



## **Nevada Office of HIV/AIDS Ryan White Part B Program Dental Exception Form Policy**

### **SCOPE OF COVERAGE**

Directly applicable to all Ryan White Part B funded oral health providers.

### **PURPOSE OF PROCEDURE**

To assist providers in submitting documentation to gain approval to pay for dental services beyond the per patient spending cap for dental treatment dollars.

### **BACKGROUND**

If a Ryan White Part B client is in need of dental services beyond what is covered by the expenditure cap of treatment dollars, it is possible to get these services if the money is available and certain criteria are met.

Services must be deemed necessary by a licensed dentist, oral surgeon, etc. and the Dental Exception Form must be filled completed and submitted to the Nevada Office of HIV/AIDS (OHA). An OHA staff member will review the request and make the determination to approve or deny additional funding. This determination will be sent within five (5) business days to the requestor so services can either treatment can continue or other plans can be addressed with client.