



AmeriHealth Caritas
District of Columbia

To:	AmeriHealth Caritas DC Dental Providers
Date:	May 5, 2020
Subject:	Billing Update for Teledentistry Encounters

On May 1, 2020, the District of Columbia Department of Health Care Finance (DHCF) released information regarding billing changes for teledentistry appointments. The changes pertain to the codes D9995, D0140, and D0170. AmeriHealth Caritas District of Columbia will follow DHCF’s guidelines. Based on the guidelines, the reimbursement fee for D9995 will be \$0 and the reimbursement fees for D0140 and D0170 will remain the same as currently on the AmeriHealth Caritas DC Fee Schedule. Please see the notification from DHCF below.

Department of Health Care Finance Informational Bulletin

DATE: May 1, 2020
FROM: Lisa Truitt
Director, Health Care Delivery Management Administration
SUBJECT: **Billing for Teledentistry Encounters**

The purpose of this Informational Bulletin is to inform all Medicaid managed care organizations (MCOs) contracted with the District of Columbia (DC) Department of Health Care Finance (DHCF) of the process for Medicaid dental providers to bill for DC Medicaid beneficiaries via teledentistry. This Informational Bulletin applies to all DHCF contracted Medicaid MCOs and the Child and Adolescent Supplemental Security Income Program (CASSIP) Contractor, hereinafter referred to as MCO.

DHCF is committed to ensuring DC Medicaid beneficiaries have access to oral health services during the COVID-19 public health emergency (PHE). As part of recent temporary changes due to the PHE, DHCF is also covering teledentistry. DHCF will reimburse enrolled dental providers for teledentistry services. The Emergency Rule is effective for 120 days, until July 10, 2020, unless DHCF supersedes it by publishing a Notice of Final Rulemaking in the DC Register¹. The expansion of coverage will allow the enrolled dental providers to provide oral health assessments, to triage beneficiaries, and to disseminate oral health education to beneficiaries at a remote location. Additionally, it will allow the oral health workforce to utilize innovative

¹ Medicaid Reimbursable Telemedicine Services Notice of Emergency and Proposed Rulemaking. (<https://www.dc-medicaid.com/dcwebportal/documentInformation/getDocument/23216>).

methods to determine if the beneficiary's assessment requires urgent or emergent care.

The Centers for Medicare & Medicaid Services (CMS) and the Office for Civil Rights (OCR) issued guidance regarding the HIPAA requirements and the use of telehealth remote communications during the COVID-19 PHE². Dental providers may render provider-to-patient teledentistry services via synchronous, live audio and video transmission. Dental providers using teledentistry to triage patients or offering an oral health evaluation to determine if the oral health condition is urgent or emergent shall use the following Current Dental Terminology (CDT) codes for reimbursement and to document the services in the beneficiary's dental record:

Oral Evaluations:

D0140 Limited Oral Evaluation – Problem focused. An evaluation limited to a specific oral health problem or complaint. This may require interpretation of information acquired through additional diagnostic procedures. Report additional diagnostic procedures separately. Definitive procedures may be required on the same date as the evaluation; and

D0170 Re-evaluation – Limited, Problem focused (Established patient; Not post-operative visit). Assessing the status of a previously existing condition. A traumatic injury where no treatment was rendered but patient needs follow-up monitoring; evaluation for undiagnosed continuing pain; soft tissue lesion requiring follow-up evaluation.

Dental providers rendering services in a teledentistry environment will report the appropriate teledentistry code in addition to the oral health evaluation codes cited above. The CDT code for synchronous teledentistry is:

D9995 Teledentistry – synchronous; real-time encounter. (Reported in addition to other procedures (e.g., diagnostic) delivered to the patient on the date of service.)

NOTE: Currently, the D9995 code *is not covered by DC Medicaid*. However, the reporting of this CDT code will allow the documentation of the methods rendered to evaluate the beneficiary when the dentist and beneficiary are not in the same physical location. The D9995 code will be reimbursed at \$0 for reporting purposes.

Up-to-date information can be found on the District's official website for the

² “Notification of Enforcement Discretion for Telehealth Remote Communications During the COVID-19 Nationwide Public Health Emergency.” Office of Civil Rights, March 30, 2020. (<https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html>).



Coronavirus: <http://dchealth.dc.gov/coronavirus>. More information may be made available via DHCf Transmittal.

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