

## **Management and Budget**

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SENT BY ELECTRONIC MAIL

Dear Ryan White Program-funded Service Providers:

## RE: Revised Ryan White Program Oral Health Care Formulary – Fiscal Year 2019

Attached for your information and internal distribution is a revised Fiscal Year (FY) 2019 Ryan White Program (RWP) Oral Health Care Formulary for the Miami-Dade County Ryan White Part A Program. Only the version sorted by code is being provided at this time.

All revisions can be easily identified in bold type and shading within the revised formulary. The Miami-Dade HIV/AIDS Partnership approved these changes at its regular meeting on December 16, 2019.

The codes in the following table have been <u>added</u> to the Formulary <u>effective retroactive to March 1, 2019</u>:

Table 1:

CDT Code	Procedure	Comment
D4346	Scaling in presence of generalized moderate or severe gingival inflammation – full mouth, after oral evaluation	New to RWP
D5225	Maxillary partial denture – flexible base (including any clasps, rests and teeth)	New to RWP
D5226	Mandibular partial denture – flexible base (including any clasps, rests and teeth)	New to RWP
D5282	Removable unilateral partial denture – one piece cast metal (including clasps and teeth), maxillary	Replaces D5281 that was discontinued by ADA in 2019.
D5283	Removable unilateral partial denture – one piece cast metal (including clasps and teeth), mandibular	Replaces D5281 that was discontinued by ADA in 2019.
D9944	Occlusal guard – hard appliance, full arch	Replaces D9940 that was discontinued by ADA in 2019.
D9945	Occlusal guard – soft appliance, full arch	Replaces D9940 that was discontinued by ADA in 2019.
D9946	Occlusal guard – hard appliance, partial arch	Replaces D9940 that was discontinued by ADA in 2019.

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As noted above, the codes in the following table have been <u>deleted</u> from the Formulary <u>effective</u> <u>March 1, 2019</u>, as they no longer appeared in the ADA's Current Dental Terminology book:

Table 2:

CDT Code	Procedure
D5281	Removable unilateral partial denture – one piece cast metal
	(including clasps and teeth)
D9940	Occlusal guard, by report

NOTE: Services provided by the dental team must be billed under the Oral Health Care service category using only the procedure codes included in the most current, local Ryan White Program Oral Health Care Formulary.

In addition, please note that the "twice in a lifetime" limit rule for the following denture-related service codes has been discontinued effective retroactive to March 1, 2019:

Table 3:

CDT Code	Procedure
D5110	Complete denture - maxillary
D5120	Complete denture - mandibular
D5211	Maxillary partial denture – resin base
D5212	Mandibular partial denture – resin base
D5213	Maxillary partial denture – cast metal framework
D5214	Mandibular partial denture – cast metal framework

As a reminder, Ryan White Program Oral Health Care services are available to eligible HIV+ clients who have a gross household income that does not exceed 400% of the Federal Poverty Level Guidelines, and who permanently reside in Miami-Dade County. The Ryan White Program must be the payer of last resort.

Ryan White Program Part A-Program funded Oral Health Care services continue to be limited to \$6,500 per client per Ryan White Part A Program Fiscal Year (e.g., March 2019 through February 29, 2020). However, very limited exceptions to the annual cap may be approved by the County, with consultation from the Miami-Dade HIV/ADIS Partnership's Oral Health Care Subcommittee as needed, on a case-by-case basis for the provision of preventative Oral Health Care services only.

Reimbursement rates for Ryan White Part A Program-allowable dental procedures are as indicated on the attached formulary. These rates are flat fee, no multiplier.

This version of the Ryan White Program Oral Health Care Formulary for Miami-Dade County will not be posted on the Ryan White Program website. A new version for FY 2020 will be distributed and issued in March 2020 to reflect rate changes following a recent rate review and analysis.

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Please contact Ana M. Nieto, Contracts Officer, at <a href="mailto:Ana.Nieto@miamidade.gov">Ana.Nieto@miamidade.gov</a>, or by phone at 305-375-4742 with any questions related to this revised formulary. Thank you for you continued cooperation.

Sincerely,

Daniel T. Wall Assistant Director

Attachments

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