Summary of Benefits Report for Tennessee, Medicaid InsureKidsNow.gov

Preventive Servic	es			
	Is the service Covered?	Frequency	List any service - specific limitations	
Cleanings	Yes	1 x 6 months	D1120 age limitation 13-20, D1110 age limitation 0-12	
Fluoride treatments (including fluoride varnishes)	Yes	1 x 6 months	D1206 age limitation 1-20, D1208 age limitation 4-20	
Sealants (list any tooth-specific limits)	Yes	1 x lifetime	Age limitation 5-15, teeth covered 2, 3, 14, 15, 18, 19, 30 & 31	
Space maintainers	Yes	1 x lifetime	Age limitation 2-20	
Diagnostic Servic	es			
	Is the service Covered?	Frequency	List any service - specific limitations	Recommended age of first visit ?
Oral health screening or assessment	No			
Dental examinations	Yes	1 x 6 months	Age limitation 0-20	
Assessment of risk for tooth decay	No			
X-Rays				
Bitewing	Yes	1 x year	Age limitation 2-20	
Full Mouth	Yes	1 x every 3 years	Age limitation 6-20	
Panoramic	Yes	1 x every 3 years	Age limitation 6-20	
Treatment Service	es		-	
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Anti-microbial treatments that stop decay from spreading	Yes		For interim caries arresting medicament application, D1354 4 per lifetime per tooth; 6 teeth max per day Age limitation 0-20	
Fillings			-1	
Silver amalgam	Yes		1 x every 3 years	
Tooth colored composite	Yes		1 x every 3 years	
Crowns/tooth caps			-1	
Stainless steel crowns	Yes		1 x every 3 years; age limitations	
Metal (only) crowns	Yes - only with prior authorization		1 x every 5 years; Authorization Required; age limitation depending on tooth number	
Metal/porcelain crowns	Yes - only with prior authorization		1 x every 5 years; Authorization Required; age limitation depending on tooth number	

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Treatment Service	Treatment Services					
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage		
Porcelain (only) crowns	Yes - only with prior authorization		1 x every 5 years; Authorization Required; age limitation depending on tooth number			
Root Canals (endodo	ntics)		1			
Root canals on baby teeth (pulpotomies)	Yes		1 x lifetime			
Root canals on permanent teeth	Yes - only with prior authorization		1 x lifetime; age limitation 6-20; Authorization Required			
Gum (periodontal) therapy	Yes - only with prior authorization		Authorization Required			
Dentures						
Partial dentures	Yes - only with prior authorization		1 x 5 years; Authorization Required; age limitations 8-20			
Complete dentures	Yes - only with prior authorization		1 x 5 years; Authorization Required; age limitations 18-20			
Bridges	Yes - only with prior authorization		1 x 5 years; Authorization Required; age limitations depending on tooth number			
Orthodontics*						
Retainers (orthodontic)	Yes - only with prior authorization		Authorization Required; age limitation 12-20			
Braces	Yes - only with prior authorization		Authorization Required; age limitations 6-20			
Oral surgery						
Simple extractions	Yes					
Surgical extractions	Yes - only with prior authorization		Authorization Required; age limitations 6-20			
Care of abscesses	Yes					
Cleft palate treatment	Yes					
Cancer treatment	Yes					
Treatment of fractures	Yes					
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						

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Treatment Services						
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage		
General anesthesia	Yes - only with prior authorization					
Intravenous conscious sedation	Yes - only with prior authorization					
Non-intravenous conscious sedation	Yes - only with prior authorization					
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?).