

Memo

To: Anesthesia, ASU, Hospital Ambulatory Surgical Centers, and Hospitals

From: El Paso First Health Plans, Inc.

Date: June 30, 2017

Reminder: THSteps Therapeutic Dental Benefits to Change for Texas Medicaid July 1, 2017

Effective for dates of service on or after July 1, 2017, Texas Health Steps (THSteps) therapeutic dental benefits will change for Texas Medicaid Dental Therapy under General Anesthesia. For clients 6 years of age or younger the following will apply:

- All level 4 deep sedation/general anesthesia administered by a dentist (procedure code D9223) must be prior authorized.
- Any anesthesia services provided by an anesthesiologist (M.D., D.O.) or certified registered nurse (CRNA) to be provided in conjunction with dental therapeutic services (procedure code 00170 with EP modifier) must be prior authorized.
- The dentist performing the therapeutic dental procedure is responsible for obtaining prior authorization from Dental DMO and is responsible for providing the anesthesia prior authorization to the anesthesiology provider.

Prior Authorization Criteria: Requests for prior authorization must include, but is not limited to, the following client-specific documents and information:

- A completed Criteria for Dental Therapy Under General Anesthesia form
- A completed THSteps Dental Mandatory Prior Authorization Request Form
- The location of where the procedure(s) will be performed (office, inpatient hospital, or outpatient hospital)
- A narrative unique to the client, detailing the reasons for the proposed level of anesthesia (indicate procedure code D9223 or 00170). The narrative must include a history of prior treatment, information about failed attempts at other levels of sedation, behavior in the dental chair, proposed restorative treatment (tooth ID and surfaces), urgent need to provide comprehensive dental treatment based on extent of diagnosed dental caries, and any relevant medical condition(s).
- Diagnostic quality radiographs or photographs
 - When appropriate radiographs or photographs cannot be taken prior to general anesthesia. The narrative must support the reasons for an inability to perform diagnostic services. For special cases that receive authorization, diagnostic quality radiographs or photographs will be required for payment and will be reviewed by the TMHP dental director.

The current process of scoring 22 points on the Criteria for Dental Therapy Under General Anesthesia form does not guarantee authorization or reimbursement for clients who are six years of age and younger.

Note: In cases of an emergency medical condition, accident, or trauma, prior authorization is not necessary. However, a narrative and appropriate pre- and post-treatment radiographs or photographs must be submitted with the claim, which will be reviewed by the TMHP dental director.

A copy of the Criteria for Dental Therapy under General Anesthesia form must be maintained in the client's dental record. The client's dental record must be available for review by representatives of the Health and Human Services Commission (HHSC) or its designee. For more information, call the TMHP Contact Center at 1-800-925-9126.

El Paso First Prior Authorization/Claims Processing

El Paso First's claim system does not support the Dental DMO authorization numbering process. El Paso First will need to process its own authorization in order to adjudicate claim reimbursement. This authorization will need to be obtained by the anesthesia, ASU, hospital ambulatory surgical center, or hospital provider performing the therapeutic anesthesia services. Proof of the approved prior authorization obtained from the Dental DMO will be required in order to obtain a prior authorization for general anesthesia from El Paso First. The DMO electronic approval must include:

- 1. Name of member
- 2. Member's Medicaid ID number
- 3. Name of treating dental provider
- 4. Dental therapeutic services authorized
- 5. Place of service
- 6. Expiration date of authorization

Anesthesia, ASU, hospital ambulatory surgical center, or hospital providers must attach or include the El Paso First issued authorization number on claims for reimbursement.

Have questions or concerns? Contact our Provider Relations Team at 915-532-3778 x1507 for assistance Monday thru Friday from 8am - 5pm.