ACCESS TO BABY AND CHILD DENTISTRY (ABCD)

OVERVIEW

Early intervention, including routine preventive services starting at age 1, reduces the need for costly future restorative work. Access to Baby and Child Dentistry (ABCD) aims to increase access to dental services for Medicaid and CHIP eligible children ages 0-5 and emphasize non-traumatic treatment techniques and oral health education in early childhood, promoting good lifelong oral health practices. ABCD focuses on prevention and includes training for general providers in early pediatric techniques and education of parents and children on oral health issues.

ELIGIBLE PROVIDERS

In order to receive payment, all eligible servicing and billing provider's National Provider Identifiers (NPI) must be enrolled with South Dakota Medicaid. Servicing providers acting as a locum tenens provider must enroll in South Dakota Medicaid and be listed on the claim form. Please refer to the provider enrollment chart for additional details on enrollment eligibility and supporting documentation requirement.

To receive the enhanced reimbursement available through the ABCD program, a participating Medicaid provider must complete the ABCD attestation form. The attestation form is available in the Dentist section of the dental vendor's website at www.deltadentalsd.com. Contact the dental vendor at 1-877-841-1478 or sdmedicaid@deltadentalsd.com with questions.

ELIGIBLE RECIPIENTS

All Medicaid and CHIP eligible children age 0-5 are eligible to receive the enhanced services available under ABCD. Providers are responsible for checking a recipient's Medicaid ID card and verifying eligibility before providing services. Eligibility can be verified using South Dakota Medicaid's online portal.

Refer to the Recipient Eligibility manual for additional information regarding eligibility including information regarding limited coverage aid categories.

COVERED SERVICES

Procedures Qualifying for Enhanced Fees
Enhanced reimbursements will be given for the following procedures to ABCD enrolled providers when providing care for Medicaid eligible children age 0-5:

- Comprehensive and periodic oral examinations ($5.00);
- Routine restorations (amalgams and composites) ($10.00);
- Stainless steel crowns ($25.00); and
- Pulpotomies ($15.00).

Fluoride Varnish
ABCD providers are allowed to provide fluoride treatment/varnish up to three times per benefit year for children ages 0-5.

Oral Hygiene Instruction
ABCD providers are allowed to provide oral hygiene instruction (procedure code D1330) once per benefit year for children ages 3, 4 and 5. The maximum reimbursement is $25.00.

Parent/Guardian Participation
Oral hygiene instruction requires a parent/guardian to be physically present and participate in the educational session. Offices billing for oral hygiene instruction must document in the patient's clinical notes the parent/guardian who was present during the educational session and what was discussed with the child and parent.

Service Requirements
To be covered, oral hygiene instructions must be:

- Individualized instructions to address the recipient's specific needs and risk factors; and
- Include both verbal instruction and demonstration of techniques if applicable.

Examples of qualifying instructions include, but are not limited to:

- Proper brushing and flossing frequency and technique;
- Use of oral hygiene aides; and
- Discussion and education regarding the recipient's dietary or lifestyle that is impacting their oral such as fluoridated water or sugar intake.

DOCUMENTATION REQUIREMENTS

General Requirements Providers must keep legible medical and financial records that fully justify and disclose the extent of services provided and billed to South Dakota Medicaid. These records must be retained for at least 6 years after the last date a claim was paid or denied. Radiograph images must be interpreted and included in the recipient's medical record. Documentation is needed, even if the findings indicate no pathosis, to support treatment planning decisions. Please refer to the Documentation and Record Keeping manual for additional requirements.

REIMBURSEMENT AND CLAIM INSTRUCTIONS

Reimbursement
A claim for dental services must be submitted at the provider's usual and customary charge. Payment for dental services is limited to the lesser of the provider's usual and customary charge or the fee listed on the South Dakota Medicaid's Dental Services Children Services fee schedule.

Claim Instructions
Refer to the ADA Claim Instructions for information regarding completing a claim form.

Timely Filing
South Dakota Medicaid's dental vendor must receive a provider's completed claim form within 6 months following the month the service was provided. Requests for reconsiderations will only be considered if they are received within the timely filing period or within 3 months of the date a claim was denied. The time limit may be waived or extended by South Dakota Medicaid in certain circumstances. Providers should refer to the General Claim Guidance manual for additional information.

Third-Party Liability
Medicaid recipients may have one or more additional source of coverage for health services. South Dakota Medicaid is generally the payer of last resort. Providers must pursue the availability of third party payment sources. Providers should refer to the General Claim Guidance manual for additional information.

DEFINITIONS

1. "Oral hygiene instruction", education on oral hygiene given by the dental professional to the patient and family. May include instructions for home care. Examples include tooth brushing technique and flossing.

REFERENCES

- Administrative Rule of South Dakota (ARSD)
- South Dakota Medicaid State Plan
- Code of Federal Regulations

QUICK ANSWERS

1. **Why should I participate in the ABCD program?**

   Providers participating in the ABCD program receive enhanced reimbursement for certain services provided to Medicaid and CHIP eligible patients who are ages 0-5.

2. **How do I sign up to be an ABCD dentist?**

   Refer to the dental vendor's website www.deltadentalsd.com and fill out the attestation form. The attestation form includes education, training, experience, and other information that supports qualifications to serve children between the ages of 0-5. Once the attestation form is completed, the dental vendor will complete the enrollment.

3. **Do I need to fill out an attestation form for each office I practice at?**

   Only one form per provider is necessary. Once enrolled in the program, providers are eligible for additional fees and enhancements at all offices you practice at.

4. **If one of the providers at our office is enrolled, can all providers submit claims for enhanced services?**

   Each provider will need to enroll in the program to bill for additional services or enhanced fees.