

Updates to Prior Authorization and Benefit Limits Effective December 1, 2011

October 10, 2011

Dear Phoenix Health Plan (PHP) Dental Providers:

PHP will require prior authorization for the following dental codes:

- D1510, D1515, D1520, D1525 (space maintainers)
- D2930 and D3220 (stainless steel crown for primary teeth)
- D3110 and D3120 (pulp cap)
- D7111 (simple extractions) – allow 2 per day – greater than two in one day requires prior authorization
- D7140 (extraction by elevation or forceps)

Updates to benefit limits are as follows:

- D0150 – comprehensive oral evaluation – limited to 1 per 3 years (specific to provider group)
- D0230 – intraoral/periapical each additional film – limit to one per day
- D0272 – bitewing two films – limit to 1 per year
- D0273 – bitewing three films – limit to 1 per year
- D0274 – bitewing four films – limit to 1 per year
- D0330 – 1 per 3 year limitation except for oral surgeons
- D9230 – limited to operative and surgical procedures only

These changes will be effective on December 1, 2011.

If you have any questions, please contact your Provider Relations Representative directly or at the department number shown below.