



## DENTAL UPDATES AND CHANGES

12/14/21

### **Do we have to have prior authorize perio services on the Soon-to-be-Sooners?**

*Yes, the D4341, D4342, and D4346 require prior authorization.*

### **Can we submit for a prior authorization after the procedure is completed?**

*Payment is not made for any services provided prior to receiving authorization except for the relief of pain.*

### **Is there a timeframe we have between the interim denture and complete denture?**

*There is not a set time frame in between procedures. The dentist should follow the standard of care for medical necessity when requesting prior authorization.*

### **Are Soon-to-be-Sooners just pregnant mothers who wouldn't otherwise qualify?**

*The STBS population is covered under CHIP (Child Health Insurance Plan), or Title 21, and can be citizens or non-citizens.*

### **According to the ADA, after SRP is completed, the patient is placed on perio maintenance, typically coming back every 3-4 months for recare. How do we bill this through SoonerCare since it is not a covered procedure?**

*Periodontal maintenance is not a covered code at this time. It may be added in the future. Please stay up-to-date with changes by subscribing to web alerts for global messages.*

### **What is the current turnaround time for prior authorization?**

*Typically, a prior authorization is approved from the date the dental consultant approves it. If the prior authorization was approved starting with the date of submission, it is still valid. Please do not render any services that require prior authorization before you receive approval. The current timeline for processing a prior authorization is 4-6 weeks. Some may be processed a little faster depending on the number of prior authorizations assigned to each consultant.*

### **Are the D8050 and D8060 no longer covered by OHCA?**



#### **ADDRESS**

4345 N. Lincoln Blvd.  
Oklahoma City, OK 73105



#### **WEBSITES**

[oklahoma.gov/ohca](http://oklahoma.gov/ohca)  
[mysoonerca.org](http://mysoonerca.org)



#### **PHONE**

Admin: 405-522-7300  
Helpline: 800-987-7767



*D8050 and D8060 Interceptive orthodontic treatment will no longer be covered after December 31, 2021. The ADA has discontinued these codes. See the CDT 2022 for more information.*

**Do SoonerCare members have a copay per visit?**

*Yes, non-pregnant adult SoonerCare members will be charged copayments up to the 5% out-of-pocket cost sharing limit, unless exempted from cost sharing requirements. See policy 317:30-3-5 assignment and cost sharing.*

**Why was my prior authorization request returned for more information, rejected, cancelled or denied?**

*Please contact the Dental Prior Authorization Unit directly at 405-522-7401 for information pertaining to specific situations.*

**Could you explain the change on D1520 again?**

*D1520 requires that you indicate 01-Maxillary or 02-Mandibular on the prior authorization and the claim.*

**What services are covered for Title 19 and the Healthy Adult Program, and what is the reimbursement for each service?**

*This information is available by utilizing the provider portal resources tab or via the public website utilizing the dental fee schedule at <https://oklahoma.gov/ohca/providers/claim-tools/fee-schedule.html>.*

**Are you able to transfer a prior authorization from one clinic to another if already approved?**

*The prior authorization follows the member and can be used by any contracted provider.*



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