

Division of Medicaid State of Mississippi Provider Policy Manual	New: Revised: X Current:	Date: Date: 07/01/05 07/01/07
Section: Dental	Section: 11.21 Pages: 2-1	
Subject: Lifetime Maximum Benefits	Cross Reference:	

Refer to list of allowable dental codes located at [www.dom.state.ms.us](http://www.dom.state.ms.us).

For beneficiaries under age 21, the following services apply to the \$3,200.00 Life time Maximum for Orthodontic Treatment:

**Procedure**

- Diagnostic casts
- Diagnostic photographs
- Unspecified diagnostic procedure
- Limited orthodontic treatment
- Comprehensive orthodontic treatment
- Periodic orthodontic treatment visit
- Unspecified orthodontic procedure

**Note:** Consideration may be given for other orthodontic treatments. The request must be made using the Orthodontic Services Request and forwarded with the beneficiary records to DOM for consideration. A complete treatment plan must be included with your request.

For beneficiaries under age 21, the following procedures apply to the \$1,200.00 Fiscal Year Maximum for Restorative and Screening Services:

**Procedure**

- Sealants
- Space maintainers
- Amalgam and composite restorations
- Restorative Crowns
- Endodontic procedures
- Removable bridges
- Tooth Reimplantation
- Tooth Transplantation

**Note:** If more than \$1,200.00, based on the Medicaid fee schedule, is necessary to correct the problems identified through the exam, a prior authorization form (MA-1098) may be submitted to DOM for review and possible approval.

**Dental Benefit Limit - Annual**

Dental expenditures, excluding orthodontia-related services, are limited to \$2,500 per beneficiary per fiscal year. All American Dental Association (ADA) dental procedure codes, except orthodontia-related services, are applied to the \$2,500 annual limit. This limit applies to all beneficiaries, including children and adults. Dental expenditures may exceed the annual limit only if the services are prior authorized by the Division of Medicaid. Prior authorizations must be submitted as required in Section 11.20 of this manual.

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### **Orthodontia Benefit Limit - Lifetime**

Orthodontia-related services are limited to \$4,200 per beneficiary per lifetime. Orthodontia-related services are only covered for beneficiaries under age twenty-one (21) as described in Section 11.18. The American Dental Association (ADA) dental procedure codes D8000 through D8999 are applied to the \$4,200 lifetime orthodontia benefit limit.