

Summary of Benefits Report for Nevada, CHIP

InsureKidsNow.gov

Preventive Services

	Is the service Covered?	Frequency	List any service - specific limitations
Cleanings	Yes	1 x 6 months	Ages 0 - 20
Fluoride treatments (including fluoride varnishes)	Yes	1 x 6 months	Ages 0 - 20
Sealants (list any tooth-specific limits)	Yes	1 x lifetime	Ages 0 - 20
Space maintainers	Yes	2 x year	Ages 0 - 20

Diagnostic Services

	Is the service Covered?	Frequency	List any service - specific limitations	Recommended age of first visit ?
Oral health screening or assessment	Yes	2 x year	Ages 0 - 20	
Dental examinations	Yes	1 x year	Ages 0 - 20	Eruption of first tooth and no later than 12 months
Assessment of risk for tooth decay	Yes - only with prior authorization	2 x year	Ages 0 - 20	

X-Rays

Bitewing	Yes	1 x 6 months	Ages 0 - 20	
Full Mouth	Yes	1 x year	Ages 0 - 20	
Panoramic	Yes	1 x every 3 years	Ages 0 - 20	

Treatment Services

	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Anti-microbial treatments that stop decay from spreading	Yes		1 x year Ages 0 - 20	
Fillings				
Silver amalgam	Yes		1 x every 3 years Ages 0 - 20	
Tooth colored composite	Yes		1 x every 3 years Ages 0 - 20	
Crowns/tooth caps				
Stainless steel crowns	Yes		1 x every 3 years - Primary teeth Ages 0 - 20 1 x lifetime - Permanent teeth Ages 0 - 20	
Metal (only) crowns	Yes		1 x lifetime Ages 0 - 20	
Metal/porcelain crowns	Yes		1 x lifetime Ages 0 - 20	
Porcelain (only) crowns	No			
Root Canals (endodontics)				
Root canals on baby teeth (pulpotomies)	Yes		1 x lifetime Ages 0 - 20	
Root canals on permanent teeth	Yes		1 x lifetime Ages 0 - 20	
Gum (periodontal) therapy	Yes		1 x year Ages 0 - 20	

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Treatment Services				
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Dentures				
Partial dentures	Yes		1 x every 5 years	
Complete dentures	Yes		1 x every 5 years	
Bridges	No			
Orthodontics*				
Retainers (orthodontic)	Yes - only with prior authorization		1 x lifetime Ages 0 - 20	
Braces	Yes - only with prior authorization		1 x lifetime Ages 0 - 20	Must meet medical necessity requirements
Oral surgery				
Simple extractions	Yes		1 x lifetime per tooth	
Surgical extractions	Yes		1 x lifetime per tooth	
Care of abscesses	Yes		1 x lifetime per tooth	
Cleft palate treatment	Yes		1 x lifetime per tooth	
Cancer treatment	Yes		1 x lifetime per tooth	
Treatment of fractures	Yes - only with prior authorization			
Biopsies	Yes			
Treatment of jaw joint problems (TMJ)	Yes			
Emergency room services provided by a dentist	Yes			
Inpatient Hospital Services	Yes - only with prior authorization			
Anesthesia				
General anesthesia	Yes		5 units/day	
Intravenous conscious sedation	Yes		5 units/day	
Non-intravenous conscious sedation	Yes		6 units per 12 rolling months	
Analgesia (nitrous oxide)	Yes		6 units per 12 rolling months	

* 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?).