

Provider Update



This is an update about information in the provider manual. For access to the latest provider manual, go online to <https://providers.amerigroup.com/KS>.

Clarification on billing 41899 — unlisted procedure for dentoalveolar

Summary: Effective with processing dates on or after [effective date] and retroactive to date of service May 1, 2016, procedure code 41899 (unlisted procedure, dentoalveolar structures) should continue to be priced as shown below.

What this means to you

The following is the pricing for procedure code 41899:

<u>Description</u>	<u>Reimbursement</u>
Surgical removal, soft tissue impaction each additional	\$250
Pediatric dental procedures	\$2,000
Simple extractions	\$175
Full mouth extractions	\$250
Dental services for non-Kan Be Healthy recipients	up to \$2,000

Claims for this procedure code must include a detailed description of the actual service provided. Medical records or supporting documentation are not required in addition to a description of the service. Prior authorization is required for adults. Medical review is required for children age 21 and under.

What if I need assistance?

If you have questions about this communication, received this fax in error or need assistance with any other item, contact your local Provider Relations representative or call Provider Services at 1-800-454-3730.