Summary of Benefits Report for Michigan, CHIP InsureKidsNow.gov

Preventive Service	es				
	Is the service Covered?	Frequency	List any service - specific limitations		
Cleanings	Yes	1 x 6 months			
Fluoride treatments (including fluoride varnishes)	Yes		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.		
			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.		
Sealants (list any tooth-specific limits)	Yes	1 x every 3 years	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).		
Space maintainers	Yes	1 x every 2 years	Age 0-13 years		
Diagnostic Service	es				
_	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 first tooth eruption.	
Assessment of risk for tooth decay	No				
X-Rays					
Bitewing	Yes	1 x year			
Full Mouth	Yes	1 x every 5 years			
Panoramic Treatment Service	Yes •s	1 x every 5 years			
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage	
Anti-microbial treatments that stop decay from spreading	Yes		SDF		
Fillings					
Silver amalgam	Yes				
Tooth colored composite	Yes				
Crowns/tooth caps					
Stainless steel crowns	Yes				
Metal (only) crowns	Yes				
Metal/porcelain crowns	Yes				

Page 1 of 2 Data as of: 02/05/2024 Print date: 03/25/2024

Summary of Benefits Report for Michigan, CHIP InsureKidsNow.gov

Treatment Services						
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage		
Porcelain (only) crowns	Yes					
Root Canals (endodo	ntics)					
Root canals on baby teeth (pulpotomies)	Yes		Age 0-13 years			
Root canals on permanent teeth	Yes					
Gum (periodontal) therapy	Yes - only with prior authorization					
Dentures	1					
Partial dentures	Yes					
Complete dentures	Yes					
Bridges	Yes		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					
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					

Page 2 of 2 Data as of: 02/05/2024 Print date: 03/25/2024

^{*} 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?).