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December 20, 2022

MEMORANDUM

MEMO NO.
QI-2228

TO: QUEST Integration (QI) Health Plans

FROM: Judy Mohr Peterson, PhD *JMP*
Med-QUEST Division Administrator

SUBJECT: ADULT DENTAL BENEFITS EFFECTIVE JANUARY 1, 2023

The Department of Human Services, Med-QUEST Division (MQD) is issuing this memorandum to inform the QUEST Integration Health Plans that effective January 1, 2023, adult dental benefits will be available to the Medicaid adult population.

During the 2022 Legislative Session, adult dental benefits were approved by the Legislature to provide preventive, restorative and some denture coverage for the Medicaid adult population. Medicaid adults who can be covered by the new adult dental benefits are individuals twenty-one (21) years of age or older. Individuals under age twenty-one (21) will receive their dental benefits under Early and Periodic Screening Diagnosis and Treatment (EPSDT.)

Covered adult dental benefits includes the following:

(Some limitations and prior authorization may apply)

Services	Description and Limitation
Preventative Services	<ul style="list-style-type: none"> • Comprehensive Oral Evaluation – Once every 5 years • Periodic screening examinations - 2 per year • Prophylaxis - 2 per year • Topical fluoride or fluoride varnish - 2 per year
Diagnostic and Radiology Services	<ul style="list-style-type: none"> • Bitewing x-rays - 2 per year • Full series x-rays – 1 every 5 years • Periapical x-rays • Biopsies of oral tissue
Endodontic Therapy Services	<ul style="list-style-type: none"> • Root canal therapy on permanent molars
Restorative Services	<ul style="list-style-type: none"> • Amalgams on primary and permanent posterior teeth • Composites on anterior and posterior teeth • Pin and/or post reinforcement • Cast cores • Recement inlays and crowns • Stainless steel crowns
Oral Surgery	
Periodontal Therapy Services	<ul style="list-style-type: none"> • Scaling and root planning – one every 24 months
Prosthetic Services	<ul style="list-style-type: none"> • Complete Upper and Lower Dentures – one every 5 years • Partial Dentures – one every 5 years • Denture relines – one every 2 years • Repairs
Emergency and Palliative Treatment	<ul style="list-style-type: none"> • Gingivectomy, for gingival hyperplasia • Other medically necessary emergency dental services

Important: Like any medical benefit, coverage will depend on the medical necessity of each case. These limits may be exceeded based upon prior approval to determine medical necessity.

Health Plan shall refer your members to Community Case Management Corporation (CCMC) if they have any questions on adult dental benefits. CCMC can explain the covered dental benefits and help members to find a dentist or coordinate transportation for individuals traveling from the neighbor islands to Oahu for visits coordinated by CCMC. CCMC can be reached at 808-792-1070 or toll-free at 1-888-792-1070 starting in January 2023.

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Health Plan shall also refer Medicaid Dentists to Hawaii Dental Service (HDS) if they have any questions on coverage and claims submissions. HDS's dedicated Medicaid Customer Service line can be reached at 808-529-9345 or toll-free 855-819-9117.

Should you have any questions, please contact Grant Shiira by email at: gshiira@dhs.hawaii.gov.