

Summary of Benefits Report for Alabama, Medicaid InsureKidsNow.gov

Preventive Services				
	Is the service Covered?	Frequency	List any service - specific limitations	
Cleanings	Yes	2 x year	Ages 0-20. See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Fluoride treatments (including fluoride varnishes)	Yes	2 x year	0-20, PROVISION BY HYGEINEST MUST BE UNDER SUPERVISION OF DENTIST. See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Sealants (list any tooth-specific limits)	Yes	1 x lifetime	AGE 5 TO 14 - COVERED ONLY FOR TEETH (02, 03, 14, 15, 18, 19, 30, 31) LIMIT ONE PER TOOTH PER LIFETIME. See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Space maintainers	Yes - only with prior authorization	1 x lifetime	See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Diagnostic Services				
	Is the service Covered?	Frequency	List any service - specific limitations	Recommended age of first visit ?
Oral health screening or assessment	Yes	1 x year	See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Dental examinations	Yes	2 x year	See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	1
Assessment of risk for tooth decay	Yes	2 x year	See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
X-Rays				
Bitewing	Yes	1 x year	See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	

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Diagnostic Services				
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Full Mouth	Yes	1 x every 3 years	See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Panoramic	Yes	1 x every 3 years	See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Treatment Services				
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Anti-microbial treatments that stop decay from spreading	No			
Fillings				
Silver amalgam	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Tooth colored composite	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Crowns/tooth caps				
Stainless steel crowns	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Metal (only) crowns	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Metal/porcelain crowns	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	

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Porcelain (only) crowns	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Root Canals (endodontics)				
Root canals on baby teeth (pulpotomies)	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Root canals on permanent teeth	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Gum (periodontal) therapy	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Dentures				
Partial dentures	Yes - only with prior authorization		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Complete dentures	Yes - only with prior authorization		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Bridges	Yes - only with prior authorization		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Orthodontics*				
Retainers (orthodontic)	Yes - only with prior authorization		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	

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Braces	Yes - only with prior authorization		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Oral surgery				
Simple extractions	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Surgical extractions	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Care of abscesses	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Cleft palate treatment	Yes - only with prior authorization		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Cancer treatment	No			
Treatment of fractures	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Biopsies	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Treatment of jaw joint problems (TMJ)	Yes - only with prior authorization		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Emergency room services provided by a dentist	Yes		Treatment of natural teeth	Accidental injury; Illness

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Inpatient Hospital Services	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Anesthesia				
General anesthesia	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Intravenous conscious sedation	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	
Non-intravenous conscious sedation	No			
Analgesia (nitrous oxide)	Yes		See Provider Billing Manual for limitations: https://medicaid.alabama.gov/content/Gated/7.6.1G_Provider_Manuals/7.6.1.1G_Jan_2024/Jan24_13.pdf	Documentation of medical necessity

* When this information is posted on the Insure Kids Now website, we will include a special note for orthodontic services explaining that parents and caretakers should work with their child's orthodontist to ensure that the treatment and payment terms and conditions are clear at the outset of treatment (for example, what happens in the case of a child who becomes ineligible for Medicaid or CHIP while he or she is undergoing orthodontic treatment?).