



Subject: Dental Services Resulting from Accidental Injury

Revision: 4/25

DESCRIPTION

According to the OSU Faculty and Staff Health Plans Specific Plan Details Document (SPD), expenses for dental work are covered if they are for the prompt repair of an injury to the jaw, sound natural teeth, mouth, or face, which are required as a result of an accident. Dental services are limited to the treatment of the injury that is rendered within 12 months of the injury or within 12 months of enrollment in the plan, whichever is later. Injury as a result of chewing or biting is not considered an accidental injury. Dental services resulting from an accidental injury are limited to a maximum benefit of \$3,000 per injury.

APPLICABILITY

This policy applies to all OSU Health Plan (OSUHP) benefit plans

DEFINITIONS

Accidental Dental Services are medically necessary services that provide a baseline restoration of form and function to a natural tooth that was damaged as a result of an accidental injury.

Sound natural tooth is a tooth that is stable, functional, and free from decay and advanced periodontal disease.

POLICY

The OSU Health Plan covers expenses for dental work when all of following criteria are met:

- Dental services are for prompt repair (within 12 months) of an accidental injury¹ to the jaw, sound natural teeth, mouth, or face.
- Covered services include (not all-inclusive list):
 - Splint
 - Extraction
 - Artificial crown
 - Root canal
 - Dental implant
 - Bone graft

PROCEDURE

For covered persons who have elected a network-only plan, services must be provided in network when possible (i.e., oral surgeons). However, general dentists, endodontists and/or periodontists often provide these services. These providers are not typically in network with the medical benefit. For non-network providers, the covered person must pay out of pocket for treatment then submit itemized receipts to OSUHP for review. If the above criteria are met, OSUHP will then send covered services to the third-party administrator (TPA) for reimbursement according to the covered person's in-network benefit.

PRIOR AUTHORIZATION

Prior authorization is required for dental services resulting from accidental Injury

EXCLUSIONS

OSU Health Plan does not cover the following services:

- Injuries resulting from chewing or biting
- Services provided beyond 12 months from the date of the injury (or enrollment)

¹ Or enrollment, whichever is later. See SPD for details.

- Charges in excess of the \$3,000 benefit maximum (per injury)

CODES

No specific codes apply

REFERENCES

"Faculty and Staff Health Plans Specific Plan Details Document." The Ohio State University Office of Human Resources, Oct. 2022. Web. <https://hr.osu.edu/wp-content/uploads/medical-spd.pdf>

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