



MANITOBA PUBLIC INSURANCE PROTOCOL FOR DENTAL PROFESSIONALS

THE PROCESS BETWEEN MANITOBA PUBLIC INSURANCE AND THE DENTAL PROFESSION TO EXPEDITE DENTAL CLAIMS

The Motor Vehicle Accident (MVA) occurs.

The Dentist collects all the relevant accident information and submits it to Manitoba Public Insurance (MPI).

MPI reviews the submitted information, determines whether the information supports a probable cause and effect relationship to the MVA, and whether the requested treatment is medically required as a result of the MVA.

MPI IS RESPONSIBLE TO RETURN THE CLAIMANT'S DENTAL TISSUES TO THEIR PRE-ACCIDENT STATUS AS MUCH AS IS REASONABLE

THE DENTAL CLAIMS PROCESS

After an MVA:

- The claimant may contact MPI directly and be given a Claim file number by his /her assigned case manager. The claimant must see their Dentist to have an examination to make a dental diagnosis. The claimant may or may not have been given an MPI Dental Report form to take to the dental office.
- The claimant may visit the Dentist's office not having previously contacted MPI; however, contact with MPI is preferred.

In order to initiate a dental claim review, an MPI Dental Report form must be completed in full by the Dentist. This form can be downloaded from

<https://apps.mpi.mb.ca/HealthCareServices/DentalReport.aspx>

Timing is important. The sooner the Dental Report form is submitted to MPI with all the relevant information after the accident (date of loss), the easier it is to establish a temporal relationship between the injury and the MVA.

Therefore treatment for the claimant is not delayed.

CAUSATION BETWEEN THE MVA AND THE DENTAL INJURIES MUST BE ESTABLISHED BY MPI BEFORE MPI AUTHORIZES THE COMMENCEMENT OF ANY DEFINITIVE DENTAL TREATMENT.

THE DENTAL OFFICE AND MPI PROCEDURES

COMPREHENSIVE TREATMENT MUST BE PREAUTHORIZED BY MPI.

CLAIMANTS SHOULD NOT BE ASKED TO FUND EMERGENCY TREATMENT, FOR TEMPORIZATION, RELIEF OF PAIN OR INFECTION. MPI CAN BE BILLED DIRECTLY FOR THIS TREATMENT.

Clear, complete documentation is required to establish a relationship between the reported dental injury and the MVA.

The Dentist should LEGIBLY complete each section of the MPI Dental Report form in Black Ink. (This form is scanned when processed by MPI.) The form must be readable.

The Dentist must forward the Dental Report form listing all the clinical diagnostic findings to MPI using the claimant's individual claim number.

The clinical findings must include:

- An **MPI Dental Report form** completed in all sections in black ink.
- A **description of the dental injury and how it is related to the MVA.** (This information describes the mechanism of injury.)
- A **diagnosis** and the prescribed treatment which affords the best prognosis for the tooth/teeth.
- **Relevant radiographs of the injuries.** These radiographs must be of diagnostic quality and the tooth shown should be labeled.

RADIOGRAPHS ARE MANDATORY IF TREATMENT IS REQUESTED FOR:

- **MINOR DAMAGE TO ONE OR MORE TEETH** –One periapical radiograph of each tooth showing the entire tooth.
- **FOR A CROWN/IMPLANT/BRIDGE** –A panoramic radiograph and individual radiographs of each injured tooth showing the entire tooth.
- **Relevant Photographs** labeled with tooth numbers. If treatment for CROWNS/IMPLANTS/BRIDGES is requested, photographs are **mandatory**.

- **Diagnostic upper and lower study models.** The models should be trimmed, labeled and dated and accompanied by a bite registration. If treatment for CROWNS/IMPLANTS/BRIDGES is REQUESTED Study models are **mandatory**.

MPI WILL NOT PROCESS ANY CLAIM UNLESS THE CORRECT INFORMATION IS RECEIVED. (See above)

- FOR REQUESTS for TMD TREATMENT the following should be included:
 - Complete dental charting.
 - A panoramic radiograph.
 - The TMD range of motion measurements (a ruler method is sufficient).
 - Computerized diagnostics for TMJ are not considered medically necessary without prior review and pre-approval.

No referral to another dentist or specialist for an examination related to an MVA will be funded by MPI unless causation has been established.

IF THE CLAIMANT WISHES TO PROCEED WITH DENTAL TREATMENT BUT CAUSATION HAS NOT YET BEEN ESTABLISHED, THE CLAIMANT MAY PROCEED WITH THE TREATMENT. HOWEVER, THE DENTIST MUST ADVISE THE CLAIMANT THAT MPI MAY NOT FUND TREATMENT IF CAUSATION IS DENIED. THE CLAIMANT SHOULD BE MADE AWARE THAT MPI ONLY FUNDS TREATMENT CAUSALLY RELATED TO THE MVA, BASED ON THE MDA RECOMMENDED FEE GUIDE.

If the Dental treatment is complicated, (for example it will take several months or years to complete, or will involve several different specialists.) MPI requires a type written document describing the entire treatment plan. The plan must explain what is involved with each stage in the treatment, and who is responsible for the overall co-ordination of the treatment.

THE TREATING DENTIST MUST DISCUSS THE COMPLEXITY OF EACH RECOMMENDED PROCEDURE WITH THE CLAIMANT. The discussion should include:

- The time it will take to restore the claimant to pre MVA status.
- The number of appointments for each procedure.
- The length of healing time between each procedure.
- Any special post treatment techniques that must be instituted to maintain the MPI funded treatment.
- MPI expects, as well, that all claimants receiving MPI funded dental treatment, are educated in regular daily oral home care routines to ensure the proper prognosis for their dental health. Claimants should be instructed to attend the dental office for regular checkups and hygiene appointments. The Dentist must inform the claimant that routine in-office care is not funded by MPI.

Retreatment of Procedures previously funded by MPI

A new MPI Dental Report form must be submitted to MPI requesting the new treatment.

The form must detail what re-treatment is required and how this treatment became necessary. The appropriate radiographs, photographs and study models must be forwarded to MPI. Before the Dental Consultant renders an opinion, questions may be asked regarding the maintenance of the previously funded treatment and why previous treatment failed.

THE MPI PROCEDURES WHEN DEALING WITH DENTAL CLAIMS

Once ALL the relevant details have been forwarded to MPI, the information is scanned and referred to the Dental Consultant by the Benefit Administration Unit (BAU.)

The Dental Consultant reviews the claim using the following information:

- The first statement from the claimant to the case manager after the MVA.
- Photographic evidence and the verbal description of the damage to the vehicle.
- The ambulance report.
- The police report.
- The reports from any attending health care workers. This could include physiotherapists, the emergency team at the hospital and the family Doctor. Each person submits a report and any treatment required.
- The hospital report.
- The Dental Report from the attending Dentist.

When reviewing the report and the clinical findings from the Dentist,

- The Dental Consultant **may**:
 - Request photocopies of the dental clinical notes up to five years pre MVA. This is to determine if any pre MVA condition could affect the post MVA treatment.
 - Refer the claimant to an Independent Dental Reviewer for an assessment of the proposed treatment plan.
 - Request further clinical information from the treating dentist.

When MPI makes a decision, the Dentist and the claimant will be contacted by the case manager or a BAU representative.

MPI FUNDS

The Dentist who does the initial examination and provides the treatment

- Codes to be used: 01204 A specific examination for a localized area.

 01103 If this code is used for the first visit, then all charting and clinical notes [as described in the MDA fee guide] must be submitted

along with the completed Manitoba Public Insurance Dental Form Report.

01204 A recall examination for a specific situation in a localized area upon a request by Manitoba Public Insurance for additional information or upon pre- approval by Manitoba Public Insurance to verify/follow-up on injury related to the motor vehicle accident).

Codes for emergency treatment without preauthorization to manage pain and infection.

Fees

Code 93122 (see tariff below) is to be used when requesting payment for completing the Manitoba Public Insurance Dental Report Form. This fee includes the Manitoba Public Insurance Implant Request Form, when applicable and if submitted. Both forms must be **completed in full**.

Description	From Date of Exam	January 1, 2014	January 1, 2015	January 1, 2016
MPI Dental Form Report	≤ 14 days	\$65.75	\$67.65	\$69.68
	15-28 days	\$53.75	\$55.25	\$56.91
	>28 days			

- If you are providing dental care without prior written authorization from Manitoba Public Insurance, you must inform the claimant that payment may be his or her responsibility.
- If a subsequent dental narrative report is requested by MPI, the fee paid will be commensurate with the fees paid to other health care professionals.
- MPI uses the Manitoba Dental Association (MDA) recommended fee guidelines to determine reasonable fees for approved dental services.
- Fees for the immediate post-accident assessment, including the initial examination, radiographs and any emergency treatment codes should be forwarded to BAU for expedient processing.
- Expense fees and/or lab fees must be itemized separately from procedure fees when submitted for pre-authorization.

Copies of original itemized laboratory invoices must be submitted with the request for payment

once the procedure has been completed.

- Direct billing from the dental office to Manitoba Public Insurance is recommended. If the treating Dentist's fees exceed the fees funded by Manitoba Public Insurance, the claimant must be informed prior to the procedure being performed.
- Pre-payment of any dental care, including orthodontics, is not permitted. For a single procedure spanning more than one year, please submit a Dental Report Form with an update on the claimant's treatment progress, reason for any delays and percentage of the procedure that has been completed. Manitoba Public Insurance will review the file for payment of treatment to date.
- Dental surgery performed in a hospital must be billed to Manitoba Health according to Manitoba Health legislation, for example, bone grafting. However, implants cannot be billed to Manitoba Health.

Treatment for injured teeth must be based on best practices.

The treatment should take into consideration:

- The claimant's preaccident dental condition.
- The post accident condition.
- The clinical presentation.
- Any complicating factors. This consideration should include both dental and medical factors.
- The Dentist should consider any previous treatment the claimant may have had in the past and how it may impact the current treatment needs.

The Proposed treatment plans should show clearly why the planned treatment is the most appropriate for the claimant.

Please note that if your patient's choice of treatment does not have the best prognosis, re-treatment costs will not be covered by Manitoba Public Insurance. In addition, if a patient chooses to have a more expensive treatment than can be approved by Manitoba Public Insurance, the patient will be responsible for the difference in the fees and any costs related to re-treatment if the initial treatment fails.

Splint therapy for collision-related TMD injuries.

The MPI Dental Report form must be completed in full, including the dental chart documenting the teeth present. All the immediate post MVA TMD measurements must be documented on the initial Dental Report form. These measurements will be compared to the current measurements if a further TMD report is submitted.

- Any pre MVA history of TMD must be included on the MPI form.
- The MPI protocol for TMD treatment begins with one flat plane stabilization appliance (procedure code **14611** or **14612**). Up to three post insertion adjustments are included in the authorization of a splint.
- Diagnosis & Treatment of TMD, and Orthodontics & TMD literature is available at the link provided, that outlines evidence based and best practices in these areas.

If natural teeth are to be re-contoured for aesthetic or functional reasons, specific details and documentation including a study model or photograph must be included with the request for pre-authorization on the Manitoba Public Insurance Dental Report Form.

Hygienists

Routine in-office hygiene dental care is not funded by MPI.

Denturists

Denturists must complete a Denturist report form documenting the treatment to be performed.

Prior to fabricating a partial denture, if the claimant has one live (natural) tooth present in the mouth, the denturist must submit an MDA Oral Health Certificate completed by a licensed dentist.

The Oral Health Certificate issued by the Manitoba Dental Association is required and must be completed in full. Any diagnosed clinical treatment must be completed prior to dentures being fabricated. The Oral Health Certificate must be submitted to MPI prior to denture fabrication. A prescription from a dentist is required for services from a denturist when the claimant has any remaining live natural teeth prior to any authorization for the denturist treatment requests.

WHAT TREATMENT IS NOT FUNDED BY MPI

1. Dental care not related to the motor vehicle accident.
2. Post MVA routine regular examination and hygiene appointments.
3. Oral hygiene aids and accessories.
4. Dental radiographs not related to trauma from MVAs. For example bitewing radiographs taken to assess dental caries when only an anterior tooth was directly involved in the MVA. Complex radiographic imaging that has not been pre-authorized.

- Treatment which does not comply with best practices supported in the current dental literature.
- Re-treatment of all-ceramic onlays/crowns in the molar regions.
- **Changes in a treatment plan related to the claimants not proceeding with pre-authorized treatment in a timely manner.**
- **Treatment that is a result of claimant non-compliance. Examples could include:**
 - **Failure to wear a prescribed splint.**
 - **A diet conducive to rampant [widespread] dental caries [cavities].**
 - **Inadequate personal dental hygiene care.**
 - **Not following a smoking cessation program when implants are the treatment of choice.**
- MPI does not fund examinations by Denturists or for completion of the MPI Dental Insurance Forms by a Denturist.

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MPI terminology:

A Case Owner

Refers to the person who is assigned to manage a bodily injury claim (the case) for rehabilitation, benefit administration, etc., and who is responsible for completing and/or delegating all tasks related to the case.

A case owner can be any of the following: Associate Case Manager, Case Manager 1, Case Manager 2, Senior Case Manager, PIPP Benefit Administrator [BAU], Injury Claims Adjuster, Senior Injury Claims Adjuster,

BAU is the Benefit Administration Unit. This department investigates, assesses, and administers bodily injury claim benefits, such as chiropractic and physiotherapy treatment, permanent impairment ratings, dental, and other medical expense claims.