

Summary of Benefits Report for Kentucky, CHIP

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Preventive Services

	Is the service Covered?	Frequency	List any service - specific limitations
Cleanings	Yes	2 x year	Additional through EPSDT
Fluoride treatments (including fluoride varnishes)	Yes	2 x year	Additional through EPSD
Sealants (list any tooth-specific limits)	Yes	up to 4 x year	Additional through EPSDT
Space maintainers	Yes	2 x year	Additional through EPSDT

Diagnostic Services

	Is the service Covered?	Frequency	List any service - specific limitations	Recommended age of first visit ?
Oral health screening or assessment	Yes		Additional through EPSDT	
Dental examinations	Yes		Additional through EPSDT	Age 3 and up
Assessment of risk for tooth decay	Yes		Additional through EPSDT	

X-Rays

Bitewing	Yes	up to 4 x year	Additional through EPSDT	
Full Mouth	Yes	1 x year	Additional through EPSDT	
Panoramic	Yes	1 x year	Additional through EPSDT	

Treatment Services

	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Anti-microbial treatments that stop decay from spreading	Yes		Additional through EPSDT	
Fillings				
Silver amalgam	Yes		Additional through EPSDT	
Tooth colored composite	No		Additional through EPSDT	
Crowns/tooth caps				
Stainless steel crowns	Yes		Additional through EPSDT	
Metal (only) crowns	Yes		Additional through EPSDT	
Metal/porcelain crowns	Yes		Additional through EPSDT	
Porcelain (only) crowns	Yes		Additional through EPSDT	
Root Canals (endodontics)				
Root canals on baby teeth (pulpotomies)	Yes		Additional through EPSDT	
Root canals on permanent teeth	Yes		Additional through EPSDT	
Gum (periodontal) therapy	Yes		Additional through EPSDT	

Dentures

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Treatment Services				
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Partial dentures	Yes		Additional through EPSDT	
Complete dentures	Yes		Additional through EPSDT	
Bridges	Yes		Additional through EPSDT	
Orthodontics*				
Retainers (orthodontic)	Yes - only with prior authorization		Additional through EPSDT	
Braces	Yes - only with prior authorization		Additional through EPSD	
Oral surgery				
Simple extractions	Yes		Additional through EPSDT	
Surgical extractions	Yes		Additional through EPSDT	
Care of abscesses	Yes		Additional through EPSDT	
Cleft palate treatment	Yes		Additional through EPSDT	
Cancer treatment	Yes		Additional through EPSDT	
Treatment of fractures	Yes		Additional through EPSDT	
Biopsies	Yes		Additional through EPSDT	
Treatment of jaw joint problems (TMJ)	Yes		Additional through EPSDT	
Emergency room services provided by a dentist	Yes		Additional through EPSDT	
Inpatient Hospital Services	Yes		Additional through EPSDT	
Anesthesia				
General anesthesia	Yes		Additional through EPSDT	
Intravenous conscious sedation	Yes		Additional through EPSDT	
Non-intravenous conscious sedation	Yes		Additional through EPSDT	
Analgesia (nitrous oxide)	Yes		Additional through EPSDT	

* 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?).