October 1, 2018

ATTENTION: Dental Providers

FROM: South Dakota Medicaid

RE: Adult $1,000 Annual Dental Maximum

South Dakota Medicaid is reminding providers of key points regarding the adult $1,000 annual maximum policy. The $1,000 maximum applies to the plan year starting July 1 and ending June 30. The limit only applies to adults age 21 and older.

Tracking
Providers should determine if the recipient will exceed the $1,000 yearly maximum at the time of treatment plan development. Please submit claims promptly to ensure that the $1,000 maximum is tracked accurately. Providers can help recipients track the $1,000 maximum through the following mechanisms:

• Call Delta Dental’s Call Center at 877-841-1478; or
• Use the Delta Dental’s website www.deltadentalsd.com and populate your log-in information, the recipient’s ID number, and the recipient’s date of birth.

Exempt Services
The following services are exempt from the $1,000 maximum:

• Emergent dental services when submitted with supporting notes/documentation;
• Approved dentures, partial dentures, and interim dentures;
• Alveoplasty/Alveolectomy; and
• The first two exams, two cleanings, and two x-rays each year (July 1 – June 30).

Billing
Once the $1,000 maximum is reached, the recipient is financially responsible for any additional costs. These additional costs should be billed at the Medicaid rates for covered services. Non-covered services may be billed to the recipient at the provider’s usual and customary charge. If a patient reaches the $1,000 maximum it is recommended to have the patient sign a waiver/consent for treatment indicating they are responsible for the cost of the services not reimbursed by Medicaid dental coverage.
Please see the South Dakota Medicaid Dental Provider Manual for additional information regarding the $1,000 maximum. Any questions regarding the $1,000 maximum should be directed to Delta Dental at 1-877-841-1478.

Sincerely,

South Dakota Medicaid