



Maryland Healthy Smiles Dental Program (MHSDP) Adult Dental Expansion Provider Frequently Asked Questions

SKYGEN administers the Maryland Department of Health Medicaid Administration's Maryland Healthy Smiles Dental Program.

Provider Credentialing and Enrollment

How do I sign up to become a MHSDP provider?

Dental providers who want to participate in the MHSDP can complete a Medicaid provider application at ePREP.health.maryland.gov. For assistance, call the Provider Enrollment Helpline at 1-844-4MD.PROV (1-844-463-7768) or email MDProviderRelations@automated-health.com.

Where can I get help if I have trouble using ePREP?

For tips and YouTube tutorials on the ePREP enrollment process, visit bit.ly/3BkDquk or scan the QR code.



Do I need to enroll again to participate in the adult dental expansion if I am an enrolled Medicaid provider?

There are no additional enrollment or contracting requirements for enrolled providers to participate in the adult dental expansion.

Covered Services

Where can providers find information about covered services?

Providers can find information on covered services in the MHSDP Provider Manual. Providers may access the Provider Manual at dental.mdhealthysmiles.com. Additionally, the Maryland Department of Health's Medicaid Administration has issued a [transmittal](#) to all Medicaid enrolled dentists addressing covered benefits and services.

Where can providers find information on reimbursement rates?

For the MHSDP fee schedule, see [Medicaid Provider Information](#) > Dental and Laboratory Information. In 2022, Medicaid dental providers received a 9.4% increase in reimbursement rates for 32 of the Current Dental Terminology (CDT) codes.

Why doesn't the MHSDP cover removable prosthodontics?

[Senate Bill 150](#) requires Medicaid, beginning January 1, 2023, subject to the limitations of the State budget, to provide dental services, including diagnostic, preventive, restorative, and periodontal services, for all adults over the age of 21 who receive full Medicaid benefits.

The Maryland Medicaid Program would require additional funding to cover more benefits and services including removable prosthodontics for adults. For more information, see [Senate Bill 150 Fiscal and Policy Note](#).

Eligibility

Under the adult dental expansion, who is eligible for dental benefits?

Effective January 1, 2023, dental services will be available to all adults over the age of 21 who receive full Medicaid benefits. Members in the adult dental pilot will be eligible under the adult dental expansion.

How will a provider know if a member is eligible for the MHSDP dental benefits?

Providers must check eligibility and benefits at each visit prior to rendering services. Call 1-844-275-8753 or visit provider.mdhealthysmiles.com.

Member Services

How will the MHSDP notify adult dental expansion members about the new benefits available to them?

Most adult Medicaid members receive healthcare benefits from one of the nine HealthChoice managed care organizations (MCO). The MCOs are conducting outreach to their members about the dental benefits available to adults through the MHSDP effective January 1, 2023.

Additionally, SKYGEN will mail all new members a MHSDP member ID card and packet.

How will a provider know when the MHSDP has assigned them as the dental home for a new member?

Providers can visit provider.mdhealthysmiles.com to view all members assigned to them. After logging into the portal:

- Click on Report at the top of the toolbar
- Click Primary Care Assignments

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- Keep default at “All” for location and provider
- Click Print Report to export to PDF or Excel

What is the role of a member’s legal guardian or authorized representative?

A legal guardian or an authorized representative is responsible for the oversight of a member’s dental care and should be available to discuss treatment and sign documents at each appointment prior to the provider rendering dental services to the member.

Can MHSDP members get free transportation to dental appointments?

Medicaid participants may be eligible for Non-Emergency Medical Transportation (NEMT). If a MHSDP member does not have any transportation, they may be able to get a ride to their local dental office. Rides are for Medicaid covered services only. Members must call their local health department at least two business days before their appointment to see if they qualify for a ride. To find local transportation contacts, see the MHSDP member handbook or the provider manual.

Claims and Billing

Do providers need to request preauthorization for services?

The MHSDP requires preauthorization for certain covered services. See the Provider Manual for more information.

What is the cap on coverage for adults as of January 2023?

Beginning January 1, 2023, the MHSDP will no longer have a cap on adult dental services.

How will the MHSDP reimburse claims for a Federally Qualified Health Center (FQHC) for services rendered?

The MHSDP will continue to pay FQHCs their cost-based rate for dental services rendered to eligible members.

How are the reimbursement rates set for dental services?

Most of Maryland Medicaid’s rates are based on Medicare rates. Because Medicare does not reimburse for most dental services, Maryland compares rates from neighboring Medicaid programs. To view the Annual Report on the Maryland Medical Assistance Program and the Maryland Children’s Health Program – Provider Reimbursement Rates, visit [Reports and Publications](#) > select a year > see Legislative Reports.

Why can't I charge a MHSDP patient who is a no-show a missed appointment fee?

The Code of Maryland Regulations, [COMAR 10.09.05.07 \(H\)](#), prohibits Medicaid providers from charging Medicaid members for missed appointments.

Provider Service Requirements

Does the MHSDP have a patient quota or number of adults that it requires a dental office to treat?

The MHSDP has no patient quota. However, MHSDP strongly encourages all enrolled dental professionals to provide needed dental services to Maryland's most vulnerable citizens.

Does a participating provider have to see adult dental expansion patients?

If you are a dentist enrolled with the MHSDP, the program expects you will see the same patients you see for commercial and other insurances. Enrolled providers agreed to adhere to [COMAR 10.09.36.03 \(11\)](#) and the Provider Agreement, which includes providing services without regard to race, color, national origin, age, religion, gender, sex, developmental disabilities, mental disabilities, physical disabilities, sexual orientation, or marital status. However, periodontists will only see patients under the age of 21.

If a dental office does not routinely provide specialty care like a root canal or extraction, will there be specialists available who can provide the services for the adult dental expansion members?

Specialists enrolled in the MHSDP are available to provide services to the new adult members.

Program Expansion

Under the adult dental expansion, how many additional individuals will have coverage by county and zip code?

More than 800,000 adults will become eligible for the MHSDP on January 1, 2023. For more information on adult dental expansion demographics, email mdh.dentalgroup@maryland.gov.

What will happen to the existing HealthChoice MCO dental coverage?

The MCOs will sunset their existing limited dental plans on January 1, 2023. Everyone with full Medicaid coverage will be eligible for and transition to the MHSDP.