Say Cheese Dental Network Quick Reference Guide

Effective: Jan. 1, 2025

Dental Hub

dentalhub.com/webinars

The Dental Hub may be used to check eligibility, submit claims, and to access useful information regarding plan coverage.

To register for the Hub, you will need information on a prior paid claim or a Registration code. To receive your Registration code and for other Dental Hub assistance, call Provider Services.

Provider services

Phone: **1-844-368-6878**

- Dedicated Services Representatives 7 a.m. to 10 p.m.
- Interactive Voice Response System 24/7

Member eligibility, benefits, claims, authorizations, network participation and contract questions

Pretreatment estimates

Pretreatment Estimates (PTE)
Say Cheese Dental Network
P.O. Box 2053
Milwakee, WI 53201

Provider Online Academy

Visit **UHCdental.com/provideracademy** to utilize the 24/7 on demand provider training and educational support videos.

Dental claim submissions

Say Cheese Dental Network
P.O. Box 2176
Milwaukee, WI 53201

EDI Payer ID: GP133

Claim disputes or adjustments

Say Cheese Dental Network
Provider Disputes
P.O. Box 361
Milwaukee, WI 53201

Corrected claims

Say Cheese Dental Network
Adjustments/Resubmissions
P.O. Box 481
Milwaukee, WI 53201

Claims may be submitted electronically through your clearinghouse, within the provider portal or to the mailing addresses here.

Important notes

This guide is intended to be used as a quick reference and may not contain all of the necessary information. It is subject to change without notice. For a copy of the National Provider Manual, please sign into **UHCdental.com** and select *Manuals/Other Supporting Documents* under *Quick Links.*

Sample Network Health Member ID cards

Dental benefit details are listed on the back of the Network Health Medicare Advantage medical member ID card.

network health
networkhealth.com

2025 Network Health Plan Name
PPO

Member			*Network*
<JOHN Q PUBLIC>	**Copays**	*In*	*Out*
Member ID	PCP	$ <0>	$ <0>
	Specialist	$ <0>	$ <0>

<123456789> PC 00

Rx BIN: **003858**   RxPCN: **MD**
RxGrp: **NHPA**

Health Plan **(80840)**
Group **2001899**

H5215_010

*Medicare*R*x*
Prescription Drug Coverage

MEMBER EXPERIENCE: 800-378-5234 (TTY 800-947-3529)
Pharmacy Team: 800-316-3107 (TTY 800-899-2114)
MDLIVE®: 877-958-5455 (TTY 800-770-5531)

FOR PROVIDERS ONLY: 855-580-9935
Network Health MA Plans, P.O. Box 568, Menasha, WI 54952
Payer ID: 77076
Pharmacist Help Desk: 800-922-1557
Prior Authorization: networkhealth.com/provider-resources/
                 authorization-information or 866-709-0019
EyeMed® Vision: 833-279-4359
Say Cheese Dental Network:
Member: 888-454-4127 (TTY 711)   Provider: 844-368-6878
PO Box 2176, Milwaukee, WI 53201   PayerID: GP133
Medicare limiting charges apply.

Administered by Dental Benefit Providers

Sample Dental Rider Card

Only members who choose a buy up plan, called a "Dental Rider", will have a separate Say Cheese Dental Network card.

Say Cheese Dental Network

Say Cheese Dental Network

Member:
<FIRST MI LAST>

Member ID:

<700133921>

	Network
Copays	*In* *Out*
	0%-50% 20%-50%

Health Plan: (80840)
Group: Rider
NH1

Administered by Dental Benefit Providers

MEMBER EXPERIENCE: 888-454-4127

(TTY 711)

www.saycheesedentalnetwork.com

Provider should verify eligibility before providing treatment. To verify benefits, view claims or find a provider, visit the website or call.

FOR PROVIDERS ONLY: 844-368-6878
Dental Claims:
Say Cheese Dental Network P.O.   www.dentalhub.com
Box 2176 Milwaukee, WI 53201   Payer ID: GP133

Dental Benefit Providers® | **Say Cheese Dental Network**