

## PROVIDER BULLETIN

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### Dental Program – Application of Silver Diamine Fluoride (SDF)

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#### Addition and Reimbursement of Procedure Code D1354 - Interim Caries Arresting Medicament Application (SDF)

##### **Addition of Procedure Code D1354**

Effective for dates of service on or after October 1, 2017, the MO HealthNet Division (MHD) fee-for-service dental program will allow reimbursement for procedure code D1354 (interim caries arresting medicament application). Reimbursement for SDF application will be allowed for participants age one (1) through five (5) years.

##### **Reimbursement of Procedure Code D1354**

The reimbursement rate will be \$2.67 per tooth. Quantity limitations include one (1) application per six (6) months with a lifetime maximum of four (4) applications per tooth.

**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.mo.gov/mhd/> 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.

The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Managed Care Services

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 MO HealthNet card or by calling the Provider Communications Interactive Voice Response (IVR) System at 573-751-2896 and using Option One for the red or white card.

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