1ST VISIT	Section **218.100** Dental Manual Diagnostic Cast Upper D0470 (Material) Section **262.200** Dental Manual Limited Oral Evaluation D0140 (Time)	Providers are allowed 1 unit for each arch and 1 unit for each limited oral evaluation. Full Set = 2 X D0470 2 X D0140
Provider will send castings to Green Dental Lab. Providers are responsible to provide the patients name, date of birth, and Medicaid ID. If a prior authorization is required, enter "Green Dental" as the servicing provider to the prior authorization request.	**Dental Contractor** **Green Dental Laboratory** **1099 Wilburn Road** **Heber Springs, AR 72543** 1-800-247-1365 Fax 501-362-6717 Contact Name: Tammy Horton, Patricia King	
2nd Visit (Bite Rims)		
Provider receives bite rims back from Green Dental Lab. Patient returns and necessary adjustments are made then castings are sent back to Green Dental Lab.	Limited Oral Evaluation D0140 (Time)	Providers are allowed 1 unit for each arch. Full Set = 2 x D0140
3rd Visit Wax-Try-Ins		
Provider has received wax try-ins. Patient returns, any necessary adjustments are made, and castings sent back to Green Dental Lab.	Limited Oral Evaluation D0140 (Time)	Providers are allowed 1 unit for each arch. Full Set = 2 x D0140
4th Visit Delivery		
Delivery of dentures. Patient returns to try in completed set of dentures.	Section **224.000** Dental Manual If adjustments are necessary: D5410 Adjustment Complete Denture Maxillary Arch (Upper) D5411 Adjustment Complete Denture Mandibular Arch (Lower)	If adjustments are done bill the appropriate code. Each adjust is 1 unit. *Note each adjustment code is allowed 3 per lifetime and count against $500.00 benefit limit.

Adult Dental Program has a benefit limit of $500.00 per SFY (state fiscal year).

Extractions do not count against the $500.00 benefit limit. Any visits or treatment before and during the denture process count against the $500.00. Providers do NOT receive a bill from Green Dental Lab as they will be paid by Medicaid.