

## PROVIDER BULLETIN

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## DENTAL

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Effective February 16, 2009, the MO HealthNet Division will implement the following changes to the Orthodontia Policy.

### **ORTHODONTIA RECORDS**

When requesting prior authorization for orthodontic services, the provider must complete and submit the [Prior Authorization Request form](#) and study models only (unless a panoramic radiograph is necessary to evaluate unerupted teeth) and a written treatment plan. Photographs and cephalometric radiographs will only be required if requested by the state orthodontic consultant after review of the study models and panoramic radiograph. No reimbursement will be paid for diagnostic photographs or cephalometric x-rays unless specifically requested by the state orthodontic consultant after review of the study models and panoramic radiograph. After the Orthodontic Provider has received authorization to begin orthodontic treatment, a full set of orthodontic records must be obtained and maintained in the participant's dental records.

### **ORTHODONTIA REQUIREMENTS**

The following requirements must be met to obtain orthodontia treatment through MO HealthNet. The participant must:

- Be under 21 years of age
- Have good oral hygiene
- Be over 13 years of age or have no deciduous teeth (unless the primary teeth are retained due to ectopic position of the underlying permanent tooth or a missing permanent tooth in this area, or has cleft palate or severe traumatic deviation)

- Score at least 28 on the HLD Index or qualifies for one of the exceptions on the HLD Index form, or
- Be under the age of 13 with an impacted central incisor.

For participants under the age of 13 with an impacted central incisor, use procedure code D8050 (interceptive orthodontic treatment of the primary dentition) or D8060 (interceptive treatment of the transitional dentition). D8050 and D8060 will be manually priced procedure codes.

## **TRANSFER OF PATIENTS**

Any participant transferring into the MO HealthNet program that has started orthodontic treatment shall be allowed to complete the orthodontic treatment. The amount of payment for the remaining treatment will be based on the MO HealthNet orthodontic fee schedule and prorated based on the time left in treatment as evaluated by the State Orthodontic Consultant.

**Provider Bulletins** are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

**MO HealthNet News:** Providers and other interested parties are urged to go to the MHD Web site at <http://dss.missouri.gov/mhd/global/pages/mednewssubscribe.htm> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

**MO HealthNet Managed Care:** The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the red MO HealthNet card or by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One for the red or white card.

**Provider Communications Hotline**  
**573-751-2896**