



January 7, 2022

Web Announcement 2677

**Attention Provider Type 22 (Dentist):**

**Delivery Receipt Form Required with Claims for Dentures**

Providers are required to submit Partial Denture Delivery Receipt (form FA-27A) and Denture Delivery Receipt (form FA-27B) with claims for dentures. [Medicaid Services Manual \(MSM\) Chapter 1000, Dental, Section 1005.5.B.3](#) provides the following instructions:

“The recipient must sign and date a delivery receipt to verify that the dentures/partials were received and are accepted and/or acceptable. The date of the signature on the delivery receipt must be the date the dentures/partials were received by the recipient. The delivery receipt must include the recipient’s name, quantity, detailed description of the time(s) delivered and the date and time of delivery and be maintained in the recipient’s dental record. **The delivery receipt is a required attachment when submitting the claim for reimbursement** through the QIO-like vendor’s web portal. Claims cannot be submitted prior to the date of delivery.”

Forms FA-27A and FA-27B have been updated to reflect the current policy and are posted on the [Providers Forms](#) webpage. If an alternate form is used, the alternate form must include the items listed in MSM Chapter 1000.