Dental/Orthodontic Services

Overview/Review 2019

General Information

- Dental services are covered for enrolled children up to 21 years of age.
- Dental services covered for enrolled adults 21 years of age and older are limited to emergent procedures.
- Orthodontic services for children up to 21 years of age must be medically necessary and requires prior authorization before services are provided.
- Clinical documentation to include a treatment plan of care, radiograph results, and photographs must be available to the Utilization Management Contractor (UMC) for prior authorization review and final determination of approval.
- One treatment of comprehensive orthodontia procedure codes (D8070, D8080, or D8090) per lifetime per member is covered.
  - If more than one comprehensive orthodontic procedure code is billed, the claim will deny.

General Information (cont.)

- If a Current Dental Terminology (CDT) code requires prior authorization, the service requires prior authorization regardless of place of service.
- A list of services requiring prior authorization is provided for convenience – this code list only includes services requiring prior authorization. Please check BMS policy or Molina to determine if a service is covered.
  - The Master Code List can be found on www.wvaso.kepro.com.
- All inpatient hospitalizations require prior authorization (PA) by BMS' Utilization Management Contractor (UMC).
- Inpatient hospitalization shall not be reimbursed when the service could be provided in an outpatient setting.
- Requests for prior authorization do not guarantee approval or payment.

Requirements for Review

- A referral for treatment.
- The primary diagnosis and appropriate CDT code for service to be provided.
- A treatment plan (Orthodontics).
- Radiographs.
- Photos, when appropriate.
- Dental molds, when appropriate (can be mailed to the address on the next slide).
- Documentation to justify medical necessity.
- Copy of Prior Authorization Request Form, when applicable.
- Copy of ADA claim form submitted for payment consideration, when appropriate.
- While DDE system is preferred, if you are using a fax form please be sure you are using the appropriate authorization request form.

PLEASE BE SURE THAT ALL ATTACHMENTS INCLUDE THE PATIENT'S NAME AND DATE OF BIRTH!

Radiographs/Molds

- If you have the capability to email X-rays please contact KEPRO, we can set up a secure email account for your convenience.

- X-rays must include the name of the patient.

- X-rays can be faxed to 844-633-8431.

- X-rays/dental molds/photos can be mailed to:

  KEPRO

  1007 Bullitt Street, Ste. 200,

  Charleston, WV 25301

- If x-rays are mailed, please note if they need to be returned.

Copy for Correction vs. Copy for New Submission

- A copy for correction is requested to change or correct services previously authorized. These include but are not limited to:
  - Code Changes
  - Servicing provider changes
  - Service start dates (not within original timeframe)
  - Authorization number combination

- A copy for new submission is requested when a copy for correction cannot be completed due to:
  - Closure of previous authorization request
  - Request is stuck in saved mode and won't submit

Adding Tooth Numbers to a Prior Authorization Request

- If an additional tooth number was added to a procedure that had already been approved, and was performed on the same date of service; a copy for correction is needed on the original request.

- Dental authorizations are group approved and a copy for correction allows all tooth numbers, original and added, to have the same authorization number.

- When submitting Copy for Corrections please use the same date as on the Original Request ID. You may need to change the request from Prior Authorization to Retrospective Request. Select OTHER and indicate reason (justification) for the copy for Correction.

*Providers have 10 business days from the date the service was performed to request a copy for correction to be within retrospective policy guidelines. If the request is not received within 10 business days, a policy denial for not meeting retrospective policy will be issued.

Deleted and Replacement Codes for 2019

Deleted Code	Description	Replacement Codes	Description
D1515	Space maintainer-fixed-bilateral	D1516	Space Maintainer-fixed-bilateral, maxillary
		D1517	Space Maintainer-fixed-bilateral, mandibular
D1525	Space maintainer-removable-bilateral	D1526	Space Maintainer-Removable-bilateral, maxillary
		D1527	Space Maintainer-Removable-bilateral, mandibular
D5281	Removable unilateral partial denture-one piece cast metal (including clasps and teeth)	D5282	Removable unilateral partial denture-one piece case metal(including clasps and teeth), maxillary
		D5283	Removable unilateral partial denture-one piece case metal(including clasps and teeth), mandibular
D9940	Occlusal guard, by report	D9944	Occlusal Guard-hard appliance, full arch
		D9945	Occlusal Guard-soft appliance, full arch
		D9946	Occlusal Guard-hard appliance, partial arch

Unlisted Procedures and Unspecified Codes

- D5999, D7999 and D9999 (or any unspecified codes) should be accompanied by CPT/HCPCS code(s) to clarify procedure that is being performed.

- An unlisted/unspecified code cannot be used to obtain Prior Authorization for a non-covered service.

Unlisted CPT Code 41899

Effective October 1, 2019, all unlisted CPT/HCPCS codes require an authorization regardless of place of service. An updated Master Code list that includes these unlisted codes has been added to KEPRO's provider website: http://wvaso.kepro.com.

- CPT code 41899 is an unlisted CPT code and prior authorization is now required.
- Dental providers must fax an Outpatient (OP) surgery request form filled out in its entirety for clinical review to 844-633-8427. This fax number is also shown on the top of the request form.
  - This must be done for all dental services performed in a hospital setting whether or not the dental procedure requires prior authorization. The dental procedure to be performed should be indicated on the request for 41899.
- The faxed authorization request received will be keyed by KEPRO staff under the hospital facility.
- The requesting Dental Provider will not have access to these authorization requests.
  - As a courtesy to Dental Providers, KEPRO staff will fax determinations to the fax number indicated by the Dental Provider on the request form for CPT code 41899 only.
- The process for Dental Providers to obtain an authorization for dental services billed with CDT (dental) codes that require prior authorization has not changed.

For additional information, please access KEPRO provider website http://wvaso.kepro.com or contact KEPRO-Medical Unit at 800-346-8272 for assistance.

Training

- If you are currently faxing in prior authorization requests and would like to utilize the direct data entry portal, the medical department offers training for providers and office staff.
- We offer training via webinar, phone, and various materials.
  - These are offered to make submitting online for Prior Authorization an easier process for providers.
- If you are interested in one-on-one training. Please contact one of the training specialists.

KEPRO Medical Contact Information

KEPRO
1007 Bullitt Street, Suite 200
Charleston, WV 25301
WVCHIP: 1-888-571-0262
WVCHIP SERVICES EMAIL: WVCHIP@KEPRO.COM
WVCHIP FAX NUMBER: 1-866-438-1360

HELEN SNYDER	DIRECTOR	HCSNYDER@KEPRO.COM	EXT. 4463
KAREN WILKINSON	UM NURSE MANAGER	KAREN.WILKINSON@KEPRO.COM	EXT. 4474
ALICIA PERRY	OFFICE MANAGER	APERRY@KEPRO.COM	EXT. 4452
SIERRA HALL	TRAINING SPECIALIST	SIERRA.HALL@KEPRO.COM	EXT. 4454
JAMI PLANTIN	ELIGIBILITY SPECIALIST	JAMI.PLANTIN@KEPRO.COM	EXT. 4502
JASPER SMITH	ELIGIBILITY SPECIALIST	JASPER.SMITH@KEPRO.COM	EXT. 4490
JOHN JONES	CUSTOMER SERVICE REP	JOJONES@KEPRO.COM	EXT. 4431
KATIE BOOKER	CUSTOMER SERVICE REP	BBOOKER@KEPRO.COM	EXT. 4432
LAUREN PLEVA	CUSTOMER SERVICE REP	LPLEVA@KEPRO.COM	EXT. 4476

GENERAL KEPRO AND WVCHIP INFORMATION: WWW.WVASO.KEPRO.COM
FOR SUBMITTING AUTHORIZATIONS: HTTPS://PROVIDERPORTAL.KEPRO.COM
WEBSITE FOR ORG MANAGERS TO REGISTER/ADD/MODIFY USERS: HTTPS://C3WV.KEPRO.COM