
Dental Managed Care Covered Services

Dental Managed Care Services are not provided by DHP. However, DHP will assist the Member in obtaining the following services, including Texas Health Steps Services/orthodontia. Providers should visit www.tmhp.com for additional information contained in the TMPPM.

Primary and Preventative Dental Services

Pediatric (under age 21) dental services for STAR Members are a covered benefit, except Oral Evaluation and Fluoride Varnish Benefits (OEFV) provided as part of a Texas Health Steps medical checkup for Members, aged 6 through 35 months.

How to Help a Member Find Dental Care

The Dental Plan Member ID card lists the name and phone number of a Member's Main Dental Home provider. The Member can contact the dental plan to select a different Main Dental Home provider at any time. If the Member selects a different Main Dental Home provider, the change is reflected immediately in the dental plan's system, and the Member is mailed a new ID card within 5 Business Days.

If a Member does not have a dental plan assigned or is missing a card from a dental plan, the Member can contact the Medicaid/CHIP Enrollment Broker's toll-free telephone number at **1-800-964-2777**.

STAR & STAR Kids Emergency Dental Services

Medicaid Emergency Dental Services:

DHP is responsible for emergency dental services provided to STAR & STAR Kids Member in a hospital, freestanding emergency room, or ambulatory surgical center setting. We will pay for hospital, physician, and related medical services (e.g., anesthesia and drugs) including but not limited to:

- treatment of a dislocated jaw, traumatic damage to teeth, and supporting structures, removal of cysts;
- treatment of oral abscess of tooth or gum origin; and
- treatment and devices for correction of craniofacial anomalies and drugs.

STAR & STAR Kids Non-Emergency Dental Services

Medicaid Non-emergency Dental Services:

DHP is **not responsible** for paying for routine dental services provided to STAR & STAR Kids Members. These services are paid through Member Dental Managed Care Organizations.

DHP is **responsible** for paying for treatment and devices for craniofacial anomalies, and of Oral Evaluation and Fluoride Varnish Benefits (OEFV) provided as part of a Texas Health Steps medical checkup for Members age 6 months through 35 months.

OEFV benefit includes (during a visit) intermediate oral evaluation, fluoride varnish application, dental anticipatory guidance, and assistance with Main Dental Home choice.

- OEFV is billed by Texas Health Steps providers on the same day as the Texas health Steps medical checkup.
- OEFV must be billed concurrently with a Texas Health Steps medical checkup utilizing CPT code 99429 with U5 modifier.
- Documentation must include all components of the OEFV
- Texas Health Steps providers must assist Members with establishing a Main Dental Home and document Member's Main Dental Home choice in the Members' file.

In conjunction with a Texas Health Steps medical checkup, utilize CPT code 99429 with U5 modifier and diagnosis code Z00121 or Z00129 when billing fluoride varnish. The oral evaluation/fluoride varnish must be billed with one of the

following medical checkup codes 99381, 99382, 99391, or 99392. This service is limited to six (6) services per lifetime by any provider.

DHP is **responsible** for paying for treatment and devices for craniofacial anomalies.

CHIP Emergency Dental Services

DHP is responsible for emergency dental services provided to CHIP Members and CHIP Perinate Newborn Members in a hospital or ambulatory surgical center setting. We will pay for hospital, physician, and related medical services (e.g., anesthesia and drugs) for:

- Treatment of a dislocated jaw, traumatic damage to teeth, and removal of cysts; and
 - Treatment of oral abscess of tooth or gum origin;
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CHIP Non-Emergency Dental Services

DHP is **not responsible** for paying routine dental services provided to CHIP and CHIP Perinate Members. These services are paid through the Dental Managed Care Organizations.

DHP is **responsible** for paying for treatment and devices for craniofacial anomalies.