



InsureKidsNow.gov
Connecting Kids to Coverage

Summary of Benefits for Texas, CHIP

Children's Dental Services

Preventive Services

	Is the service Covered?	Frequency	List any service-specific limitations
Cleanings	Yes	1 x 6 months	Ages 0-18
Fluoride treatments (including fluoride varnishes)	Yes	1 x 6 months	Ages 0-18
Sealants (list any tooth-specific limits)	Yes	1 x lifetime	Ages 0-18. Permanent first and second molars and maxillary premolars.
Space maintainers	Yes		Limitations differ for fixed or removable space maintainers.

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Diagnostic Services

	Is the service Covered?	Frequency	List any service-specific limitations	Recommended age of first visit?
Oral health screening or assessment				
	No			
Dental examinations				
	Yes		Ages 0-18. Limitations apply based on type of exam.	
Assessment of risk for tooth decay				
	No			
X-Rays				
Bitewing	Yes		Limitations may apply.	
Full Mouth	Yes	1 x 3 months	Limitations may apply.	
Panoramic	Yes	1 x 3 months	Limitations may apply.	

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Treatment Services

	Is the service Covered?	Frequency	List any service-specific limitations	Criteria for coverage
Anti-microbial treatments that stop decay from spreading				
	No			
Fillings				
Silver amalgam	Yes		One per tooth per 12 months.	
Tooth colored composite	Yes		One per tooth per 12 months.	
Crowns/tooth caps				
Stainless steel crowns	Yes		One per tooth per 5 years.	
Metal (only) crowns	Yes		One per tooth per 5 years.	
Metal/porcelain crowns	Yes		One per tooth per 5 years.	
Porcelain (only) crowns	Yes		One per tooth per 5 years.	
Root Canals (endodontics)				
Root canals on baby teeth (pulpotomies)	Yes			
Root canals on permanent teeth	Yes			
Gum (periodontal) therapy				
	Yes		Ages 13-18.	

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Dentures				
Partial dentures	Yes - only with prior authorization		Limitations may apply.	
Complete dentures	Yes - only with prior authorization		Limitations may apply.	
Bridges	No			
Orthodontics*				
Retainers (orthodontic)	Yes - only with prior authorization		Pre-surgical or post-surgical orthodontic services for medically necessary treatment of craniofacial anomalies requiring surgical intervention and delivered as part of a proposed and clearly outlined treatment plan. Medical plan benefit.	
Braces	Yes - only with prior authorization		Pre-surgical or post-surgical orthodontic services for medically necessary treatment of craniofacial anomalies requiring surgical intervention and delivered as part of a clearly outlined treatment plan. Medical plan benefit.	
Oral surgery				
Simple extractions	Yes			
Surgical extractions	Yes			
Care of abscesses	Yes			

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Cleft palate treatment	No			
Cancer treatment	No			
Treatment of fractures	Yes			
Biopsies	Yes			
Treatment of jaw joint problems (TMJ)				
	No			
Emergency room services provided by a dentist				
	No			
Inpatient Hospital Services				
	Yes			
Anesthesia				
General anesthesia	No			
Intravenous conscious sedation	No			
Non-intravenous conscious sedation	No			
Analgesia (nitrous oxide)	No			

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* 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?).