

SUPPLEMENT TO ATTACHMENT 3.1-A

10 Dental Services

Dental services for adults age 21 and over are limited to the following categories of service and all services require prior authorization:

- a. Routine diagnostic and preventive services—
 - (1) Prophylaxis—twice per state fiscal year;
 - (2) Examinations—twice per state fiscal year; and
 - (3) Radiographs—
 - i. Bitewings—twice per state fiscal year,
 - ii. Full mouth or panoramic films approved only in medical necessity and only once in a five-year period.
- b. Routine restorative services—
 - (1) Restoration of decayed or fractured teeth with amalgam fillings or composite fillings—one time in 12 months for composites or amalgams;
 - (2) Stainless steel and temporary crowns,
 - (3) Emergency treatment by report,
 - (4) Oral surgery; and
 - (5) General anesthesia or sedation.
- c. Endodontic services—
 - (1) Root canal therapy—only anterior teeth, and
 - (2) Re-treatments—only anterior teeth.
- d. Periodontal services including root planing and scaling and maintenance therapy
- e. Major services, which are beyond routine and restorative—
 - (1) Build-ups, posts, and cores (posts and cores are a benefit in only the same teeth qualifying for root canal therapy);
 - (2) Recementation of cast restorations—once per lifetime of recipient, and
 - (3) Permanent crowns—placement on anterior teeth only

Dental services for adults 21 years of age and older, except for services for the immediate relief of severe pain, alleviation of acute infection, or necessary because of trauma, are limited to a total of \$1,000 per adult Medicaid recipient per State fiscal year

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 SUPERSEDES
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