



Department of Medicaid

Mike DeWine, Governor
Jon Husted, Lt. Governor

Maureen M. Corcoran, Director

Medicaid Advisory Letter (MAL) No. 637

DATE: October 1, 2019

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

FROM: Maureen M. Corcoran, Medicaid Director

SUBJECT: Clarification of coverage of D2929 “Prefabricated porcelain/ceramic crown – primary

The purpose of this Medicaid Advisory Letter is to provide clarification of coverage of D2929 “Prefabricated porcelain/ceramic crown – primary” in the Ohio Medicaid dental program. This coverage was effective January 1, 2019.

Medicaid Advisory Letter (MAL) No. 629, dated December 20, 2018, announced coverage and payment of D2929. This MAL further listed the primary tooth indicators associated with specific maximum fees. Anterior tooth indicators Q and R were inadvertently not listed. D2929 is a covered service for all primary teeth.

Coverage and payment are as follows:

D2929 prefabricated porcelain/ceramic crown – primary, anterior (equivalent to D2933, D2934) on all primary anterior teeth with a maximum fee of \$153.00. Prior authorization is not required.

D2929 prefabricated porcelain/ceramic crown – primary, posterior (equivalent to D2930) on all posterior primary teeth with a maximum fee of \$101.92. Prior authorization is not required.

The list of CDT procedure codes, maximum fees and effective dates of coverage has been added to Appendix DD of 5160-1-60 “Medicaid payment” and 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).

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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