2024 Healthplex dental clinical guidance changes for New York MMC and HARP, effective Jan. 31, 2024

Effective Jan. 31, 2024, clinical criteria for coverage of root canals, crowns, replacement dentures and dental implants contained within the New York State Medicaid Program Dental Policy and Procedure Code Manual ("Dental Manual") will be changed to allow for expanded coverage of previously limited dental services for the following New York Medicaid plans:

- Mainstream Medicaid Managed Care (MMC)
- HIV Special Needs Plans (HIV SNP)
- Health and Recovery Plans (HARP)
- Managed Long Term Care Partial Capitation Plans (MLTCP)
- Program of All Inclusive Care for the Elderly (PACE)

The state of New York has put forth revisions to support maintaining a natural dentition whenever clinically appropriate. Revisions have been made to coverage policies for crowns, root canals and dental implants. Consistent with New York Medicaid guidelines, 8 points of contact will be reviewed for medical necessity.

For current state of New York guidance, go to:

- <u>emedny.org</u> under Dental Provider Communications
- <u>Health.ny.gov</u> for Medicaid information for providers

The state of New York has provided 2 new documents to be completed in entirety and required to be included in a prior authorization review submitted to Healthplex Dental specific to:

- **Prosthodontic**: Providers must submit a <u>Justification of Need for Replacement Prosthesis</u>
 <u>Form</u> with all prior approval requests for replacement denture(s)
- **Implant services:** Providers must submit an <u>Evaluation of the Dental Implant Patient Form</u> with all prior approval requests for all dental implants

The forms are available on <u>UHCdental.com</u> in the Resources page under Healthplex resources.

The following CDT code is a covered benefit as of Jan. 31, 2024:

• **D4249** clinical crown lengthening – hard tissue

