



Connecticut Medical Assistance Program
Policy Transmittal 2018 - 18

Provider Bulletin 2018 - 51
August 2018

Roderick L. Bremby, Commissioner

Effective Date: September 1, 2018
Contact: Donna Balaski, DMD

TO: All Dental Providers, Dental Clinics and Federally Qualified Health Centers
RE: 2018 Dental Fee Schedule Update for CDT D1354

Effective for dates of service, September 1, 2018, and forward, the Department of Social Services (DSS) is changing the reimbursement methodology for Healthcare Coding Procedure System (HCPCS) for Current Dental Terminology (CDT) code, D1354 (Interim Caries Arresting Med.).

DSS is making these changes to ensure that the dental fee schedule remains compliant with the Health Insurance Portability and Accountability Act (HIPAA). The changes apply to services reimbursed under all of the HUSKY Health programs.

Effective for dates of service, September 1, 2018, and forward, code D1354 will be changed from a fee for service reimbursement to a special pricing reimbursement methodology. Since the D1354 procedural descriptor specifies a tooth number, DSS is creating a Special Pricing Prior Authorization (SPPA) for this code that will allow for the specification of the tooth or teeth in which an “interim caries arresting medicament” is applied in each dental arch. The rationale for this change is by capturing the tooth number(s), this will permit for the better assessment of oral health in the members who receive this service. The SPPA for reimbursement of the code will be as follows:

CDT/ CPT Code	Description Summary	Fee Child	Fee Adult
D1354	Interim Caries Arresting Med	28.42	28.42
	Each additional Tooth	1.00	1.00

The D1354 code will not be reimbursed if submitted directly to DXC Technologies for payment without submitting for SPPA first. The SPPA permits for the review for reasons of medical necessity. All other limitations related to D1354 remain in effect.

D1354 - Sodium Diamine Fluoride (SDF) Submission

D1354 - Interim Caries Arresting Medicament is for use by **pediatric and general dentists** who treat children less than six years of age and for adult and child members who have special healthcare needs. The application of the Sodium Diamine Fluoride will continue to be approved up to four (4) times per year at three (3) month intervals.

Reimbursement will continue to be paid for application to the area of the oral cavity by the maxillary arch and/or mandibular arch and will be manually priced. Each arch will be reimbursed \$28.42 and for each additional tooth within the arch, \$1.00 will be added to the final price.

The same submission requirements that apply for any PA also apply to the specially priced code. Please include in the documentation the rationale for the use of the sodium diamine fluoride, radiographs or intraoral photographs.

The request should be submitted through the usual methods; this may be electronically via the www.ctdhp.com Web site or through the U.S. Postal Service in hard copy format.

To electronically upload a SPPA request, follow the steps outlined below:

1. Access the www.ctdhp.com Web site and click on "**Provider Partners**" and click on "**Provider Login.**"
2. Enter your Billing NPI and Tax ID numbers in the appropriate boxes and click on "**Submit.**"
3. A new screen will appear, click on "**Prior Authorization Upload.**"
4. Follow instructions for the prior authorization or post procedure review requests.

Hard copy submissions for non-orthodontic services that require SPPA or PA should be sent to the following address:

**Prior Authorization Unit
C/O Bene Care Dental Plans
P.O. Box 40109
Philadelphia, PA 19106-0109**

Verifying Manually Priced Code Status Electronically

You may verify the processing status via the CT Medical Assistance Program Web Portal at www.ctdssmap.com. Providers can log onto their secure Web account and access the "PA inquiry link" on the right hand side to access the Prior Authorization Inquiry or select Prior Authorization on the Menu Bar. Providers can search for SPPA approvals by the client ID if notification from CTDHP with the PA number has not yet been received. Providers may also verify the SPPA approval by entering the letter "B" followed by the PA number provided by CTDHP.

Accessing the Fee Schedules:

The adult and children's dental fee schedules can be accessed and downloaded by logging

onto the Connecticut Medical Assistance Program Web site: www.ctdssmap.com.

From this Web page, go to "**Provider**", then to "**Provider Fee Schedule Download**". Click on the "**I accept**" button and proceed to click on the "**Dental**" fee schedule (Adult or Pediatric). To access the CSV file, press the control key while clicking the CSV link, then select "**Open**".

For questions about billing or if further assistance is needed to access the fee schedule on the Connecticut Medical Assistance Program Web site, please contact the Provider Assistance Center, Monday through Friday from 8:00 a.m. to 5:00 p.m. at 1-800-842-8440.

The Connecticut Dental Health Partnership (CTDHP) posts a copy of the adult and children's fee schedules on their Web site: www.ctdhp.com.

Posting Instructions: Policy transmittals can be downloaded from www.ctdssmap.com.

Distribution: This policy transmittal is being distributed to providers of the Connecticut Medical Assistance Program by DXC Technology.

Responsible Unit: DSS, Division of Health Services, Integrated Care, Dental Unit, Donna Balaski, D.M.D. at (860) 424-5342 or donna.balaski@ct.gov.

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