

Summary of Benefits Report for Michigan, Medicaid InsureKidsNow.gov

Preventive Services				
	Is the service Covered?	Frequency	List any service - specific limitations	
Cleanings	Yes	1 x 6 months		
Fluoride treatments (including fluoride varnishes)	Yes		<p>Topical application of fluoride is a benefit for beneficiaries 6 years of age up to 21 once every six months and cannot be combined with topical application of fluoride varnish within the same six months.</p> <p>Topical application of fluoride varnish is a benefit for beneficiaries under age 21. Frequency and parameters vary based on the age of the beneficiary as noted below: Ages 0 through 5: Four times per 12 months as a therapeutic application for all children. Ages 6 through 20: One time per six months and cannot be combined with topical application of non-varnish fluoride within the same six months.</p>	
Sealants (list any tooth-specific limits)	Yes	1 x every 3 years	<p>Coverage is limited to fully erupted permanent first and second molars (2, 3, 14, 15, 18, 19, 30, 31), fully erupted first and second primary molars (A, B, I, J, K, L, S, T) and fully erupted first and second permanent premolars (4, 5, 12, 13, 20, 21, 28, 29).</p>	
Space maintainers	Yes	1 x every 2 years	Age 0-13	
Diagnostic Services				
	Is the service Covered?	Frequency	List any service - specific limitations	Recommended age of first visit ?
Oral health screening or assessment	Yes			
Dental examinations	Yes	1 x 6 months		First 6 months of the eruption of the first primary tooth.
Assessment of risk for tooth decay	No			
X-Rays				
Bitewing	Yes	1 x year		
Full Mouth	Yes	1 x every 5 years		
Panoramic	Yes	1 x every 5 years	Age 5 years and older	
Treatment Services				
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Anti-microbial treatments that stop decay from spreading	Yes		Silver Diamine Fluoride	
Fillings				
Silver amalgam	Yes			
Tooth colored composite	Yes			
Crowns/tooth caps				

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Treatment Services				
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Stainless steel crowns	Yes		Stainless steel crowns are covered for primary teeth and permanent molars. Stainless steel crowns with resin windows are covered for anterior primary teeth. Stainless steel crowns are covered only once per two years.	
Metal (only) crowns	Yes		Metal crowns only on molars.	
Metal/porcelain crowns	Yes		Porcelain and porcelain fused to metal crowns (indirect) are covered for permanent first and second premolars, canines, and incisors	
Porcelain (only) crowns	Yes		Porcelain and porcelain fused to metal crowns (indirect) are covered for permanent first and second premolars, canines, and incisors	
Root Canals (endodontics)				
Root canals on baby teeth (pulpotomies)	Yes		Age 0-13	
Root canals on permanent teeth	Yes			
Gum (periodontal) therapy	Yes - only with prior authorization			
Dentures				
Partial dentures	Yes		Once every 5 years	
Complete dentures	Yes		Once every 5 years	
Bridges	Yes - only with prior authorization		CSHCS Only	
Orthodontics*				
Retainers (orthodontic)	Yes		CSHCS Only	
Braces	Yes		CSHCS Only	
Oral surgery				
Simple extractions	Yes			
Surgical extractions	Yes			
Care of abscesses	Yes			
Cleft palate treatment	Yes		CSHCS Only	
Cancer treatment	No			
Treatment of fractures	Yes			

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Treatment Services				
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Biopsies	No			
Treatment of jaw joint problems (TMJ)	No			
Emergency room services provided by a dentist	Yes			
Inpatient Hospital Services	Yes			
Anesthesia				
General anesthesia	Yes			
Intravenous conscious sedation	Yes			
Non-intravenous conscious sedation	Yes			
Analgesia (nitrous oxide)	No			

* 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?).