



Network Notification

Notice Date: June 10, 2019
To: Ohio Medicaid Providers
From: CareSource
Subject: 2019 Dental Procedure Code Updates
Effective Date: January 1, 2019

Summary

CareSource would like to inform you of the 2019 dental code updates from Ohio Department of Medicaid (ODM). CareSource is updating our Dental Health Partner Manual to include the 2019 CDT code changes and requirements. In the interim, you can refer to the 2019 codes listed below.

Impact

Providers must follow the effective dates listed in this notification below for appropriate claim processing.

Importance

Following the coding and timing requirements below will help ensure proper claims processing.

CDT Code	Description	Effective Date	Current Max Payment	Previous Max Payment
D0412	Blood glucose level test	01/01/2019	No Coverage	N/A
D1515	Fixed bilateral space maintainer	01/01/2019	Deleted	\$163.28
D1516	Space maintainer – fixed – bilateral, Maxillary	01/01/2019	\$163.28	N/A
D1517	Space maintainer – fixed – bilateral, mandibular	01/01/2019	\$163.28	N/A
D1525	Remove bilateral space maintain	01/01/2019	Deleted	\$133.79
D1526	Space maintainer remove bilateral, maxillary	01/01/2019	\$133.79	N/A
D1527	Space maintainer remove bilateral, mandibular	01/01/2019	\$133.79	N/A
D2929	Prefab porcelain/ceramic crown anterior	01/01/2019	\$153.00	No Coverage
D2929	Prefab porcelain/ceramic crown Posterior	01/01/2019	\$101.92	No Coverage
D5282	Removal unilateral part dent cast met (clasps/teeth), max	01/01/2019	No Coverage	N/A

D5283	Removal unilateral part dent cast met (clasps/teeth) mandibular	01/01/2019	No Coverage	N/A
D5876	Add metal substruct acrylic full dent (per arch)	01/01/2019	No Coverage	N/A
D9130	TMJ dysfunction – non-invasive physical therapies	01/01/2019	No Coverage	N/A
D9613	Infiltration sustain release therapy drug sing/multi sites	01/01/2019	No Coverage	N/A
D9944	Occlusal guard – hard appliance, full arch	01/01/2019	No Coverage	N/A
D9945	Occlusal guard – soft appliance, full arch	01/01/2019	No Coverage	N/A
D9946	Occlusal guard – hard appliance, partial arch	01/01/2019	No Coverage	N/A
D9961	Duplicate/copy patient's records	01/01/2019	No Coverage	N/A
D9990	Certified translation/sign-language service – per visit	01/01/2019	No Coverage	N/A

Education and Resources

Ohio Dental Provider Manual – You can access the Dental Provider Manual by following this link: **CareSource.com** > Provider Overview > Education > Patient Care > [Dental Provider Manual](#)

Electronic Funds Transfer – We encourage our dental providers to enroll in SkyGen (formerly known as Scion) Dental’s Electronic Funds Transfer (EFT) to enjoy efficient and reliable claim payments. Visit <https://pwp.sciondental.com/PWP/Landing> to enroll.

Provider Portal – CareSource offers a Dental Provider Web Portal. Just log in to the CareSource Provider Portal at **CareSource.com** > Login > [Provider](#), select your state, and login in. Once you are logged in, click the “Dental Provider Login” link on the left. The portal can also be accessed directly by visiting <https://pwp.sciondental.com/PWP/Landing>.

You will need a username and password in order to access the portal.

The time-saving functions of the Dental Provider Web Portal allow you to:

- Verify member eligibility
- View member service history, covered benefits and fee schedules
- Create a member eligibility calendar and view real-time eligibility for multiple members
- View authorization guidelines and required documentation prior to submitting authorizations
- Submit authorizations with attachments for faster determinations

For questions about the Dental Provider Web Portal, contact the web portal team at Dentalproviderportal@skygenusa.com or call 1-855-434-9239.

Prior Authorization – Our dental providers can submit prior authorization requests in the following ways:

Online:

<https://pwp.sciondental.com/PWP/Landing>

Paper:

CareSource
OH Authorizations
P.O. Box 314
Milwaukee, WI 53201

Questions?

For questions, please contact Provider Services at **1-800-488-0134** (Monday to Friday, 8 a.m. to 6 p.m. Eastern Standard Time).

OH-P-1630