renaissance System and Service, LLC), for electronically submitted attachments for claim processing purposes.

NEA's *FastAttach™* system allows dental providers to submit claim attachments to NEA's secure website, including:

- X-rays
- Perio charts
- Intra-oral pictures
- Narratives



Principal Life can then access them online for our claims adjudication process.

To learn more about NEA's dental services, visit www.nea-fast.com.

Tesia Clearinghouse, an RHSC Company (Renaissance System and Service, LLC), offers the electronic submission of attachments with dental claims. The secure eAttachment service offered through Tesia allows providers to efficiently transmit X-rays and any documentation required by payers to determine the benefit on a dental claim.

To learn more about these services, please contact Tesia at 800-795-7320 or www.tesia.com or Renaissance Systems Services, LLC at 866-712-9584 or sales@rss-llc.com.

Predetermination

Before treatment begins for services such as inlays, onlays, single crowns, prosthetics, periodontics and oral surgery, you may file a dental treatment plan with Principal Life. Principal Life will provide a written response indicating benefits that may be payable for the proposed treatment. We strive to respond to predetermination requests within 30 days. Predeterminations can be submitted electronically.

The dental treatment plan can be submitted electronically or sent to the claim center listed on the patient's dental ID card. The plan should contain:

- Procedure(s) using current ADA codes
- Dental necessity
- Billed charge
- Supporting X-rays/information

Supporting information for claims and predetermination

For your convenience, a tear-out reference of Supporting Claim Guidelines is located on the inside of the back cover.

Electronic funds transfer – direct deposit

You can receive claims payments faster, reduce accounting expenses and improve cash flow with electronic fund transfer and electronic remittance advice services provided by PaySpan Health.

For more information, contact PaySpan client support center toll-free at 877-331-7154 or visit www.payspanhealth.com to register.

Billing and Provider Payment

Claim payment and billing

Payment for claims from Principal Life includes an explanation of benefits (EOB). The EOB indicates any adjustments to charges you will need to make to your records. It will also indicate the amount due from the patient, if any. Examples of amounts due by the patient would be coinsurance or deductibles. See a sample EOB below.

Charges greater than the contracted payment cannot be balance billed to the patient. Patients can be billed only for coinsurance or deductibles under their insurance or for non-covered services. Orthodontia: Maximum allowances for orthodontic procedures will be based on a 15% discount off billed charges. Charges should reflect the total case fee including diagnostic work-up/records, banding and/or appliances, active treatment as needed, debanding, retention appliances (first set), and follow-up retention visits.

PRINCIPAL LIFE INSURANCE CO
PO BOX 10267
DES MOINES, IA 50308-0267
PHONE: 800 323 3333
PLEASE CONTACT: 800 123 XXXX (SPANISH)

**EXPLANATION OF BENEFITS
FOR MEMBER**

MAIL TO
JOHN DOE
1212 VILLA DRIVE
DES MOINES IA 50309

EMPLOYEE: JOHN DOE
PATIENT NAME: SELF
EMPLOYER: DOE MANUFACTURING, INC
CLAIM NO: P12345 123456789 012
PHD TO: THE DENTAL OFFICE
DES MOINES IA 50309

On 6-01-11, we processed \$106.00 in charges. Of the \$106.00, we paid \$83.00 for your benefit amount. Please read below to see how we applied your DENTAL benefits. We will mail the provider payment on 6-08-11.

Service Provider	Description of Service	Date of Service (From - Through)	Provider Charge	Charge Allowed	Net Covered	Pending	Deductible	Co-pay	Coinsurance	Benefit
A D011	CLEANING	030111 - 030111	67 00	66 00	12 00					66 00
A D011	DENTAL EXAM	030111 - 030111	39 00	28 00	11 00					28 00
Totals:			106 00	83 00	23 00					83 00

SUMMARY OF ADJUSTMENTS > > >

ADJUSTMENT TOTAL: 0.00

Total Paid: 83.00

Remarks

00-01 BASED ON THE RECIPROCAL AGREEMENT BETWEEN YOUR PPO AND THE PRINCIPAL PLAN DENTAL WEVE REDUCED THE CHARGE BY \$23.00. THE PPO PROVIDER CANT BILL THE PATIENT THE DIFFERENCE BETWEEN THE BILLED COVERED CHARGE AND THE CONTRACTED PPO AMOUNT. THE PATIENT IS RESPONSIBLE FOR \$ 0.00.

00-02 MEMBER PLEASE ANSWER: DO YOU OR ANY FAMILY MEMBERS HAVE OTHER INSURANCE? IF SO, WE NEED OTHER PLAN'S INSURED'S NAME, PLAN NUMBER, INSURANCE COMPANY'S NAME/ADDRESS/PHONE NUMBER, NAMES OF FAMILY MEMBERS COVERED BY OTHER PLAN, AND SPOUSE'S BIRTHDATE. PLEASE CONTACT US SO WE MAY UPDATE YOUR RECORDS.

00-03 CURRENT DENTAL TERMINOLOGY (C) AMERICAN DENTAL ASSOCIATION

00-04 LOG ON TO OUR HEALTH AND WELLNESS CENTER AT WWW.PRINCIPAL.COM FOR USEFUL INFORMATION AND VALUABLE TOOLS TO HELP YOU GET HEALTHY AND STAY HEALTHY.

When a deductible, co-pay, out of pocket, or coinsurance maximum has been applied, an explanation regarding the deductible, co-pay, out of pocket, or coinsurance maximum is found in the summary of benefits section of your plan booklet.

HELP STOP INSURANCE FRAUD! CALL 1-800-642-3788. See additional information on back page.

REMAINING OUT-OF-POCKET EXPENSE

INDIVIDUAL FAMILY

REMAINING DEDUCTIBLE

INDIVIDUAL FAMILY

LET YOUR BENEFITS WORK FOR YOU

PAID OBTAINING

RETAIN THIS COPY FOR TAX PURPOSES. IT CANNOT BE RE-PRINTED.

Visit us at www.principal.com

008-000013-804

TIN: 123456789

09002

Claim payment status or questions

You can view claim status and reimbursements at www.principal.com. Or you can call the benefit verification toll-free phone number at 800-247-4695.

Member questions

If a patient has a benefit-related question, please refer them to their personal login at www.principal.com or the benefit verification toll-free phone number at 800-247-4695.

Coordination of Benefits (COB)

A coordination of benefits is used to determine if the Principal Life dental policy is primary or secondary.

- If the Principal Life dental coverage is primary, we will pay the full amount of benefits available under the policy.
- If Principal Life dental coverage is secondary, benefits will be determined by the primary plan. The benefit amount payable by the Principal Life dental policy may be reduced.

Notification of office changes

Principal Life's Provider Relations team is available to assist you with:

- New associates
- Tax ID Number changes
- Address changes
- Requests for fee schedules

Timely notification of office changes helps ensure accurate and efficient claim handling. Call 800-832-4450 to reach a member of the team.

Utilization Review

Utilization review is a required part of the provider recredentialing process. A statistically based utilization system is used to profile dentists' treatment patterns. Dentists whose practice patterns fall outside the guidelines or who fail to comply may not be allowed to continue participation in the Principal Plan Dental PPO. Principal Life recognizes that the design and implementation of a utilization review system is necessary for the cost-effective delivery of quality dental care and the financial integrity of the insurers' dental benefits. A dentist must agree to the utilization review and to undertake cost-effective dental care consistent with accepted dental practices.

The credentialing and recredentialing process has established utilization norms for certain procedure codes against which the provider's practice profile will be measured. If the profile meets the guidelines, the provider will be allowed to continue participation in the Principal Plan Dental PPO. If the profile does not meet the guidelines, the provider may be counseled regarding changes, which would allow him/her to be reconsidered.

Benefit eligibility and verification online or by phone

Patient benefits may vary, so please confirm each patient's eligibility for coverage and specific benefits. You can use the Principal Provider Service Center on www.principal.com or call the benefit verification toll-free phone number at 800-247-4695.

Online

You can view online insurance information for patients covered by group dental insurance from Principal Life. The Principal Provider Service Center gives you and your staff convenient access to:

Benefits, Eligibility and Effective Dates – Check patient eligibility and coverage, including copays, deductibles, benefit maximums, tooth history, network membership and benefits in effect on a given date.

Claim Status – View information about claims in process and claims processed/paid, including submitted charge amounts, check issue dates and payment amounts.

How to sign up

Follow these steps to register for the Principal Provider Service Center. For registration assistance, call 800-621-6280.

1. Go to www.principal.com and select Provider Services from the Log In box.
2. Click Register Now.
3. Enter your federal Tax Identification Number.
4. The Register Here page continues with fields to enter Primary Security Administrator (PSA) information. This is the person responsible for managing your account and granting access to other staff members – usually the office or billing manager.
5. After you register, a username and temporary password will be provided.
6. Log in using your temporary password. You will be asked to establish a new password.
7. After the registration process is complete, your Benefit and Claim information is available. The PSA can then grant access to secondary administrators – the office staff members responsible for checking patients' benefits and claim status.

Save time by accessing benefits by fax or email

More detailed dental patient benefit information is available by request from Principal Life. Now you can receive in-depth information by fax or email.

The Benefits & Eligibility fax or email contains a breakdown of dental benefits, including:

- Units of coverage
- Detailed history
- Waiting periods
- Age limits
- Frequencies
- Common limitations

Log in to Provider Services on www.principal.com and visit the Benefits & Eligibility tab for detailed information about what is included in the fax or email. Or call 800-247-4695, select provider of service and follow the automated prompts.

Need a copy of an Explanation of Benefits (EOB)?

Online

Log in to Provider Services on www.principal.com.

Phone

Call 800-247-4695. You will be taken into our automated voice response system. Self-serve options include:

- Request fax or email (after initial set up)
- Claims information
- Coverage effective date
- Mailing address
- Payor number
- Speak to a member service representative

Principal Dental Access Network

The Principal Dental Access Network^{SM*} gives you another way to attract new and retain existing patients lacking dental coverage. This program is not insurance, so there are no waiting periods, deductibles, claim forms, annual maximums, exclusions or limitations, except for work in progress.

Eligible members pay you directly based on your current fee schedule. An eligible member's ID card has a Principal Dental Access Network logo like this example:



This is a great opportunity to grow and maintain your customer base. However, if you want to opt out of the Principal Dental Access program, send an email to principaldan@principal.com within 30 days of receiving your welcome kit. Opting out of this network will not affect your participation in other networks.

*The Principal Dental Access Network is NOT insurance. It is not available in California and Arizona. Nevada providers access this program through Diversified Dental Services. California and Arizona providers access this program through the First Dental Health ACCESS Network.

Discounted Products and Services

As a valued participating dental office who serves our members, you have access to discounts on products and services through our website – saving you time and money!

401(k)



Get an edge on retirement planning. Plan your own financial future while giving your employees something to smile about – the opportunity to plan for their future at the same time. The Principal Financial Group[®] is offering significant savings when you set up a 401(k) retirement plan for yourself and for your staff members.

When you establish a 401(k) retirement plan with The Principal[®], we will waive the application fee, a savings of up to \$1,000. To learn more, visit www.principal.com/dentist401k.

Claim payment by electronic funds transfer



Sign up now to receive electronic funds transfers (EFTs) and electronic remittance advices (ERAs) through nationally known payment and remittance administrator PaySpan Health. Signing up allows you to receive your claim payments through EFT and claim details through ERA. Taking advantage of these options will help you receive claim payments faster, reduce accounting expenses and improve cash flow.

There is no fee for this service. It's easy for you to get started right away and register with PaySpan Health. Setting aside five to 10 minutes now can make a huge difference in how quickly you receive your payments.

To register today, call PaySpan Health toll-free at 877-331-7154 and talk to a PaySpan representative.

Training for dental office staff



DrBicuspid.com

DrBicuspid.com is a free website designed specifically for dental professionals and team members. Principal Life is working with DrBicuspid.com to provide participating dental offices with free mandated OSHA training for the entire staff.

This training fulfills the annual Bloodborne Pathogen Standard education requirement. This course, valued at up to \$500, is offered free to Principal Life participating dentists.

Participating dental offices will also receive a 20% discount on any other course in the online continuing education (CE) library.

The promotion code for the free course package "OSHA Dental Compliance Training" (which includes "The Introduction to Bloodborne Pathogens") is 853. The promotion code for 20% off all other courses is 854.

To sign up for CE courses, register at DrBicuspid.com.

To learn more, visit www.principal.com/providerdiscounts

FastAttach and FastLook



Principal Life and National Electronic Attachment, Inc. (NEA), have worked together for several years to offer the *FastAttach*™ system. *FastAttach* expedites the transmission and review of important documentation, including X-rays, EOBs and perio charts, in support of electronic claims processing.

But *FastAttach* is more than just an electronic attachment transmission service. It is a way to manage your attachments. Instead of spending time sending unnecessary attachments, you can use a unique feature of *FastAttach* called *FastLook*™. This feature provides you with the attachment requirements for all procedure codes for each payor.

The attachments transmitted using *FastAttach* will automatically create a tracking number, which provides confirmation of receipt and a tracking mechanism for those attachments. All transmitted attachments can be viewed online in the patient attachment history via any computer with Internet access. You can even securely share attachments with other dental offices within HIPAA regulations.

NEA provides *FastAttach* and *FastLook* training and unlimited customer service at no additional charge.

To learn more about NEA's dental services, go to www.nea-fast.com. From there, you can:

- Browse the NEA website for additional information
- View videos by clicking Learn More
- Register online by clicking Provider Registration

If you prefer to talk to an NEA representative, call 800-782-5150, option 2.

Biological testing kits



Monitoring your instrument sterilization equipment can provide peace of mind in your ability to protect against infection. Receive discounts on biological (spore) testing kits and other products from North Bay/Bioscience, LLC, a leader in providing sterilizer monitoring services to healthcare professionals.

To obtain your Principal Life participating dentist discount, please contact North Bay/Bioscience, LLC, at 800-289-7786 and mention that you are a Principal Plan Dental participating dentist. To order online, visit www.nbbs.com and enter code PRINCIPAL at checkout to receive your savings.

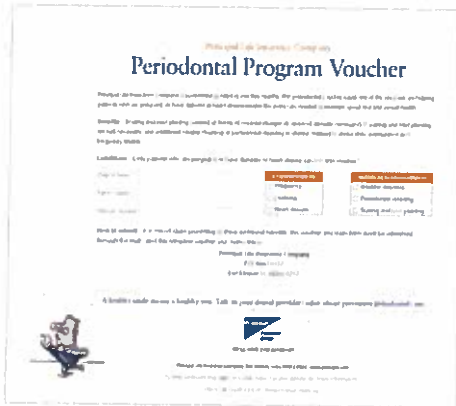
To learn more, visit www.principal.com/providerdiscounts

Insurance products and plan administrative services are provided by Principal Life Insurance Company. Securities are offered through Principal Securities, Inc., 800-547-7754, member SIPC and/or independent broker dealers. Securities sold by a Principal Securities Registered Representative are offered through Principal Securities. Principal Life and Principal Securities are members of the Principal Financial Group, Des Moines, IA 50392.

Before investing in mutual funds, investors should carefully consider the investment objectives, risks, charges and expenses of the funds. This and other information is contained in the free prospectus, which can be obtained from your local representative. Please read the prospectus carefully before investing.

Principal Life has arranged to make these discounts, products and services available to Principal Plan Dental Network providers. These arrangements do not constitute an endorsement of any vendor, product or service offered. Availability of these offers is subject to change without notice. Principal Life and its affiliates are not liable for product defects, provider negligence or other errors in the delivery of products or services. Access to the discounts included in the Provider Discounts website does not constitute an endorsement of any vendor, product or service offered. All vendors are independent entities and are not employees, agents or participating providers of Principal Life Insurance Company.

Special Programs

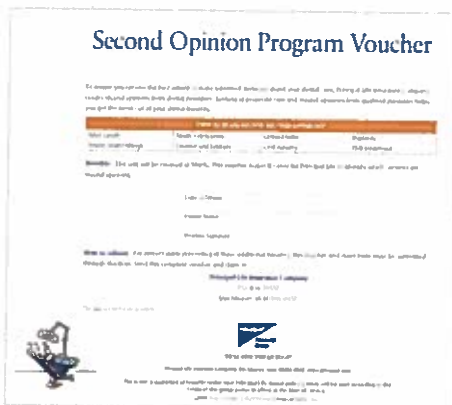


Periodontal Program – Principal Life’s periodontal program helps members who are pregnant, or have diabetes or heart disease receive extra dental care.

Benefits: Scaling and root planing covered at 100% of covered charges (if deemed dentally necessary). If scaling and root planing are not necessary, one additional routine cleaning or periodontal cleaning is offered (subject to deductible, coinsurance and frequency limits).

Cancer Treatment Oral Health Program – This program helps Principal Life members undergoing chemotherapy and/or head/neck radiation receive extra dental care.

Benefits: Up to three fluoride treatments every calendar year at 100% of covered charges and one additional routine cleaning per calendar year. Fluoride treatments must be administered at the time of a scheduled cleaning.



Second Opinion Program – To ensure members receive the best advice to make informed decisions about dental care, Principal Life covers second opinions from dental providers.

Benefits: The second opinion visit will be covered at 100%.

To obtain a program voucher, visit www.principal.com/providerdiscounts

Principal Life Insurance Company

Supporting Claim / Pre-Determination Guidelines

Use these general guidelines for frequently submitted procedures that require supporting claim information and/or documentation to process the claim. Additional documentation may be required on a case-by-case basis.

Dental Procedure Code(s)	Current Pre-op X-Ray or Photo	Additional Supporting Material
RESTORATIONS		
D2140-D2161, D2391-D2394 (multiple posterior teeth)	BW x-ray(s)	Clinical diagnosis for each tooth
D2330-D2335, D2390 (multiple anterior teeth)	PA x-ray(s)	Clinical diagnosis for each tooth
ONLAYS/CROWNS		
D2542-D2544, D2642-D2644, D2662-D2664, D2710-D2794	PA or BW x-ray(s)	If replacement: Date of prior placement and clinical narrative
CROWN BUILD-UPS		
D2950	PA or BW x-ray(s)	If replacement: Date of prior placement and clinical narrative
ENDODONTICS		
D3331-D3333	PA x-ray(s)	Narrative
PERIODONTICS		
D4210-D4212, D4240-D4264	PA or BW x-ray(s)	Perio charting and past perio history
D4270, D4273, D4275-D4278	Photo	A chart or narrative containing the following Mucogingival Data <ul style="list-style-type: none"> • Tooth # _____ • MM Recession _____ • MM Attached Gingiva _____
D4274	PA or BW x-rays(s)	Perio charting
D4341, D4342	FMX or Pano	Perio charting
D4910		List past perio treatments and treatment dates
COMPLETE AND PARTIAL DENTURES		
D5110-D5281		
If initial placement:		Extraction date of teeth to be replaced
If replacement:		Date of most recent placement and clinical narrative
IMPLANTS		
D6010, D6013-D6050	FMX or Pano	<ul style="list-style-type: none"> • Extraction date of teeth to be replaced • List of missing teeth • If replacement: Date of prior prosthetic and clinical narrative
D6058-D6077, D6094, D6110-D6117, D6194	FMX or Pano	<ul style="list-style-type: none"> • Extraction date of teeth to be replaced • List of missing teeth • If replacement: Date of prior prosthetic and clinical narrative
D6101-D6104	PA or BW x-ray(s)	Perio charting
BRIDGES		
D6205-D6252, D6545-D6794	FMX or Pano	<ul style="list-style-type: none"> • Extraction date of teeth to be replaced • List of missing teeth • If replacement: Date of prior prosthetic and clinical narrative
ORAL SURGERY		
D7210-D7240, D7250	PA and/or Pano	
D7241	PA and/or Pano	Narrative
D7285, D7286, D7288, D7410-D7415, D7440-D7461		<ul style="list-style-type: none"> • Pathology report • Location of lesion
D7310-D7321	PA and/or Pano	
MISCELLANEOUS		
D9940		Diagnosis of condition



WE'LL GIVE YOU AN EDGE®

Principal Life Insurance Company, Des Moines, Iowa 50392-0002, www.principal.com

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This list is not all inclusive. There may be other dental procedures not listed that also require supporting documentation.

Dentists are requested to submit x-rays used for diagnosis and treatment planning when submitting claims for certain services. The x-rays should be of diagnostic quality, mounted and identified with the dentist's name and address, as well as the patient's name. Also include the date the x-rays were taken. If a copy of the x-rays is submitted, left or right should be indicated on the copy.



WE'LL GIVE YOU AN EDGE®

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