

### NC Department of Health & Human Services Division of Health Benefits

### **NC Medicaid Dental Services**

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## **NC Medicaid**

Serves approximately one out of every five North Carolinians

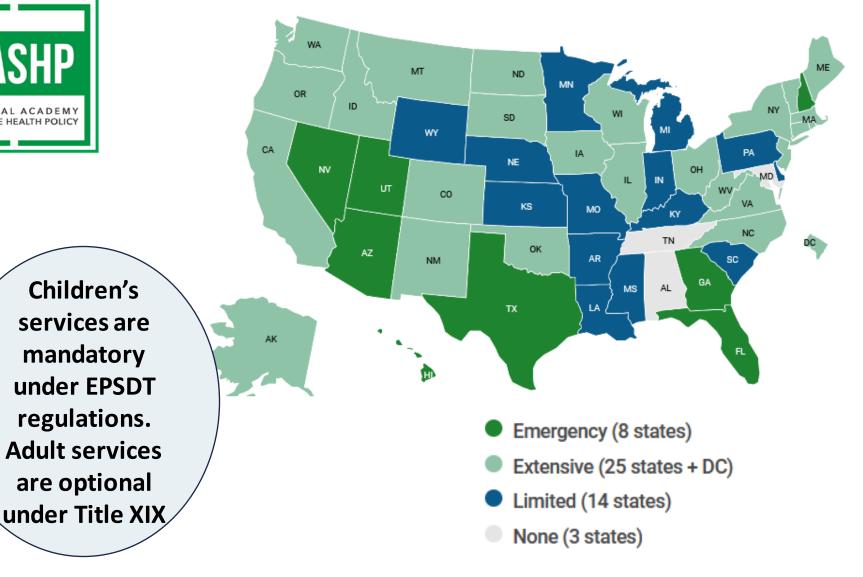
Approx. 2.2 million enrolled – medically indigent children, pregnant women, aged, blind and/or disabled individuals

With Medicaid expansion, we expect enrollment to increase by ~600,000 beneficiaries to approximately 3 million beneficiaries



### **Adult Dental Coverage**





https://www.nashp.org/state-medicaid-coverage-of-dental-services-for-general-adult-and-pregnant-populations/ updated 10/2022

## Adults—Who's Eligible?

# Aged, Blind and Disabled

### Long term care

Medicaid for Pregnant Women

Dual Eligible— Medicare and Medicaid

Low Income with Dependent Children

## **NC Medicaid Expansion**

https://medicaid.ncdhhs.gov/north-carolina-expandsmedicaid

Single adult income less than Effective December 1, \$1676 per 2023 month / \$20,120 per year New Eligibility Program Code = Family of two income less than MXPNN (Adult \$2267 per Medicaid month / \$27,214 Expansion – Categorically per year Needy)

### **Covered Adult Dental Services**

**Diagnostic & Preventive**: evaluation, radiographs, and prophylaxis

Restorative: amalgam and composite

**Endodontics**: anterior root canal therapy

**Periodontics**: Full mouth debridement and scaling & root planing per quadrant

**Prosthodontics**: dentures, partial dentures, and relines

**Oral Surgery**: extractions, alveoloplasty, removal of cysts and tumors, etc.

Anesthesia: general, intravenous conscious sedation, and nitrous oxide

## **Medicaid for Pregnant Women**

### **BABY LOVE PROGRAM**

- American Rescue Plan Act of 2021 gave states the option to extend coverage one year post-delivery.
- NC General Assembly approved extended coverage in Session Law
- Effective April 1, 2022
- Eligibility 196% of Poverty Level for those who do not qualify for full benefits

### **Presumptive Eligibility for Pregnancy**

### **1E-5 Obstetrics Policy (Section 2.1.4)**

- "Section 1920 (b) of the Social Security Act allows for a pregnant woman who is determined by a qualified provider to be presumptively eligible for Medicaid to receive ambulatory antepartum care, including pharmacy, laboratory, and diagnostic tests, while her eligibility status is being determined"
- Dental services are <u>not</u> covered during the Presumptive Eligibility period

https://files.nc.gov/ncdma/documents/files/1E-5.pdf

### **Services Covered for Children**



**Diagnostic**: evaluation and radiographs

**Preventive**: prophylaxis, fluoride, sealants, and space maintainers

**Restorative**: amalgam, composite, and stainless steel crowns

**Endodontics**: pulpotomy and root canal therapy

**Oral surgery**: extractions and exposure of an unerupted tooth

**Orthodontics:** comprehensive services

**Anesthesia**: general, intravenous conscious sedation, and nitrous oxide

### Medicaid Orthodontic Criteria

- Functionally impairing malocclusion
- Severe skeletal condition
- Severe Class II or Class III dental malocclusion

- Multiple teeth in crossbite with a functional shift
- Overbite must be deep, complete, and traumatic
- Excessive overjet of 6 mm or greater

- Severe crowding greater than 6 mm
- Excessive anterior spacing of 8 mm or greater
- Impactions with a good prognosis of being brought into occlusion

## Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Benefit

- Identify problems
- Regular check ups
- Screen for problems
- Run indicated tests
- Correct health
   issues

### **EPSDT Services must be:**

**Medical in nature** 

Coverable under §1905(a) of the Social Security Act

Recognized as an accepted method of medical practice or treatment

Safe and effective

Least costly treatment of equally effective choices

Must not be experimental or investigational

## Examples of EPSDT Services

Interceptive Orthodontic Treatment

**Oral Conscious Sedation in Office** 

**Interim Partial Denture** 

Permanent Crown

### **Clinical Coverage Policies**



### 4A - Dental Services (children & adults)

4B - Orthodontic Services (children under age 21)

1A-23 - Physician Fluoride Varnish Services (children under age 3.5)

### **4A Dental Services Policy**

NC Medicaid	Medicaid
Dental Services	<b>Clinical Coverage Policy No.: 4A</b>
	Amended Date: December 15, 2023

#### 5.3.2 Diagnostic

#### 5.3.2.1 Clinical Oral Evaluations

A provider shall bill for only one clinical oral evaluation procedure for an individual beneficiary on a given date of service.

Code	Description	PA Needed?
D0120	Periodic oral evaluation - established patient	No
	<ul> <li>* The first periodic oral evaluation must be at least six calendar months after the comprehensive oral evaluation (D0150) or at least six calendar months after an oral evaluation for a beneficiary under three years of age (D0145) for the same provider</li> <li>* Allowed once per six calendar month period for the same provider (for example, a beneficiary seen for a periodic oral evaluation exam on any date in January would be eligible for the next periodic oral evaluation on any date in July)</li> </ul>	
D0140	<ul> <li>Limited oral evaluation – problem focused</li> <li>* Use as the emergency exam for the first visit for a specific problem; follow- up evaluations for the same problem must be coded as D0170</li> <li>* Document in the beneficiary's chart the nature of the emergency and the treatment provided</li> </ul>	No

## **4B Orthodontic Services Policy**

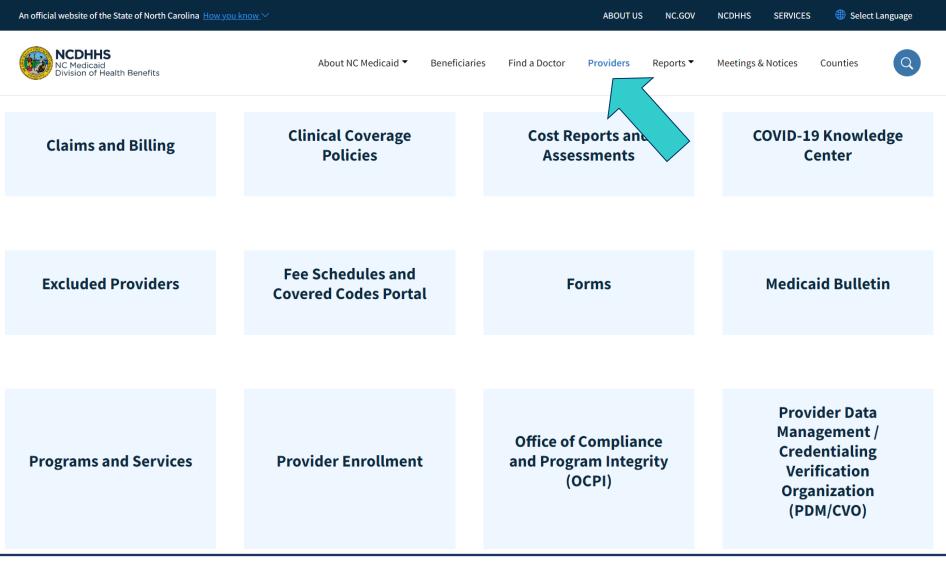
#### NC Medicaid Orthodontic Services

#### Medicaid Clinical Coverage Policy No.: 4B Amended Date: December 15, 2023

Code	Description	PA Needed?
D0150	Comprehensive oral evaluation - new or established patient	No
	* Use as the initial exam for a beneficiary	
	<ul> <li>* Allowed as an initial exam once per billing provider per beneficiary</li> </ul>	
D0330	Panoramic radiographic image	Yes
	<ul> <li>Limited to beneficiaries age six and older</li> </ul>	
	<ul> <li>* Allowed as part of the orthodontic records if the previous panoramic</li> </ul>	
	radiographic image is more than one year old	
	<ul> <li>* Once in a lifetime service as part of the orthodontic records</li> </ul>	
	* Not allowed on the same date of service as D0210	
D0340	2D cephalometric radiographic image - acquisition, measurement and analysis	Yes
	* Limited to beneficiaries under 21 years of age	
	* Once in a lifetime service	
D0470	Diagnostic casts	Yes
	* Limited to beneficiaries under 21 years of age	
	* Once in a lifetime service	
	* Study models must be properly occluded and trimmed with markings that	
	identify the beneficiary's accurate occlusion	
	* Print the NC DHHS Prior Approval Health Services Attachment Review	
	Cover Sheet to include in the mailing package with the study models	

**Note:** Diagnostic intraoral and extraoral photographic images are required as a component of the orthodontic records submitted for orthodontic prior approval. These images are deemed a standard of care by the American Association of Orthodontics (AAO) Committee on Medically Necessary Orthodontic Care.

### NC Medicaid Website https://medicaid.ncdhhs.gov/



### **Fee Schedule**

#### NC Medicaid Dental Reimbursement Rates General Dentist, Oral Surgeon, Pediatric Dentist, Periodontist, & Orthodontist Last Revison Date: January 5, 2024

Procedure Code	Procedure Code Description	Rate	Effective Date	End Date
D0120	Periodic Oral Evaluation - Established Patient	26.96	1/1/2022	12/31/9999
D0140	Limited Oral Evaluation - Problem Focused	38.43	1/1/2022	12/31/9999
	Oral Evaluation For A Patient Under Three Years Of Age And Counseling With Primary			
D0145	Caregiver	38.01	1/1/2022	12/31/9999
D0150	Comprehensive Oral Evaluation - New Or Established Patient	46.65	1/1/2022	12/31/9999
D0160	Detailed And Extensive Oral Evaluation - Problem Focused, By Report	71.38	1/1/2022	12/31/9999
	Re-Evaluation - Limited, Problem Focused (Established Patient; Not Post-Operative			
D0170	Visit)	30.05	1/1/2022	12/31/9999
D0210	Intraoral - Complete Series Of Radiographic Images	75.08	1/1/2022	12/31/9999
D0220	Intraoral - Periapical First Radiographic Image	15.60	1/1/2022	12/31/9999
D0230	Intraoral - Periapical Each Additional Radiographic Image	12.58	1/1/2022	12/31/9999
D0240	Intraoral - Occlusal Radiographic Image	16.71	1/1/2022	12/31/9999
	Extraoral - 2D Projection Radiographic Image Created Using A Stationary Radiation			
D0250	Source, And Detector	22.51	1/1/2022	12/31/9999
D0270	Bitewing - Single Radiographic Image	11.87	1/1/2022	12/31/9999
D0272	Bitewings - Two Radiographic Images	19.35	1/1/2022	12/31/9999
D0273	Bitewings - Three Radiographic Images	26.42	1/1/2022	12/31/9999
D0274	Bitewings - Four Radiographic Images	33.55	1/1/2022	12/31/9999
D0310	Sialography	100.78	1/1/2022	12/31/9999
D0320	Temporomandibular Joint Arthrogram, Including Injection	205.47	1/1/2022	12/31/9999
D0330	Panoramic Radiographic Image	61.95	1/1/2022	12/31/9999

### **Managed Care**

- Dental services are carved out of Managed Care
- Beneficiaries continue to seek treatment with a participating dentist of their choice
- Dental providers continue to submit prior approval requests and claims for payment in NCTracks
- Dental cases treated in the Ambulatory Surgical Center or Hospital (facility claims are billed through managed care)

### **Easy search for providers**

#### **Find a Dentist**

Use the Dentist Locator to find a dentist in your community who sees children and accepts Medicaid and CHIP.

Find a Dent for Your Kie	1 <u>+</u> +
* Required	TYL
State*	✓ 😮
Benefit Plan*	✓ ?
Search by Add	ress, ZIP Coc 🔋
Search	
InsureKidsNo Powered by da	

Dental Plan (items	with * are required)	
* State:	North Carolina	• ?
* Benefit Plan:	NC Medicaid	• ?
Near:	Search by address, ZIP code, or place name	0
Within:	10 miles (?)	
Accepts new patients:	Yes   No Preference	
Additional Search	Criteria	Collapse [-]
-		
Does your child have	special health care needs? O Yes No ?	
Does your child have Preferred Language:	special health care needs? O Yes No ?	• (?)
		• •
Preferred Language:	English	
Preferred Language: Specialty:	English General Dentistry	• ?

### InsureKidsNow.gov

NC DHHS, Division of Health Benefits

### **Dental Ambulatory Surgical Centers**

NC has 4 dental specific Ambulatory Surgical Centers (ASCs)

Approved by the State Health Coordinating Council, the State's Certificate of Need (CON) regulatory body, as a CON demonstration project

First of these facilities opened in March of 2018 after receiving Medicare certification

Locations in Raleigh, Fayetteville, Greensboro, and Charlotte after Medicare certification of each facility

## Medicaid Payor of Last Resort

Beneficiaries may have a private third-party insurance in addition to Medicaid benefits.

- **Primary** Third Party Insurance
- Secondary Medicare
- Last Medicaid

### **Contact Information**

Dental Program 919-855-4280

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https://medicaid.ncdhhs.gov/providers/programs-services/dental-andorthodontic