## **CHAPTER 16: DENTAL SERVVICES**

## **REVISION HISTORY LOG**

Revised/ Issued Date	Section	Section Title	Number of Page (s)	Reason for Revision
07/01/20	16.5	EPSDT Covered Services	55	Revisions made to clarify EPSDT covered services and update billing codes.
07/01/20	Appendix B	Adult Denture Fee Schedule	4	Revisions made to update billing codes and descriptions.
07/01/20	Appendix C	Dental Claim Form Instructions	12	Revisions made to update claim form instructions.
07/01/20	Appendix F	Claim Denial Simplification Process	4	Revisions made to clarify requirements for prior authorization.