



Automated Medical Payments

# Medicaid Bulletin Colorado Title XIX

Fiscal Agent



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## Medicaid Fiscal Agent Information on the Internet

[coloradomedicaid.acs-inc.com](http://coloradomedicaid.acs-inc.com)

Distribution: Dentists, Dental hygienists

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## Dental Policy Changes

This bulletin announces general Colorado Medicaid policy changes for unsupervised dental hygienists. Specific information will be provided to unsupervised dental hygienists upon Medicaid enrollment, and in provider workshops.

The *unsupervised dental hygienist* is a new Medicaid provider specialty.

### Effective February 1, 2002

The 2001 Legislative Session passed House Bill 01-1282. This bill allows **unsupervised dental hygienists** to bill Medicaid directly for services provided to Medicaid enrolled children.

Dental hygienists employed by a dentist, clinic or institution **cannot** submit claims individually. Claims must be submitted using the employer's Medicaid provider number.

### Continuity of care

Dental hygienists who are directly reimbursed must identify Medicaid-participating dentists or any other licensed dentist for each child the dental hygienist serves.

### Unsupervised dental hygiene services are limited to Medicaid enrolled children

An unsupervised dental hygienist can only provide and bill Medicaid directly for the preventive dental services listed in this bulletin. These services can only be provided to Medicaid clients, age 20 and under.

- An unsupervised dental hygienist cannot provide and bill any dental services for an adult Medicaid client, age 21 and older. Adult Medicaid clients are eligible only for limited medically necessary dental services. No preventive dental services are a benefit for an adult Medicaid client under any circumstance.
- An unsupervised dental hygienist cannot provide and bill any dental services for a Medicaid non-citizen of any age. Non-citizen Medicaid clients are eligible only for selected emergency dental services. No preventive dental services are a benefit for a non-citizen Medicaid client under any circumstance.

### Prior Authorization for preventive dental services - PAR

None of the preventive dental services provided by an unsupervised dental hygienist require a Prior Authorization Revue (PAR).

Medicaid bulletins contain important policy and billing information and should be shared promptly with billing staff.

Bulletins supplement information in the Medicaid Provider Manual and should be retained with the provider manual for reference. Retain all bulletins until published notification advises that the information is obsolete or reproduced in subsequent bulletins or provider manual updates.

Please direct questions about bulletins and billing information to Medicaid Provider Services.

### Dental procedures that can be billed by a dental hygienist

Unsupervised dental hygienists must use the following ADA dental procedure codes when billing Medicaid. Dental services that are not listed below may *not* be billed to Medicaid by an unsupervised dental hygienist. Please see the ADA publication CDT III, for further descriptions of each of the ADA dental procedure codes.

- *D1110 - prophylaxis, adult (child's permanent teeth)*
  - ⇒ Use code D1205 when doing prophylaxis and fluoride on the same date of service
- *D1120 - prophylaxis, child*
  - ⇒ Use code D1201 when doing prophylaxis and fluoride on the same date of service
- *D1201 - topical application of fluoride (including prophylaxis), child*
- *D1203 - topical application of fluoride (prophylaxis not included), child*
  - ⇒ Use code D1201 when doing prophylaxis and fluoride on the same date of service
- *D1204 - topical application of fluoride (prophylaxis not included), adult (child's permanent teeth)*
  - ⇒ Use code D1205 when doing prophylaxis and fluoride on the same date of service
- *D1205 - topical application of fluoride (including prophylaxis), adult (child's permanent teeth)*
- *D1330 - oral hygiene instructions*
- *D1351 - sealant (per tooth)*
  - ⇒ A benefit only for permanent molar teeth 2, 3, 14, 15, 18, 19, 30, 31
  - ⇒ A benefit only for the occlusal surface
  - ⇒ Chemically prepared enamel surface sealed to prevent decay
- *D0999 - unspecified diagnostic procedure - oral exam for data collection*
  - ⇒ The Medicaid client's dental records must state that there were no interpretive components included with the exam.
  - ⇒ The Medicaid client's dental records must clearly document the data collected from the exam.

### Billing the Medicaid client's private dental insurance carrier

If a Medicaid client has dental insurance in addition to Medicaid dental benefits, that insurance must be billed first for the services. Medicaid is always the payor of last resort.

### Please keep this bulletin for reference

*This bulletin contains important policy and billing information. Share this bulletin promptly with your billing staff. This bulletin supplements information in the Medicaid Dental Provider Manual and the January 2001 Medicaid Bulletin, Reference: B0100087.*

Please direct questions about Medicaid billing or information in this bulletin to:

**Medicaid Provider Services**  
**303-534-0146 or**  
**1-800-237-0757 (toll free Colorado).**