

Summary of Benefits Report for Alabama, CHIP

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Preventive Services				
	Is the service Covered?	Frequency	List any service - specific limitations	
Cleanings	Yes	2 x year		
Fluoride treatments (including fluoride varnishes)	Yes	2 x year	Provision by hygienist must be under supervision of dentist. Fluoride treatments can also be provided by approved medical providers for enrollees 6 months to 36 months of age.	
Sealants (list any tooth-specific limits)	Yes	1 x year	For teeth 2, 3, 14, 15, 18, 19, 30 & 31	
Space maintainers	Yes			
Diagnostic Services				
	Is the service Covered?	Frequency	List any service - specific limitations	Recommended age of first visit ?
Oral health screening or assessment	No			
Dental examinations	Yes	2 x year		3
Assessment of risk for tooth decay	No			
X-Rays				
Bitewing	Yes	2 x year		
Full Mouth	Yes	1 x every 3 years		
Panoramic	Yes	1 x every 3 years		
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			
Tooth colored composite	Yes			
Crowns/tooth caps				
Stainless steel crowns	Yes		Will replace every 5 years	
Metal (only) crowns	Yes		Will replace every 5 years	
Metal/porcelain crowns	Yes		Will replace every 5 years	
Porcelain (only) crowns	Yes		Will replace every 5 years	
Root Canals (endodontics)				
Root canals on baby teeth (pulpotomies)	Yes			
Root canals on permanent teeth	Yes			
Gum (periodontal) therapy	Yes			
Dentures				
Partial dentures	Yes			
Complete dentures	Yes			

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Treatment Services				
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Bridges	Yes			
Orthodontics*				
Retainers (orthodontic)	Yes		Retainers are covered as a medical benefit as a part of an orthodontia treatment plan for certain medical conditions. See list of qualifying conditions below.	
Braces	Yes			Benefits for orthodontia services are only provided for the following conditions: cleft palate or cleft lip deformities, cleft lip and alveolar process involvement, veropharyngeal incompetence, short palate, submucous cleft, alveolar notch, or trauma, disease or dysplasias resulting in significant facial growth impact or jaw deformity, craniofacial anomalies, including, but not limited to, hemifacial microsomia, craniostyostosis syndrome, Marfan's syndrome, Apert's syndrome, Crouzon's syndrome, or other syndromes by review.
Oral surgery				
Simple extractions	Yes			
Surgical extractions	Yes			
Care of abscesses	Yes			
Cleft palate treatment	Yes		Covered as a medical benefit	
Cancer treatment	Yes		Covered as a medical benefit	
Treatment of fractures	Yes		Covered as a medical benefit	
Biopsies	Yes		Covered as a medical benefit	
Treatment of jaw joint problems (TMJ)	Yes		Covered as a medical benefit	
Emergency room services provided by a dentist	Yes		Covered as a medical benefit	

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Treatment Services				
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Inpatient Hospital Services	Yes			For purposes of anesthesia administration for children aged 8 years and younger or enrollees who meet medical necessity
Anesthesia				
General anesthesia	Yes			
Intravenous conscious sedation	Yes			
Non-intravenous conscious sedation	Yes			
Analgesia (nitrous oxide)	Yes			

* 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?).