

# Summary of Benefits Report for Nevada, CHIP

## InsureKidsNow.gov

<b>Preventive Services</b>				
	<b>Is the service Covered?</b>	<b>Frequency</b>	<b>List any service - specific limitations</b>	
<b>Cleanings</b>	Yes	1 x 6 months	Ages 0 - 20	
<b>Fluoride treatments (including fluoride varnishes)</b>	Yes	1 x 6 months	Ages 0 - 20	
<b>Sealants (list any tooth-specific limits)</b>	Yes	1 x lifetime	Ages 0 - 20	
<b>Space maintainers</b>	Yes	2 x year	Ages 0 - 20	
<b>Diagnostic Services</b>				
	<b>Is the service Covered?</b>	<b>Frequency</b>	<b>List any service - specific limitations</b>	<b>Recommended age of first visit ?</b>
<b>Oral health screening or assessment</b>	Yes	2 x year	Ages 0 - 20	
<b>Dental examinations</b>	Yes	1 x year	Ages 0 - 20	Eruption of first tooth and no later than 12 months
<b>Assessment of risk for tooth decay</b>	Yes - only with prior authorization		Ages 0 - 20	
<b>X-Rays</b>				
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	
<b>Treatment Services</b>				
	<b>Is the service Covered?</b>	<b>Frequency</b>	<b>List any service - specific limitations</b>	<b>Criteria for coverage</b>
<b>Anti-microbial treatments that stop decay from spreading</b>	Yes		1 x year Ages 0 - 20	
<b>Fillings</b>				
Silver amalgam	Yes		1 x every 3 years Ages 0 - 20	
Tooth colored composite	Yes		1 x every 3 years Ages 0 - 20	
<b>Crowns/tooth caps</b>				
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			
<b>Root Canals (endodontics)</b>				
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	
<b>Gum (periodontal) therapy</b>	Yes		1 x year Ages 0 - 20	

## Summary of Benefits Report for Nevada, CHIP InsureKidsNow.gov

<b>Treatment Services</b>				
	<b>Is the service Covered?</b>	<b>Frequency</b>	<b>List any service - specific limitations</b>	<b>Criteria for coverage</b>
<b>Dentures</b>				
Partial dentures	Yes		1 x every 5 years	
Complete dentures	Yes		1 x every 5 years	
Bridges	No			
<b>Orthodontics*</b>				
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
<b>Oral surgery</b>				
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			
<b>Treatment of jaw joint problems (TMJ)</b>	Yes			
<b>Emergency room services provided by a dentist</b>	Yes			
<b>Inpatient Hospital Services</b>	Yes - only with prior authorization			
<b>Anesthesia</b>				
General anesthesia	Yes		5 units/day	
Intravenous conscious sedation	Yes		5 units/day	
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?).