



# Department of Medicaid

John R. Kasich, Governor  
Barbara R. Sears, Director

## Medical Transmittal Letter (MTL) No. 3335-18-02

DATE: December 20, 2018

TO: Eligible Medicaid Providers of Dental Services  
Directors, County Departments of Job and Family Services  
Chief Executive Officers, Managed Care Plans

FROM: Barbara R. Sears, Medicaid Director

SUBJECT: Revision of the Dental Services Rule

Rule 5160-5-01, "Dental services," sets forth Ohio Medicaid coverage and payment policies for dental services. It includes two appendices, one that lays out coverage of services by category and one that lists maximum payment amounts by procedure.

The following changes have been incorporated:

- Updates were made to include American Dental Association (ADA) Current Dental terminology (CDT) procedure codes and terminology for 2019. The procedure codes and descriptors for a number of dental services have been revised.
- Appendix B which lists covered CDT procedure codes and their maximum fees has been removed. The list of CDT procedure codes, maximum fees and effective dates of coverage has now been added to Appendix DD of 5160-1-60 "Medicaid payment" and the list is posted on the Fees Schedules and Rates page of the Ohio Medicaid web site, <http://medicaid.ohio.gov/providers/FeeScheduleAndRates.aspx> (or its successor).
- Ambulatory Surgery Centers (ASCs) have been added as a provider type eligible for the payment of dental surgeries in conjunction with amendment of OAC rule 5160-22-01.

These changes will take effect on January 1, 2019.

**Additional Information**

Information about the services and programs of the Ohio Department of Medicaid (ODM) may be accessed through the main ODM web page, <http://www.medicaid.ohio.gov>.

Questions pertaining to this letter should be directed to the Ohio Department of Medicaid:

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