



June 30, 2017

Web Announcement 1404

Attention Provider Type 22 (Dentist):

Changes Regarding Dental Services for Medicaid Managed Care Recipients

Effective **July 1, 2017**, the dental services provided to Medicaid Managed Care recipients in urban Clark and urban Washoe counties will no longer be managed by the current Managed Care Organizations (MCO). As of **July 1, 2017**, dental services and claims will be managed through Fee-for-Service (FFS) until a Dental Benefits Administrator (DBA) can be selected to manage dental services. The Division of Health Care Financing and Policy (DHCFP) is currently in the process of selecting a DBA to serve eligible recipients in the mandatory MCO coverage areas of urban Clark and urban Washoe counties.

Dental procedures for dates of service on or after July 1, 2017, that require a prior authorization (PA) under the FFS program need to have an approved PA from DXC Technology (which is referred to as Nevada Medicaid effective June 26, 2017) for the claims to be paid.

Instructions for requesting prior authorizations are located on the Nevada Medicaid provider website at www.medicaid.nv.gov in the [Billing Guidelines](#) for Provider Type 22 (Dentist). Providers are also referred to the Coverage, Limitations and Prior Authorization Requirements (Attachment A of the Billing Guidelines for PT22) for PA requirements and frequency limitations. Authorizations may be viewed in the Electronic Verification System (EVS), which is accessed through the Nevada Medicaid Provider Web Portal.

Dental Requests

- Use the ADA Claim Form and list all dental procedures.
- X-rays are recommended and can save time with the review process when submitted for dental services including, but not limited to:
 - Anchors for partial dentures
 - Restorative services being provided under pregnancy-related services
- Do not submit original X-rays, as they will not be returned.

Requests for review for medical necessity may be submitted either by mail or fax.

Coming soon providers may submit requests for review through the Provider Web Portal. Check for future web announcements addressing this Provider Web Portal upgrade at www.medicaid.nv.gov. Please see below for address and fax number. X-rays and photographs must be of diagnostic quality, so faxing is not recommended.

Providers must use the Treatment History search function in the Provider Web Portal to view claim history for dental procedures that have limitations. See [Web Announcement 1261](#) regarding the FFS dental history search available through the Provider Web Portal.

For questions, please call the Nevada Medicaid Prior Authorization Department at (800) 525-2395.

For provider training, please contact the Nevada Provider Training Department by sending an email to nevadaprovidertraining@dxc.com.

Prior Authorization for Dental Contacts:

Mailing Address:

Nevada Medicaid
"Dental PA"
P.O. Box 30042
Reno, NV 89520-3042
Phone: (800) 525-2395
Dental Fax: (855) 709-6848

Customer Service Center

Claim inquiries and general information: call (877) 638-3472

Mailing Address:

Nevada Medicaid
Customer Service
P.O. Box 30042
Reno, NV 89520-3042