



## Department of Health

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Update: New York State Medicaid Program Dental Policy and Procedure Code Manual

The Department of Health has updated sections VI and VIII of the Dental Policy and Procedure Code Manual. These updates are effective November 12, 2018 and replace existing language.

The updates will be published in the Dental Policy and Procedure Code Manual found online at [https://www.emedny.org/ProviderManuals/Dental/PDFS/Dental\\_Policy\\_and\\_Procedure\\_Manual.pdf](https://www.emedny.org/ProviderManuals/Dental/PDFS/Dental_Policy_and_Procedure_Manual.pdf) shortly.

### **VI. Prosthodontics**

Full and /or partial dentures are covered by Medicaid when they are required to alleviate a serious health condition or one that affects employability. This service requires prior approval. Complete dentures and partial dentures whether unserviceable, lost, stolen, or broken will not be replaced for a minimum of eight years from initial placement except when determined medically necessary by the Department or its agent. Prior approval requests for replacement dentures prior to eight years must include a letter from the patient's physician and dentist. A letter from the patient's dentist must explain the specific circumstances that necessitates replacement of the denture. The letter from the physician must explain how dentures would alleviate the patient's serious health condition or improve employability. If replacement dentures are requested within the eight year period after they have already been replaced once, then supporting documentation must include an explanation of preventative measures instituted to alleviate the need for further replacements.

### **VIII. Implant Services**

Dental implants will be covered by Medicaid when medically necessary. Prior approval requests for implants must have supporting documentation from the patient's physician and dentist. A letter from the patient's physician must explain how implants will alleviate the patient's medical condition. A letter from the patient's dentist must explain why other covered functional alternatives for prosthetic replacement will not correct the patient's dental condition and why the patient requires implants. Other supporting documentation for the request may be submitted including x-rays. Procedure codes and billing guidelines will follow.