



# Dental Services Coverage Changes Effective 08/01/2017

## Medical Justification Changes - General Anesthesia and IV Sedation

Effective for dates of service on or after August 1, 2017, all dental claims for general anesthesia and IV sedation require medical justification for children and adults. Claims for these services on or after 08/01/2017 will be denied if medical justification is not submitted with the claim.

## Coverage Limit Changes

Alaska Medicaid has adjusted the coverage of the following dental services for both children and adults (unless otherwise noted) effective 08/01/2017:

Service	Code	Annual Limit Per State Fiscal Year <i>July 1 – June 30</i>	Limit Applies to:
Periodic oral evaluation <sup>1</sup>	D0120	One (1)	Adults
Comprehensive oral evaluation <sup>1</sup>	D0150	One (1)	Adults
Prophylaxis – adult	D1110	Two (2)	Adults
Topical fluoride varnish <sup>2</sup>	D1206	Four (4)	Adults
Topical application of fluoride, non-varnish <sup>2</sup>	D1208	Four (4)	Adults
Tobacco counseling <sup>3</sup>	D1320	<b><i>Not Covered Effective 8/1/17</i></b>	Adults and Children

Service	Code	Annual Limit Per Calendar Year	Limit Applies to:
Topical fluoride varnish <sup>2</sup>	D1206	Four (4)	Children
Topical application of fluoride, non-varnish <sup>2</sup>	D1208	Four (4)	Children

Providers are reminded to review the fee schedule prior to rendering services as codes have been added, removed, or re-categorized from Emergent to Enhanced Adult Dental services. The fee schedule for dental services provided on and after July 1, 2017 is available at

<http://manuals.medicaidalaska.com/medicaidalaska/providers/FeeSchedule.asp>.

<sup>1</sup> Limited to one (1) periodic or comprehensive oral evaluation per fiscal year.

<sup>2</sup> Any combination of topical fluoride applications, varnish or non-varnish, may not exceed four (4) applications per year.

<sup>3</sup> When appropriate, providers should include in the oral evaluation a referral to the Alaska Quit Line, 888.842.7848.