



**InsureKidsNow.gov**  
Connecting Kids to Coverage

## Summary of Benefits for Iowa, MEDICAID

### Children's Dental Services

#### Preventive Services

	Is the service Covered?	Frequency	List any service-specific limitations
<b>Cleanings</b>	Yes	2 x year	
<b>Fluoride treatments (including fluoride varnishes)</b>	Yes	2 x year	
<b>Sealants (list any tooth-specific limits)</b>	Yes	1 x every 3 years	Limited to first and second molars
<b>Space maintainers</b>	Yes	1 x every 3 years	

## Summary of Benefits for Iowa, MEDICAID

### Diagnostic Services

	Is the service Covered?	Frequency	List any service-specific limitations	Recommended age of first visit?
<b>Oral health screening or assessment</b>				
	No			
<b>Dental examinations</b>				
	Yes	2 x year		2
<b>Assessment of risk for tooth decay</b>				
	No			
<b>X-Rays</b>				
Bitewing	Yes	1 x year		
Full Mouth	Yes	1 x every 5 years		
Panoramic	Yes	1 x every 5 years		

## Summary of Benefits for Iowa, MEDICAID

### Treatment Services

	Is the service Covered?	Frequency	List any service-specific limitations	Criteria for coverage
<b>Anti-microbial treatments that stop decay from spreading</b>				
	No			
<b>Fillings</b>				
Silver amalgam	Yes			
Tooth colored composite	Yes		Not covered on posterior teeth	
<b>Crowns/tooth caps</b>				
Stainless steel crowns	Yes			
Metal (only) crowns	Yes			
Metal/porcelain crowns	Yes			
Porcelain (only) crowns	Yes			
<b>Root Canals (endodontics)</b>				
Root canals on baby teeth (pulpotomies)	Yes			
Root canals on permanent teeth	Yes			
<b>Gum (periodontal) therapy</b>				
	Yes			

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	Is the service Covered?	Frequency	List any service-specific limitations	Criteria for coverage
<b>Dentures</b>				
Partial dentures	Yes - only with prior authorization		covered once every 5 years	
Complete dentures	Yes - only with prior authorization		Covered once every 5 years	
Bridges	Yes - only with prior authorization		Covered once every 5 years	
<b>Orthodontics*</b>				
Retainers (orthodontic)	Yes - only with prior authorization			
Braces	Yes - only with prior authorization			Salzmann Index Score of 26
<b>Oral surgery</b>				
Simple extractions	Yes			
Surgical extractions	Yes			
Care of abscesses	Yes			
Cleft palate treatment	Yes			
Cancer treatment	Yes			
Treatment of fractures	Yes			

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	Is the service Covered?	Frequency	List any service-specific limitations	Criteria for coverage
Biopsies	Yes			
<b>Treatment of jaw joint problems (TMJ)</b>				
	No			
<b>Emergency room services provided by a dentist</b>				
	No			
<b>Inpatient Hospital Services</b>				
	No			
<b>Anesthesia</b>				
General anesthesia	Yes		If billed with a covered dental procedure	
Intravenous conscious sedation	Yes		If billed with a covered dental procedure	
Non-intravenous conscious sedation	Yes		If billed with a covered dental procedure	
Analgesia (nitrous oxide)	Yes		If billed with a covered dental procedure	

\* When this information is posted on the Insure Kids Now website, we will include a special note for orthodontic services explaining that parents and caretakers should work with their child's orthodontist to ensure that the treatment and payment terms and conditions are clear at the outset of treatment (for example, what happens in the case of a child who becomes ineligible for Medicaid or CHIP while he or she is undergoing orthodontic treatment?).