ePA Help Sheet – Dental and EPSDT Dental

Dental

Request Type	ePA Module	Request /Update Type	Place of Service	Service Type	Code Types Accepted	Forms to be Submitted with ePA Request
Panorex	Initial Authorization Request	Dental Panorex	Office	Dental Care	CDT	Map 9, Letter of Medical Necessity
Perio Scaling	Initial Authorization Request	Dental Perio Scaling	Office	Dental Care	CDT	Map 9, Perio Charting

EPSDT Dental

Request Type	ePA Module	Request /Update Type	Place of Service	Service Type	Code Types Accepted	Forms to be Submitted with ePA Request[1]
Nitrous Oxide	Initial Authorization Request	EPSDT Dental Nitrous	Office	Dental Care	CDT	Map 9, Treatment Plan
EPSDT Dental	Initial Authorization Request	EPSDT Dental	Office	Dental Care	CDT	Map 9, Map 005, Pictures, Xrays

[1]Not all forms listed in this column are required for each request. Providers are responsible to submit complete request packets using the appropriate forms for the type of request they are submitting.