

**Q & A for the
LOUISIANA MEDICAID ADULT DENTAL WAIVER PROGRAM**

1. Who qualifies for the Louisiana Medicaid Adult Dental Waiver Program?

Effective July 1, 2022, adults with Intellectual/Developmental Disabilities (I/DD), age 21 and older, who are recipients of one of the Developmental Disabilities (DD) Waivers, i.e., New Opportunities Waiver (NOW), Residential Options Waiver (ROW), and the Supports Waiver.

Adults with I/DD, age 21 and older, who are residents of Intermediate Care Facilities/Developmental Disabilities (ICF/DD) including group homes, will be included at a later date under Act 366 which passed during the 2022 Legislative Session.

2. How does an adult with I/DD enroll in the Medicaid Adult Dental Waiver Program?

Adults with Intellectual/Developmental Disabilities (I/DD), age 21 and older, who are recipients of one of the Developmental Disabilities (DD) Waivers, i.e., New Opportunities Waiver (NOW), Residential Options Waiver (ROW), and the Supports Waiver are automatically enrolled in the Medicaid Adult Dental Waiver Program. If a Dental Benefit Plan Manager (DBPM) was not selected, one was selected for the beneficiary. If families are unsure of which DBPM the beneficiary is enrolled with, contact Healthy Louisiana at 1-855-229-6848.

Currently, an open enrollment period is held each year and beneficiaries can change their DBPM during that time. Beginning January 1, 2023, beneficiaries can change their DBPM at any time. There will no longer be an annual open enrollment period.

3. What is covered under the Adult Waiver Dental Plan?

Beneficiaries will receive comprehensive dental coverage through a DBPM, i.e., DentaQuest or MCNA Dental. The Adult Waiver Dental Program provides coverage of certain diagnostic; preventive; restorative; endodontic; periodontic; removable prosthodontic; maxillofacial prosthetic; oral and maxillofacial surgery; orthodontic; and adjunctive general services. Specific policy guidelines apply.

4. How do I find a dentist to provide Adult Waiver Dental Program Services?

DentaQuest and MCNA Dental administer the dental benefits for eligible Medicaid recipients. Contact your assigned DBPM to locate a network provider and for questions about covered dental services.

DentaQuest 1-800-685-0143
Visit online at www.DentaQuest.com

MCNA Dental 1-855-702-6262
Visit online at www.MCNALA.net

5. What is the application process for dental providers?

Providers should contact one or both DBPMs and complete the credentialing process.

DentaQuest 1-800-685-0143
Visit online at www.DentaQuest.com

MCNA Dental 1-855-702-6262
Visit online at www.MCNALA.net

Providers can select to serve just the adult Special Needs population by checking the “special needs” box on the provider application form or notify the DBPM during enrollment that they only wish to see the Adult Waiver recipients.

6. What is the fee schedule and all covered services as well as frequencies?

The fee schedule can be found at this website:
https://www.lamedicaid.com/Provweb1/fee_schedules/Dental_Fee.htm. The provider manuals for both DBPMs are posted at the following links. These manuals contain the fee schedule and limitations for both DBPMs. Some rates will be slightly higher than the state fee schedule, as they are required to pay no less than the state rate but can choose to pay more.

- [MCNA Dental](#)
- [DentaQuest](#)

The process for payments through Intermediate Care Facilities/Developmental Disabilities (ICF/DD) including group homes is not yet in place.

7. What is the annual cap for the Medicaid Adult Dental Waiver Program?

There are no caps on the annual dollar amount expended by a DBPM for a beneficiary.

8. Will the Medicaid Adult Dental Waiver Program pay for sedation treatment? Many patients with severe IDD will require IV sedation to be able to complete restorative treatment.

Sedation is covered through the Adult Dental Waiver Program. Access is similar to the existing EPSDT program. Who pays the sedation fee is dependent on the location of the service, as well as who is providing the service.

If the dentist is certified to perform the procedure, they can do so if it is being performed in an office or facility that is certified for those services per the guidelines of the Louisiana Board of Dentistry. If the dentist is not certified, the sedation can be performed by an anesthesiologist, but they would need to be enrolled in Medicaid in order to bill for their services.

If the dentist is performing the sedation in an office setting, the DBPMs would be responsible. If an anesthesiologist is providing the service, that would be billed through the beneficiaries' medical policy. Procedures performed in the hospital would be billed through the patient's health plan. Rates were increased in 2021 specifically targeting services performed in an outpatient hospital setting.

9. Will dentist be paid for the extra time needed to treat some adults with I/DD?

In order to provide additional support to adults with I/DD, LDH has added the following allowable CDT code to its fee schedule. D9997 dental case management – patients with special health care needs. Special treatment considerations for patients/individuals with physical, medical, developmental or cognitive conditions resulting in substantial functional limitations or incapacitation, which require that modifications be made to delivery of treatment to provide customized or comprehensive oral health care service.

A maximum of four dental case management services, per beneficiary, are available annually by the same billing provider or another Medicaid provider located in the same office as the billing provider.