



September 12, 2020

RE: Dental Anesthesia Prior Authorization Requests

Effective immediately, Cook Children's Health Plan requires prior authorization for procedure code 00170 with modifier U3 for STAR and STAR Kids Members < 7 years old.

To facilitate claims processing, prior authorization requests for procedure code 00170 must be submitted in units. Cook Children's Health Plan will allow 5 (five) units. Providers may request additional units; additional documentation supporting the request must be submitted for review.

Providers may refer to the section titled *Dental Therapy Under General Anesthesia* in the Texas Medicaid Provider Procedures Manual located on tmhp.com for further guidance.

Providers may contact CCHPPriorAuthorizations@cookchildrens.org with questions specific to authorization requirements. For additional questions please contact Cook Children's Health Plan Provider Support Services at 888-243-3312 or email CCHPPProviderRelations@cookchildrens.org.

Sincerely,

Cook Children's Health Plan

801 Seventh Avenue Box 2488
Fort Worth, Texas 76113-2488
888-243-3312