

Dental Benefit Limit Exception Request

Members Last Name:		Provider Last Name:	
Members First Name:		Provider First Name:	
Member ID:		Provider NPI:	
Member Date of Birth:		Provider Address:	
Benefit Exceptions are only considered in the CHIP program			

Prior authorization is required. Please submit this form 60 days prior to services. This request must include a **narrative** from the members primary care physician or other treating medical specialist. The request must include documentation supporting the need for the services, including but not limited to documentation, diagnostic study results, radiographs (if applicable), medical and dental history.

The request should be sent to the following address.

UnitedHealthcare MS CHIP
 Benefit Limit Exception Request
 PO Box 1313
 Milwaukee, WI 53201

MS CHIP will incorporate a benefit limit exception to the existing MS CHIP dental benefit. This exception process may be used for MS CHIP dental benefit members who have exhausted their annual benefit maximum of \$2000.00 and/or has one of the following circumstances: Please check all the boxes below that apply to your request.

- the member has a serious chronic illness or health condition and without the additional service, the member’s life would be in danger; or
- the member has a serious chronic illness or health condition and without the additional service, the member’s health would get much worse; or
- the member has a dental emergency defined as sudden onset of excessive pain, swelling or bleeding
- the member would need more expensive services if the exception is not granted; or delaying treatment would adversely impact the member’s dental health.

The member may be eligible for additional covered services needed to eliminate the pain, swelling or bleeding and stabilize the patient’s condition. This does not necessarily include definitive dental treatment.

Providers Signature: _____ Date: _____

You will receive a response in writing of approval or denial within 14 days of receipt of the request. For denied services, the provider can follow the standard appeal process.