

About the South Dakota Medicaid Third Molar Extractions Referral

A few years ago, SD Medicaid started enforcing their rules about proving medical necessity for the removal of third molars (wisdom teeth). As an oral surgeon provider, we are required to submit this form filled out by the general dentist, along with a predetermination request, prior to scheduling surgery. If filled out incorrectly or inaccurately it may result in only partial approval or possibly even a complete denial of coverage for the patient.

From the SD Medicaid billing and policy manual (for both adult and children dental services):

- Extractions of third molars must be medically necessary. General dentists should use the Third Molar Referral form when referring patients with Medicaid for third molar extractions. While this form does not replace documentation in the patient's clinical notes, it can act as a mechanism for referring patients with sufficient information about why the referral is being made. The oral surgeon can then submit a predetermination request with support for the medical necessity requirement. The Third Molar Referral Form is available in an electronic, fillable version by sending a request to sdmedicaid@deltadentalsd.com.
- Extraction of asymptomatic teeth is not covered. The following may be exceptions:
 - Teeth which are involved with a cyst, tumor, or other neoplasm.
 - Extraction of all remaining teeth in preparation for a full prosthesis.
 - Misaligned tooth that causes intermittent gingival inflammation.
 - Radiographically visible pathology that fails to elicit symptoms.

How to fill out the form

Please fill out the top part with necessary information.

Then the dentist can assign the corresponding Reason Code (A-H) from the middle section in the space next to the tooth numbers at the bottom of the page.

- Please note that reason code G (prophylactic measure) will automatically be denied by Medicaid if it is the only reason for extraction. Patients who fall into this category will either need to have their wisdom teeth monitored by your office/dentist at routine check-ups and referred to us once wisdom teeth become symptomatic, or they will be required to pay in full for extractions at our office.
- We occasionally receive these forms with reason code H selected with the additional diagnosis of "pain." This information is not specific enough and will be denied by Medicaid.

See the attached example using "Mickey Mouse."

Please do not put any CDT/ADA dental codes on this form. Dr. Williams will assign Dental codes to the extractions.

The dentist/referring office is simply looking at clinical notes and telling our office **why** the patient is being referred for wisdom tooth extractions.

THIRD MOLAR EXTRACTIONS REFERRAL
South Dakota Medicaid / Affordable Care Act (ACA)

Patient Name: Micky Mouse DOB: 11/18/1928

Recipient/Insurance ID: 001234567

Parent or Guardian (for minors): _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Referring Office Name: Dental Clinic

Referring Dentist: Dentist's name

Date of Referral: _____

REASON FOR REFERRAL

- | <u>Code</u> | <u>Diagnosis</u> |
|-------------|--|
| A: | Cellulitis (pericoronitis) or abscess, may be associated with tooth in oral communication lacking space for normal eruption. |
| B: | Non-treatable (or not covered) severe caries, pulpal pathology, fractured tooth. |
| C: | Severe periodontitis or periapical pathology. |
| D: | Associated cysts or neoplasms or other radiographic pathology. |
| E: | Internal or external resorption of tooth or adjacent teeth. |
| F: | Misaligned tooth causing acute or chronic inflammation, or impaired orofacial function. |
| G: | Prophylactic measure (which alone does not constitute medical necessity) |
| H: | Other (must describe) |

Indicate the teeth to be extracted along with the diagnostic code reason to remove the tooth. Each tooth must be listed separately based on each individual diagnosis.

Extract #1: F Additional Diagnosis: _____
(code)

Extract #16: F Additional Diagnosis: _____
(code)

Extract: #17: A, F Additional Diagnosis: _____
(code)

Extract: #32: C Additional Diagnosis: _____
(code)

****Referral does not guarantee coverage. Extraction of third molars must be medically necessary.****