

PROVIDER BULLETIN

No. 15-13

DATE: April 6, 2015

TO: Nebraska Medicaid Dental Providers

FROM: Calder A. Lynch, Medicaid Director 
DHHS Division of Medicaid & Long-Term Care

BY: Julie Swenson, Program Specialist

RE: Dental Hygienists and Procedure Codes

Please Share This Information with Professional, Clinical, Administrative and Billing Staff.

The purpose of this provider bulletin is to provide coverage clarification for certain dental codes based on the American Dental Association (ADA) billing policy for dental hygienists.

In accordance with the ADA CDT Manual (Codes D0100-D0999 I.) - Diagnostic and Clinical Oral Evaluations are defined as the collection and recording of data, and components of the dental examination may be delegated; however, the evaluation, which includes diagnosis and treatment planning, is the responsibility of the dentist.

Based on the ADA guidelines, the following codes may not be billed by Dental Hygienists. Therefore, reimbursement for these codes when billed by a hygienist will not be covered under NE Medicaid.

D0120- Periodic oral evaluation;
D0140- Limited oral evaluation;
D0145- Oral evaluation for a patient under 3 years of age;
D0150- Comprehensive oral evaluation;
D0160- Detailed and extensive oral evaluation;
D0170- Re-evaluation; or
D0180- Comprehensive periodontal evaluation.

Pursuant to 471 NAC 6-007, providers of dental services must be licensed by the Nebraska Department of Health and Human Services as a dentist or a dental hygienist and must practice within their scope of practice as defined in Nebraska State Statutes.

For questions regarding this information, please contact Julie Swenson, Program Specialist at 402-471-6287 or dhhs.medicaidental@nebraska.gov.