

Medicare Advantage 2023 Dental Benefits

When you are presented with one of the following member ID cards, these dental benefits apply.

Plan name
 CMS [contract#-PBP #]
Subscriber
 Mary J. Smith
Issuer: 80840
ID number: J01234567
Group number: 10004760
Mobile PIN code: 1234
 RxBIN: 610602
 RxPCN: NVTD
 RxGrp: MDHP
 MedicareRx
 Prescription Drug Coverage X
modahealth.com/medicare

Plan Name
 CMS-H2765-[PBP #]
SUMMIT HEALTH
Subscriber
 (00) Mary J. Smith
Issuer: 80840-10017515
ID Number: J01234567
Group Number: 10101010
Mobile Pin Code: 1234
 BIN: 610602
 PCN: NVTPARTB
 RxGrp: MDHP
yoursummithealth.com

Service (All services apply towards the annual maximum. Maximums may vary.)	Limitations	In-network (Medicare Advantage contracted provider- Premier fees)	Delta Dental Premier Provider (non-Medicare Advantage-apply Premier fees)	Non participating provider Out-of-Network (apply non-participating fees)
Exams (Frequency limitations apply for both in- and out-of-network)	2 exams every calendar year <ul style="list-style-type: none"> Exams will check against each other per normal process Limited exams will not check against comprehensive exams, however, they will be applied to the annual max regardless of the participation status. 	100% coverage up to annual max	50% coverage up to annual max	50% coverage up to annual max
Cleanings (Frequency limitations apply for both in- and out-of-network)	2 cleanings every calendar year <ul style="list-style-type: none"> Cleanings include D4346, D4910 and D1110 All cleanings will check against each other 	100% coverage up to annual max	50% coverage up to annual max	50% coverage up to annual max
X-rays Bitewing = 1 per calendar year Full Mouth/Pano = 1 every 5 years PAs = (as needed, but up to 10 per calendar year) (Frequency limitations apply for both in- and out-of-network)	Any Bitewing series defined by codes D0270 — Single bitewing X-ray, as needed D0272 — Two bitewing X-rays, 1/cal year D0273 — Three bitewing X-rays, 1/cal year D0274 — Four bitewing X-rays, 1/cal year D0277 — Vertical bitewing X-rays, 1/cal year FMX or Pano — Codes check against each other D0210 — Complete series of X-rays, every 5 years D0330 — Panoramic X-ray, every 5 years PAs apply standard processing guidelines (bundling)	100% coverage up to annual max	50% coverage up to annual max	50% coverage up to annual max
All other services	All other services are permitted such as: implants, dentures, crown upgrades, etc. (No frequency limitations)	80% coverage up to annual max	50% coverage up to annual max	50% coverage up to annual max

Questions?

If you have questions, please call our provider line at 888-374-8905. If your patients have questions, please have Moda Health members call 877-299-9062. Summit Health members can call 844-827-2355.

Please note: The above codes are examples. Not all CDT codes are identified/represented on this table.

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