

THSteps Therapeutic Dental Policy Change for April 1, 2016

Effective for dates of service on or after April 1, 2016, procedure code D3220 will be limited to once per lifetime, per primary tooth (tooth identification A through T).

Re-treatment claims for an incomplete pulpotomy performed by a dentist not associated with the original treating dentist or dental group will be considered for reimbursement upon TMHP's appeal process. Documentation of medical necessity and the incomplete initial pulpotomy must be submitted with the appeal. The appeal must include a written narrative and pre- and post-treatment X-rays, which will be reviewed by a Texas licensed dentist.

Note: The identified, original treating dentist or dental group will not be considered for reimbursement.