Health

MONTHLY TIPS AND TRICKS: DENTAL SERVICES

DID YOU KNOW?

- Health Choice providers are encouraged to use fluoride varnish (D1206) as their primary fluoride treatment option. Because they require less application time, **fluoride varnish treatments are considered less costly** than fluoride gel and foam applications. Fluoride varnish acceptance is higher than other topical forms of fluoride, especially among young children. AHCCCS utilizes code D1206 in its determination of your office performance when measuring fluoride treatment.

- You can receive these reports from your designated Health Choice Network Representative monthly:

- The AHCCCS Dental Performance Report Card: outlines where the office is currently standing on key dental performance metrics, including comparison to the state regulated minimum performance standards.
- The AHCCCS Performance Gap Report: details each office's specific membership information, including member demographics, provider assignment, last office visit, member contact information, and Gaps in Care that need to be closed in the measurement year.

AHCCCS PERFORMANCE METRIC EXAMPLES:

Metric and description:	CDT code:
Dental VisitsAge: 2 - 20Frequency: Every yearPeriodic Oral Evaluation (once every 6 months)Oral Evaluation < 3 years of age	D0120 D0145 D0150
Fluoride VarnishAge: 0 - 20Frequency: Once per 6 months	D1206
Dental SealantsAge: 5 -15Frequency: One D1351 per tooth, per 36 month periodTooth numbers 2, 3, 14, 15, 18, 19, 30, 31 ONLY when no decay or restoration is present on tooth. Sealants are reimbursed 1x every 3 years, no more than 2x per tooth, up to 15 years of age.	D1351 (sealant per tooth)

SAVE PROCESSING TIME:

- Include clinical notes & diagnostic x-rays when requesting prior authorization or retrospective claim review.
- For claims submission of permanent crowns, post-op bitewing and PA of the treated tooth are required showing post cementation of crown.
- Make sure **all** records submitted (office notes, diagnostic reports, x-ray images etc) include two patient identifiers.
- Send single-sided claims and prior authorization forms only. The back side of two-sided forms can be easily overlooked when reviewing and may cause delay.
- When requesting authorization for multiple root canals and/or permanent crowns, total and complete comprehensive treatment plans, clinical notes and radiographs must be submitted.

FREQUENTLY ASKED QUESTIONS:

Q: Can a provider submit for multiple treatment options for one tooth, e.g. crown on tooth A and extraction on tooth A?

A: No. Multiple treatment options for a tooth are only accepted when treatment involves one of the following: extractions and space maintainers; root canal, build up, and crown; pulpotomy and crown. If treatment plan changes from the proposed & authorized plan, please submit complete documentation for a retrospective review.

Q: How does Health Choice help with missed appointments?

A: Fax the Health Choice Dental Missed Appointment form to 480-350-2217 on a weekly/daily basis. The Health Choice Dental Outreach Coordinator reaches out to members to assist with rescheduling missed dental visits as well as provide education on the importance of keeping their visits.

Q: When should a request be "expedited", vs "standard"-?

A: Expedited means a request for which a provider indicates, or Health Choice determines, that using the standard time frame could seriously jeopardize the member's life, health or ability to attain, maintain or regain, maximum function. All other requests should be submitted as "standard" or processing time for truly urgent requests may be delayed.

Health Choice is kicking off Dental Health Fairs and would like to partner with you to hold an event. We will work with you and your office to schedule needed dental care for your patients. If you would like to host a Dental Health Fair, please contact: Lupe Campos, 480-350-2215 or lcampos@iasishealthcare.com.

We look forward to partnering with you to improve the healthcare outcomes of your Health Choice patients.

Contact your network representative if you would like someone from the Health Choice's Oral Health department to visit your office to discuss anything on this form.