

November 14, 2001
DENTAL PROVIDERS
MONTANA MEDICAID NOTICE

Due to some confusion regarding billing D1510 (space maintainer-fixed-unilateral) and D1515 (space maintainer-fixed-bilateral), please note that both codes require a tooth number be entered in the tooth number column.

The tooth number will be the tooth number that the space maintainer is replacing. By requiring the tooth number, providers are able to bill more than one space maintainer per day.

You can contact the DPHHS Medicaid dental program officer by e-mail at: dpreshinger@state.mt.us. If you have any questions or require additional information, please call Provider Relations at:

Helena and out-of-state: (406) 442-1837
In-state toll-free: 1-800-624-3958