

Fast Facts: PHDHPs in Community Health Centers

- Public Health Dental Hygiene Practitioners (PHDHPs) may practice in specific settings without supervision or authorization from a dentist
 - If practicing and/or billing under the supervision (direct or general) of a dentist and billing as such, the PHDHP is practicing as a Registered Dental Hygienist (RDH).
- PHDHPs should obtain an NPI number and enroll in the MA Program to obtain a Promise ID number if rendering services to MA Beneficiaries. A location extender is required for each service location.
- If an FQHC/RHC is adding dental services to the clinic, an interim dental encounter rate will be set.
 - The interim rate is converted to a final PPS dental encounter rate following review of the FQHC's/RHC's cost report of the first full fiscal year following the establishment of the interim dental encounter rate.
- FQHCs/RHCs should submit dental claims to the MA Program using the CMS-1500 Claim Form or via Internet Claim.
 - Procedure code T1015 (clinic visit/encounter, all inclusive) should be used with a U9 modifier which signifies that a dental service was provided.
 - A dental diagnosis code is required on the Claim Form or Internet Claim.
 - Services should be billed under the facility. Payment will be remitted to the facility.
 - Individual Managed Care Organizations (MCOs) may request use of the ADA claim form; however, the specific rules within each MCO will vary.
- FQHCs/RHCs may receive one dental PPS payment per beneficiary per day.
 - Treatment must not be prolonged unnecessarily.
- FQHCs and RHCs are an approved practice setting for PHDHPs.
 - Reimbursement is sent to the facility, not directly to the PHDHP.
 - Ideally, the PHDHP working in an FQHC/RHC is considered to be an employee of the FQHC/RHC.



PENNSYLVANIA ASSOCIATION OF COMMUNITY HEALTH CENTERS

