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October 17, 2007

MEMORANDUM

ACS M07-16A

TO: Federally Qualified Health Centers (FQHC)
FROM:  Lois Lee, Acting Med-QUEST Division Administrator
SUBJECT: FQHC DENTAL CLAIMS

This is a follow-up to ACS M07-16. Cyrca Dental has begun receiving dental claims from those FQHCs with dental programs and has found that the claims are being submitted in different ways.

As stated in ACS M07-16, FQHCs are to use 3 specific procedure codes in submitting their claims:

D9999 for claims submitted for children/youth under 21 years of age
D2999 for claims submitted for adult preventive and restorative services
D0140 for claims submitted for adult emergency dental services

Effective immediately, **the procedure code and the appropriate FQHC Dental Rate must be on the same line on the claim.** Please do not use a different fee on the claim or include any other procedure codes or lines on the claim. This will cause the claim to be rejected.

Any fee amount other than the designated FQHC Dental Rate will be denied and the claim will be sent back to the respective FQHC for resubmission with the correct rate.

Cyrca Dental is not allowed to alter the claim and cannot pay more than what Medicaid would have paid. For instance, claims have been submitted for D2999 for \$45.00 rather than the FQHC Rate.

For dentures, please continue to submit claims using the appropriate CDT codes.

Should you have questions regarding this memorandum, please contact Cyrca.