<u>PAYMENT RATES FOR ALL TYPES OF CARE OTHER THAN INPATIENT</u> HOSPITAL, SKILLED NURSING, OR INTERMEDIATE NURSING CARE SERVICES

10. Dental Services ---

Recipients under age 21

Payment is made in accordance with a fee schedule established by the <u>dD</u>epartment. - As of April 1, 2023, there are separate fee schedules for the children's dental benefit and for the adult dental benefit. Children's dental benefit Rrates were set as of January 1, 2021, and are effective for services provided on or after that date. No provider shall bill or charge the <u>dD</u>epartment more than the provider's usual and customary charge. -All fee schedules are accessible at <u>www.nhmmis.nh.gov</u> under the "documents and forms" tab under "documentation," and are applicable to all public and private providers.

Effective June 1, 2011, <u>limited interceptive-orthodontia</u> will be paid in one payment, inclusive of records. -Also effective June 1, 2011, comprehensive orthodontia will be paid in three payments, inclusive of records: -at banding; no sooner than 12 months after banding; and when evidence confirms that the case is completed. ""Inclusive of records" means inclusive of -the casts/models and various types of X-raysxrays, such as panorex and cephalometric X-rays, xrays that are required as part of the orthodontic consultation.

Recipients age 21 and older

Payment is made in accordance with a fee schedule established by the Department. As of April 1, 2023, there are separate fee schedules for the children's dental benefit and for the adult dental benefit. Adult dental benefit rates were set as of April 1, 2023 and are effective for services provided on or after that date. No provider shall bill or charge the Department more than the provider's usual and customary charge. All fee schedules are accessible at www.nhmmis.nh.gov under the "documents and forms" tab under "documentation," and are applicable to all public and private providers.

11. Physical Therapy and Related Services (Occupational and Speech Therapy) — Payment for physical, occupational, and speech therapy services is based upon a 15 minute unit of service, unless the CPT code is defined otherwise, and made in accordance with a fee schedule established by the dDepartment. Rates were set as of January 1, 2021, and are effective for services provided on or after that date. —No provider shall bill or charge the dDepartment more than the provider is usual and customary charge. —All fee schedules are accessible at www.nhmmis.nh.gov under the "documents and forms" tab under "documentation," and are applicable to all public and private providers.

Note: -When it is stated that "rates were set as of," this indicates the most recent date rates were changed on one or more codes for the type of service/practitioner in question. -It is not meant to imply that all of the codes pertaining to the type of service/practitioner in question were changed or reviewed.

TN No: — <u>21-0010</u> 22-0051		
Supersedes	Approval Date	Effective Date: <u>01/01/2021</u> 04/01/2023
TN No: -20-001021-0010		