

Summary of Benefits Report for Tennessee, CHIP

InsureKidsNow.gov

Preventive Services				
	Is the service Covered?	Frequency	List any service - specific limitations	
Cleanings	Yes	1 x 6 months	One of (D1110, D1120) per 6 Month(s) Per patient.	
Fluoride treatments (including fluoride varnishes)	Yes	1 x 6 months	One of (D1203, D1204, D1206, D1208) per 6Month(s) Per patient.	
Sealants (list any tooth-specific limits)	Yes	1 x lifetime	One of (D1351) per 1 Lifetime Per patient, Same tooth.	
Space maintainers	Yes	1 x lifetime	Per Arch: One of per 1 Lifetime Per patient, Same Arch.	
Diagnostic Services				
	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		
Assessment of risk for tooth decay	No			
X-Rays				
Bitewing	Yes	1 x year		
Full Mouth	Yes	1 x every 3 years	One of (D0210, D0277, D0330) per 36 Month(s) Per patient.	
Panoramic	Yes	1 x every 3 years	Panoramic Yes 1 x every 3 years One of (D0210, D0277, D0330) per 36 Month(s) Per patient	
Treatment Services				
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Anti-microbial treatments that stop decay from spreading	No			
Fillings				
Silver amalgam	Yes		1 x 12 months	
Tooth colored composite	Yes		1 x 12 months	
Crowns/tooth caps				
Stainless steel crowns	Yes		One of(D2930), (D2931),(D2933) per 60Month(s) Per patient,Same tooth.	
Metal (only) crowns	Yes - only with prior authorization		One of(D2791) or (D2792)per 60 Month(s) Perpatient, Same tooth.	
Metal/porcelain crowns	Yes - only with prior authorization		One of(D2750), (D2751),(D2932) per 60Month(s) Per patient, same tooth.	

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Treatment Services				
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Porcelain (only) crowns	Yes - only with prior authorization		One of (D2644) or (D2740) per 60 Month(s) Perpatient, Same tooth.	
Root Canals (endodontics)				
Root canals on baby teeth (pulpotomies)	Yes		One of (D3230) per 1Lifetime Per patient, Same tooth. One of (D3240) per 1Lifetime Per patient, Same tooth.	
Root canals on permanent teeth	Yes - only with prior authorization		One of (D3310), D3320) and (D3330) per 1Lifetime Per Patient, Same tooth.	
Gum (periodontal) therapy	Yes - only with prior authorization		One of (D4342) per 1Lifetime Per patient, Same quadrant.	
Dentures				
Partial dentures	Yes - only with prior authorization		1 per 60 months	
Complete dentures	Yes - only with prior authorization		One of (D5110) per 60 Month(s) Perpatient. One of (D5120) per 60 Month(s) Per patient. One of (D5130) per 1 Lifetime Per patient. One of (D5140) per 1 Lifetime Per patient.	
Bridges	Yes - only with prior authorization		One of (D6545) per 60 Month(s) Perpatient, Same tooth. One of (D6545) per 60 Month(s) Perpatient, Same tooth.	
Orthodontics*				
Retainers (orthodontic)	Yes			
Braces	Yes		Lifetime limit \$1,250	
Oral surgery				
Simple extractions	Yes			
Surgical extractions	Yes - only with prior authorization			
Care of abscesses	Yes			
Cleft palate treatment	Yes			
Cancer treatment	Yes			
Treatment of fractures	Yes			
Biopsies	Yes			
Treatment of jaw joint problems (TMJ)	Yes - only with prior authorization		One of (D7880) per 1 Lifetime Per patient.	
Emergency room services provided by a dentist	Yes			

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Treatment Services				
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Inpatient Hospital Services	Yes - only with prior authorization			
Anesthesia				
General anesthesia	Yes - only with prior authorization			
Intravenous conscious sedation	Yes - only with prior authorization			
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?).