## **NOTICE:** Dental Prior Authorization

September 9, 2022

Dear Provider,

**Effective October 10, 2022**, BCBSAZ Health Choice will require prior authorization for all codes listed on the AHCCCS Uniform Prior Authorization Dental Codes List.

The list can be found on the AHCCCS website:

https://www.azahcccs.gov/Resources/Downloads/Contractor/AHCCCSUniformPriorAuthorization ListofDentalCodes.pdf.

The Dental Prior Authorization Codes list is also located on the Health Choice website www.healthchoiceaz.com under Providers/PA Guidelines.

Providers are required to obtain Prior Authorization before rendering treatment by submitting a completed Prior Authorization Claim Form (ADA form). For specialty referral, please complete the Dental Specialty Referral Request Form. Submit all requests with supporting documentation, including clinical notes and diagnostic x-rays, by one of the following means:

• Email: HCHDentaldeptHCA@azblue.com

• Mail: Health Choice Arizona, Inc.

Attn: Dental Prior Authorization 410 N. 44th Street, Suite 900

Phoenix, AZ 85008

• Fax: 480-350-2177

If you have any questions or need additional information, please call the Dental Prior Authorization Department at 480-968-6866 EXT 6006.

Thank you for your continued commitment to serving our members and ensuring the provision of quality care and services.

To view this notice for embedded links and content specific to education-related material, please visit us online at www.HealthChoiceAZ.com under our "Providers" tab.

