

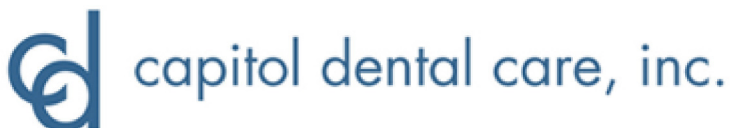
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Welcome to Capitol Dental's E-Newsletter!!



ADA Dental Claim Form

Effective, January 1st 2014. DMAP will no longer accept the 2006 ADA dental claim form. If you haven't already converted to the new form you can find it at: <http://www.ada.org/7119.aspx>. Follow the link and instructions to print or download the PDF.

PhTech has worked out many of claims processing changes. Please, remember to submit paper claims and address the claim to both Capitol Dental and the member's CCO. See example below and the appropriate PO Boxes for the respective CCOs to the right:

WVCH-Capitol Dental

PO Box 5308

Salem OR 97304

If you need assistance please call member services at 503-585-5205

We appreciate your consideration as we adapt to the changes being made.

CCO PO BOX's

Family Care
PO Box 5930
Salem OR 97304

IHN
PO Box 5308
Salem OR 97304

Primary Health
PO Box 5308
Salem OR 97304

WVCH
PO Box 5308
Salem OR 97304

HealthShare
PO Box 5308
Salem, OR 97302

Jackson Care Connect
PO Box 5308
Salem, OR 97302

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Contact us! 1-800-525-6800

Referrals x 206, Hospital Referrals x 301, Pediatric Referrals x 329, Member Service Office Manager x 315, Provider Relations x 303
Interpreter Requests: barraging@interdent.com or fax to: 877.352.2923

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