



# TEXAS ROUNDUP

## Program Updates for Texas Dentists



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### TESTIMONIAL

*I wanted to thank you for your guidance and help for the last couple of years. Many employees from our group reach out to you with so various questions at different times and you are always accessible and helpful. We truly feel blessed to have this relationship and wanted to share our deep gratitude to you and the entire team at DentaQuest!*

*3C Dental Group*

### Caries Risk Assessment Requirements

Effective 1/1/2020

Beginning January 1, 2020, the entire claim submission will be denied if a caries risk assessment procedure code (D0601, D0602 or D0603) is not submitted on the same date of service as the dental examination procedure code (D0120, D0145, and D0150).

The member's dental condition(s) that justifies the risk assessment classification submitted with the claim must be maintained by the provider in the member's dental record and be clearly documented using a caries risk assessment tool or in a narrative charting addressing clinical and biological factors or based on a professionally recognized assessment tool. Dentists have the flexibility, using his or her professional judgment, to utilize the caries risk assessment tools with which the dentist is most comfortable.

### ADA Claim Form Update

Effective 1/1/2020

Effective January 1, 2020, dental providers must use the 2018 or the 2019 versions of the American Dental Association (ADA) claim form. On or after January 1, 2020, claims submitted on a 2012 version of the ADA claim form will be returned to the provider.



## UPDATE: Restorations – Standard of Care

Effective 2/1/2020 (TX Medicaid and CHIP)

DentaQuest communicated information on October 29, 2018 regarding the standard of care review that will be effective February 1, 2020 for restorations repeated within 36 months. After further review, DentaQuest has updated Identical Restorations to prior authorization or prepayment review. **Codes: D2140, D2150, D2160, D2161, D2330, D2331, D2332, D2335, D2391, D2392, D2393, D2394**

## Reminder: Criteria for Dental Extractions

The prophylactic removal of asymptomatic teeth or teeth exhibiting no overt clinical pathology is covered subject to consultant review. The removal of primary teeth whose exfoliation is imminent does not meet criteria.

Claims submitted for the removal of asymptomatic teeth may be subject recoupment if it is validated that the billed extractions were not deemed medically necessary (as per Medicaid guidelines).

This includes the extraction of asymptomatic teeth as part of a member's orthodontic treatment. If the provider has documentation establishing that the extractions were completed per the request of an Orthodontist and the teeth in question are asymptomatic, the provider should execute the Non-Covered Service Disclosure form prior to completing the extraction and charge the member.

## Reminder: Appeals/Claim Resubmission

### Appeal:

An appeal is a request to review an adverse benefit determination. An appeal may be submitted after receiving a denial on a prior-authorization or claim submission. An appeal will be processed within 30 calendar days from the receipt date. A physical resolution letter will be mailed with the determination of the appeal. An appeal should not be utilized if a claim or authorization is denied for missing information.

### Resubmission:

A resubmission is a second claim or pre-authorization submitted with additional or corrected information. A resubmission should be utilized if your claim or pre-authorization triggers a processing policy pending additional information. A resubmission does not require an appeal be filed with DentaQuest. A resubmission is used in cases which are missing labeled x-rays, narrative, primary insurance information, or a correction needs to be made to a code, tooth number, surface, or arch on a previously submitted claim. Resubmissions follow the normal claim submission processes and will not trigger a resolution letter. Resubmitted claims or pre-authorizations must not include key words "appeal" or "reconsideration" as this triggers an appeal and unnecessary delays in processing.