

## Partnership for Hope (PFH)

### Dental Service Frequently Asked Questions

January 2, 2013

1. What is the Partnership for Hope?
  - Partnership for Hope is a Medicaid home and community-based program that provides supports and services to people with developmental disabilities to prevent their admission to a residential facility or institution. Funding for Partnership for Hope comes from counties that have a local tax to serve people with developmental disabilities, from the state, and from the federal government. Partnership for Hope is administered by the MO HealthNet and the Division of Developmental Disabilities.

A map of counties currently participating in Partnership for Hope is posted on this website:

<http://dmh.mo.gov/docs/dd/pfhmap.pdf>

2. What services are covered under Partnership for Hope?
  - Partnership for Hope covers personal assistance, employment supports, respite, environmental accessibility modifications for homes and vehicles, specialized medical equipment, assistive technology and a wide variety of other supports that help maintain a person's independence in the community. Dental services are also covered for adults.
3. What is the target population for Partnership for Hope?
  - Children and adults with developmental disabilities, who are eligible for MO HealthNet and who require supports and services to prevent their admission to a type of institution known as an intermediate care facility for people with developmental disabilities.
4. What types of dental services are covered under the PFH Waiver?
  - Preventative dental treatment such as oral examinations, x-rays, prophylaxis, topical fluoride applications, etc.
  - Therapeutic dental treatment that includes but is not limited to pulp therapy for permanent teeth, restoration of carious permanent teeth such as fillings, root canals and crowns and limited provision of removable prostheses when masticatory function is impaired when an existing prosthesis is unserviceable. This may also include partial prostheses.
  - Procedures to control bleeding, relieve pain, and eliminate acute infection.
  - Operative procedures required to prevent imminent loss of teeth.
  - Other therapeutic treatment recommended by the dentist.

5. Do all PFH dental services have to be prior authorized?
  - Any dental services through the PFH Waiver must be prior authorized by the participating county and the regional office before the service can be provided. Typically, the local office will authorize an examination, and will then issue another authorization based on the dental treatment plan developed by the dentist.

Contact information for the regional offices is on this website:

<http://dmh.mo.gov/dd/facilities/index.htm>

6. What are the rates for the PFH waiver dental services?
  - The dentist or dental clinic may be reimbursed at their usual and customary charge for procedures. The Partnership for Hope Waiver is not limited by the MO HealthNet fee schedule for dental services.
7. Do the PFH waiver dental services cover any hospital operating room charges?
  - The PFH dental service may only cover the charges submitted by the authorized dentist. Charges for anesthesiology, operating room or other costs may be reimbursed by MO HealthNet or Medicare, subject to the benefits and limitations of those programs. If ancillary services are necessary for the dental treatment plan and are not covered by MO HealthNet or Medicare, please contact the regional office serving the county where the patient resides.
8. Are there cost limits to PFH dental services?
  - The Partnership for Hope has an annual per-participant cost cap of \$12,000. This limit applies to all waiver services provided to the individual, including dental. The limit does not include other medical care such as physician, pharmacy, inpatient hospital, health home, or other services covered by the MO HealthNet state plan. The waiver has an exceptions process that allows an additional \$3,000 to \$10,000 to be authorized annually on a case by case basis.
9. How does the dentist get reimbursed for providing PFH waiver dental services?
  - Participating dentists contract with the local office to provide PFH dental services. Once services have been prior authorized and rendered, an invoice is submitted to the local office detailing the services provided. The claim must include the patient name, patient MO HealthNet number (DCN), date of service, ADA dental procedure code, and charge. Documentation of the service must be in accordance with MO HealthNet regulations at 13 CSR 70-3.030.
  - The local office will reimburse the dentist or clinic and will subsequently submit a claim to the MO HealthNet MMIS. The local office will appear in the MO HealthNet claims payment system as the provider of record through an arrangement known as an “organized

health care delivery system.” All PfH dental claims are paid through the MMIS under the HCPCS procedure code T2025 in order to attribute the cost to the Partnership for Hope program.

- A dentist may choose to enroll directly with MO HealthNet to provider of PFH Waiver dental services. Under this arrangement the service will still be prior authorized by the local office, however the reimbursement will come directly from MO HealthNet rather than from the local office.

10. Are there any limitations to the Partnership for Hope dental benefit?

- Federal law does not allow services through a home and community-based waiver to duplicate or supplant services covered by a state’s Medicaid state plan. The Partnership for Hope dental benefit may NOT cover:
  - Dental services for individuals under age 21.
  - Dental care related to trauma of the mouth, jaw, teeth, or other contiguous sites resulting from an injury.
  - Dental treatment for a medical condition without which the health of the individual would be adversely affected. Examples of medical conditions include but are not limited to chemotherapy/radiation therapy, transplants, systemic diseases, AIDS, other auto-immune diseases, paraplegia, quadriplegia, uncontrolled diabetes.

11. If the dentist’s office is not located in a county participating in Partnership for Hope, can the dentist contract to provide waiver dental services?

- Yes. Dentists may accept referrals to provide dental treatment to participants of the Partnership for Hope waiver from any county in the PfH waiver service region. Waiver participants have a free choice from among all waiver providers under contract with a Regional Office or a County Board. Transportation is also covered through the waiver if the participant has no other means to access a waiver service.