



MISSOURI MEDICAID

DentaQuest®

MO Medicaid Dental Programs

Provider Updates

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DentaQuest Missouri Network Manager

DentaQuest has a dedicated Network Manager who lives and works throughout the state of Missouri. The provider-facing professional is your key point of contact for education, training, and support, helping dental offices successfully self-serve and navigate DentaQuest systems.

Our Network Managers support providers by:

- Conducting **virtual trainings** on tools and processes, including Online Resource Management (ORM) and portal navigation.
- Promoting **technology adoption** to streamline operations and minimize errors.

FAQ

Q: How do I know what services are covered for members?

A: Covered services are listed in the Office Reference Manuals (ORM) Exhibit Tables.

The MO Medicaid ORM includes Exhibit A: Benefits for the MO Child Health Plan Plus.

The MO Medicaid ORM includes three exhibits.

- Exhibit A: Benefits for members age 20 and under
- Exhibit B: Benefits for members age 21+
- Exhibit C: Benefits for IDD Members ages 21+



- **Recruiting and maintaining** a provider network tailored to Missouri's diverse demographic needs, with a strong focus on improving access to care for members. →
- Representing DentaQuest at **local events** and community engagements to build relationships and support our presence across the state.

When challenges arise that cannot be resolved through standard reference points, Network Managers serve as a direct resource for providers, offering guidance, educational support, and escalation pathways to help address and resolve issues effectively.

They also offer **credentialing support**, helping providers understand the processes and requirements for successful credentialing within the networks DentaQuest administers in Missouri.

If your office has not yet completed ORM and portal training, or if you'd benefit from a refresher, please reach out to your assigned Network Manager to schedule a virtual training session.

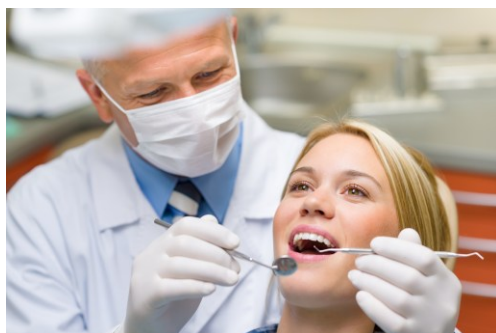
Appointment & Availability Standards

Annual reminder that participating Missouri Medicaid/DentaQuest providers are expected to meet minimum standards (below) with regards to appointment availability.]

- ✓ Urgent care must be available within 48 hours
- ✓ Emergency care must be available within 24 hours
- ✓ Follow-up appointments must be scheduled within 30 days of the present treatment date, as appropriate

This information can also be found under the **Patient Recall System Requirements** sections in each Office Reference Manual

Credentialing and Update Information -Know Where to Go



All updates for Missouri DentaQuest providers can be submitted directly to DentaQuest by *using a Standard Update form*.

- A copy of the Standard Update form can be acquired at <https://www.dentaquest.com/en/providers/update-your-information>.
- A completed form along with any supporting documentation can be sent directly to standardupdates@dentaquest.com.
- For new providers joining a new or existing TIN, you may begin the initial credentialing process online at

<https://www.dentaquest.com/en/providers/credentialing/dentist-profile>.



Key Resources for Providers

Office Reference Manual (ORM):

The MO Medicaid ORM is an essential resource for provider education and guidance.

Updated annually, these manuals outline:

- Program benefits
- Clinical criteria
- Claims coding and billing criteria
- Administrative processes

Where to find the ORM:

- **DentaQuest Provider Portal** (under “Documents”)
Provider Portal Login
→ After logging in, select **Documents** from the top menu.
- DentaQuest National Website: [Missouri Dental Providers | DentaQuest](#)
Oral Health Care & Dental Insurance | DentaQuest
→ Go to **Providers > Missouri > Important Documents and Links**

DentaQuest Provider Portal [Access the Provider Portal](#)

The DentaQuest Provider Portal is a powerful self-service tool that allows providers to:

- View and manage **provider, location, and network details**
- Access **member service history**
- Submit and track **claims and prior authorizations**
- Review **payment status and remittance**
- Retrieve **key documents and updates**

This intuitive portal is designed to increase provider efficiency and minimize the need for phone-based support.

Understanding D0140: Limited Oral Evaluation-Problem Focused

Per the CDT code descriptor, D0140 is defined as a *Limited Oral Evaluation – Problem Focused*. This evaluation is intended to address a specific oral health problem or complaint. Patients receiving D0140 typically present with a focused concern such as dental emergencies, trauma, acute infections, or similar conditions.

Reimbursement for D0140 is aligned strictly with the CDT descriptor. To support appropriate payment, clinical documentation should clearly describe the patient’s presenting complaint, relevant findings, and any diagnostic aids used, including radiographs when indicated.





When a patient presents with a complaint and additional treatment is performed during the same visit at the provider's discretion, the D0140 evaluation becomes inclusive of the treatment rendered. In these situations, members are **not financially responsible** for D0140 and may not be charged separately for this code.

Coordination of Benefits (COB)

Missouri Medicaid is always the payer of last resort. When members have other insurance, any other carrier's Explanation of Benefits (EOB) must be submitted with the claim.

The primary carrier's EOB must include:

- Member's information,
- Name of the Primary Insurance Carrier,
- Submitted codes, **and**
- Denial reason, if applicable.



For electronic claim submissions, the payment made by the primary carrier must be indicated in the appropriate Coordination of Benefits (COB) field. When a primary carrier's payment meets or exceeds a Provider's contracted rate or fee schedule, DentaQuest will consider the claim paid in full and no further payment will be made on the claim, nor can the member be balanced billed for covered services.

This information can be found in section 4.07 Coordination of Benefits of the MO Medicaid ORM.

Additional information regarding billing a member for non-covered services can be found in section 2.03 Payment for Non-Covered Services.

Sedation Coding Revisions

Effective January 1st, 2026, the department implemented a limited number of dental code updates to the MO Medicaid benefit plans for 2026. Following a review of all proposed CDT codes and their projected utilization across Medicaid populations, the Department approved select changes that balance fiscal responsibility with continued access to dental services. Claims will be reprocessed for pre-payment review for DOS 1/1/26-current.

Currently, the only approved updates involve revisions to existing sedation coding. As part of these changes, CDT code D9248 (Non-Intravenous Conscious Sedation) will be retired and replaced with the following codes to better reflect current sedation services:

- D9244 – In-office administration of minimal sedation, single-drug enteral
- D9245 – Administration of moderate sedation, enteral
- D9246 – Administration of moderate sedation, non-intravenous parenteral, first 15 minutes
- D9247 – Administration of moderate sedation, non-intravenous parenteral, each subsequent 15 minutes



Dental Home Panel Roster via Provider Portal

Missouri Medicaid members are assigned to a Dental Home to help members choose a provider and utilize dental benefits. Dental Home allows members to have a consistent place to receive care. Providers can utilize the DentaQuest provider portal to access their member Panel Roster by following the steps below. The Panel Roster will show all DentaQuest MO Medicaid members who are assigned to the office as their Dental Home.

- Click on the Member tab
- Click on Panel Roster
- Filter your search by selecting a location or provider. You can also leave the fields blank and click the Search button to find all assigned members

Training Sessions

Did you know DentaQuest holds quarterly training sessions covering current events and common questions? If you are a new provider to DentaQuest or an existing provider wanting a refresher, join our next session by following the instructions below!



Date: Thursday July 28th
Time: 11:00 AM CST (1 hour)
Host: Tanisha Bryant
Call in: 1-339-666-3919

Meeting Number (access code):
539 628 82#
Meeting Link: [Q3 MO HB Training](#)



DentaQuest Network Manager Information

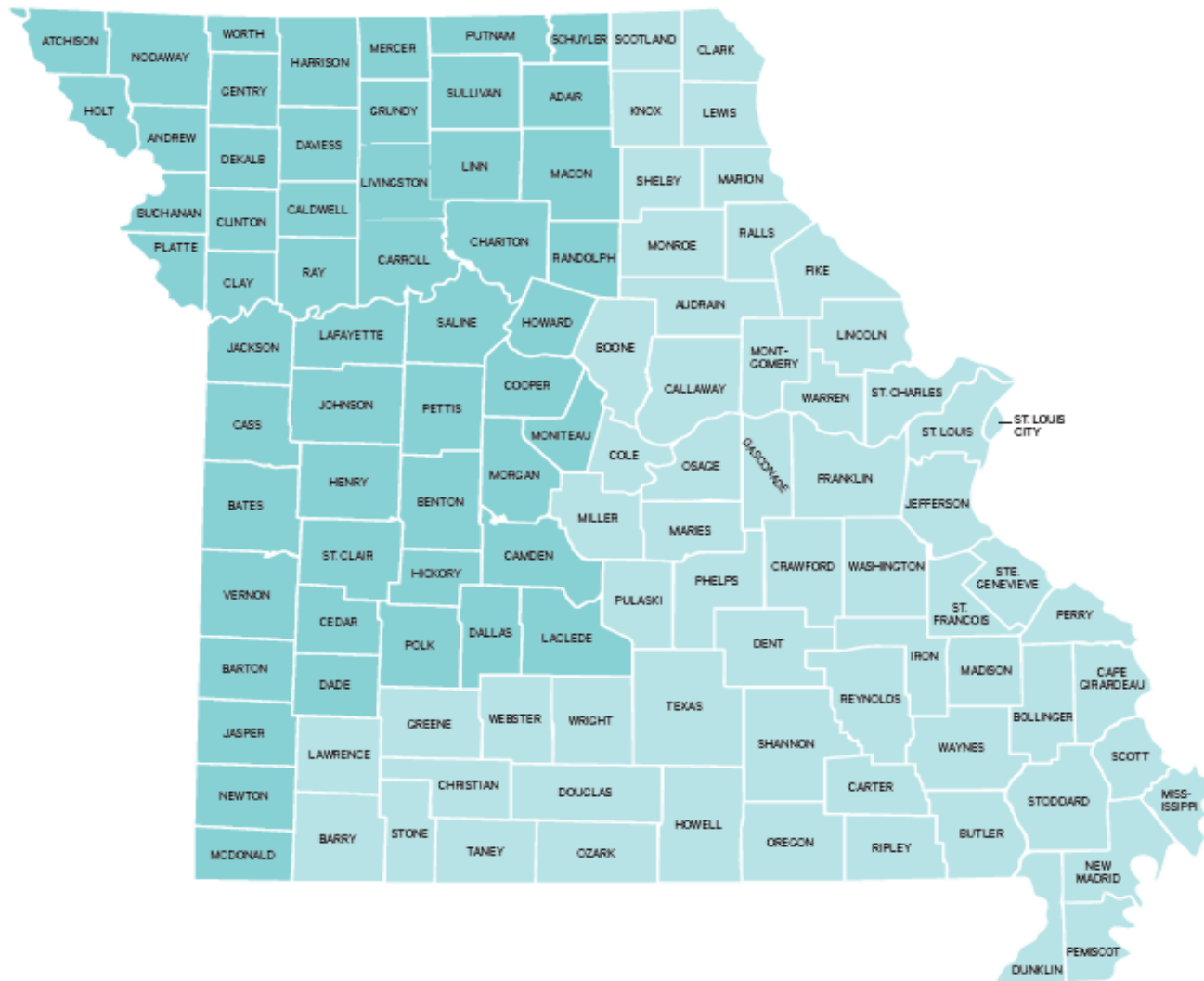
Provider Contact Information

Eastern and Western Missouri

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P: (630) 202-7514



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DentaQuest Web Portal Log-In:
<https://providers.dentaquest.com>

**DentaQuest Credentialing
Hotline:** 800-233-1468

Claims/Auth Mailing Address:
DentaQuest – MO
PO Box 2906
Milwaukee, WI 53201-2906

Payor ID: CX014

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