August 28, 2020

Dear Vermont Medicaid Dental Provider:

The Department of Vermont Health Access (DVHA) would like to thank you for your participation in Vermont Medicaid’s dental program. DVHA is appreciative of your efforts to provide dental care to the pediatric and adult populations of our state.

Act 72 was signed into Vermont law on June 18, 2019, which modified the adult dental benefit. Here is a list of the adult dental benefit changes effective January 1, 2020:

1. The annual dental cap increased from $510 to $1,000 per calendar year.

2. The preventative visit codes listed below may be utilized twice per year without affecting the cap.
   - D0120 Periodic Oral Evaluation
   - D1110 Adult Prophylaxis
   - D1206 Topical Application of Fluoride Varnish
   - D1208 Topical Application of Fluoride
   - D1320 Tobacco Cessation Counseling

3. A co-payment does not apply to preventative dental visits.

Prior Authorization for the codes listed above is no longer required. Additional services may be provided if deemed medically necessary and should include concise medical documentation that provides and supports clinical determination and evidence to support medical necessity for additional dental services. Such documentation should be evident in the medical record. For example: Post payment clinical audits would expect medical documentation such as: pocket depth inflammation, excessive plaque, and calculus. These are examples and do not represent an all-inclusive list.

Thank you for your continued participation in the Vermont Medicaid Dental Program.

Sincerely,

[Signature]

Scott Strenio MD
Chief Medical Officer