

August 29, 2022 Web Announcement 2885

Attention Dental Services Providers:

Claims for Dental Procedure Codes Reprocessed

Claims for the following dental procedure codes that were submitted for recipients age 21 or older who were not in the pregnancy benefit, and the claim did not have a prior authorization, have been reprocessed automatically if the claim paid in error.

Reprocessed Claims	Impacted Provider Types
Claims for procedure code D1354 with dates of service on or after April 1, 2020, through February 7, 2022. Providers were notified of procedure code D1354 claims adjudicating in error in Web Announcement 2708.	PT 17 Special Clinics (specialties 169- Freestanding Birthing Centers, 174-Public Health, 183-Comprehensive Outpatient Rehabilitation Facilities (CORF), 195- Community Health Clinics – State Health Division, 196-Special Children's Clinics, 197- Tuberculosis Clinics, 198-Human immunodeficiency virus (HIV) PT 20-Physician, M.D., Osteopath, D.O. PT 22-Dentist.
Claims for procedure code D1355 with dates of service on or after January 1, 2021, through February 7, 2022.	PT 22
Claims for procedure codes D1110 and D1206 that processed on or after February 1, 2019, through February 7, 2022.	PT 20 specialty 170-Maxillofacial Surgery PT 22
Claims for procedure codes D1208 , D4210 , D4211 , D4212 , D4341 , D4342 , D4346 and D4910 that processed on or after February 1, 2019, through February 7, 2022.	PT 20 PT 22

Results of the reprocessed claims appear on remittance advices dated September 2, 2022. When claims are reprocessed, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received. Providers have the right to appeal denied claims, including those denied upon reprocessing. Please refer to Medicaid Services Manual Chapter 100 and the Billing Manual for information concerning the claim appeal process and time frames.