



Renaissance Life & Health Insurance Company of America ("RLHICA") will consider any claim complete if the following conditions are met:

- Paper claims must be legible and on a current ADA claim form.
- Electronic claims must be in a HIPAA compliant format.
- The subscriber/patient information must be accurate and match RLHICA's records for the subscriber/patient.
- Treatment must be billed using the appropriate CDT code.
- There must be a date of service for each procedure.
- The providers' charge for each procedure must be noted on the claim.
- The treating dentist and complete address of the treatment location must be indicated on the claim and match the information that RLHICA has in its records.
- The provider's TIN and individual NPI must match the information that RLHICA has in its records.
- If Coordination of Benefits is required, the appropriate documentation from the other carrier must be included.
- If x-rays are submitted, they must be less than 2 years old and of diagnostic quality showing the entire treatment site. They must be mounted, labeled with the patient's name, the date they were taken and if applicable, right or left must be indicated.
- Any treatment notes, narrative or charting submitted with a claim must be legible and contain no abbreviations.
- The payer has no reason to believe that the claim was submitted fraudulently or there is no material misrepresentation.

If the above conditions are not met, a claim may be not considered to be a complete claim and is therefore not subject to applicable statutory/regulatory prompt pay provisions.