

September 5, 2020

<Provider Name>
<Provider Address 1>
<Provider Address 2>
<City> <State> zipcode5-zipcode4

Dear Interested Party:

RE: COVID-19 Pregnant Women Dental Extension Notice and Reminder of Bulletin
MSA 18-18 - Managed Care Dental Service Eligibility for Pregnant Women

On June 1, 2018, the Michigan Department of Health and Human Services (MDHHS) issued Bulletin MSA 18-18 regarding expanded access to managed care dental benefits for pregnant women enrolled in Medicaid Dental Fee-for-Service (FFS). The purpose of this letter is to clarify how providers determine the managed care dental benefit enrollment for pregnant women.

Beneficiaries are eligible to receive managed care dental services when beneficiaries:

- Become pregnant,
- Are enrolled in Medicaid Dental FFS, and
- Are enrolled in a Medicaid Health Plan (MHP).

Beneficiaries enrolled in Healthy Kids Dental and Healthy Michigan Plan are excluded and will continue to receive dental services through their program. The beneficiary's MHP will administer the managed care dental services through its contracted dental benefit manager.

As a result of COVID-19 restricting the ability of beneficiaries to access dental services, the pregnant women dental benefit will be extended. This extension will apply to women who were in post-partum, delivered or still pregnant in March, April, May, June, and July 2020. These beneficiaries will have the dental benefit extended until December 31, 2020, or until they are three months post-partum, whichever comes later.

To receive expanded managed care dental services, beneficiaries must inform their MHP and MDHHS of their pregnancy status. If the beneficiary informs the MHP prior to notifying MDHHS, the benefit will begin when the MHP is informed of the beneficiary's pregnancy. The benefit begins the first day of the month in which the MHP is made aware of the beneficiary's pregnancy. Dental services will be provided for the duration of the beneficiary's pregnancy and three months post-partum. MHPs will provide beneficiary eligibility information to the dental benefit manager. Providers must verify eligibility for managed care dental services with the MHP's dental benefit manager.

Sincerely,

A handwritten signature in black ink, appearing to read 'K. Massey', followed by a horizontal line.

Kate Massey, Director
Medical Services Administration

Attachments