

Exhibit M – Administration of Nitrous Oxide

DentaQuest adheres to the following policy for evaluating approving General Anesthesia and IV Sedation to maintain consistency throughout its dental networks.

I. Documentation May be Needed for Pre-Authorization of Procedure

- A. Treatment plan (pre-authorized if necessary)
- B. Member specific narrative describing medical necessity for use of nitrous oxide.
- C. Treatment rendered under emergency conditions, when pre-authorization is not possible, requires submission of a treatment plan and narrative of medical necessity for retrospective review and payment.

II. Codes

DentaQuest adheres to the code definitions as described in the American Dental Association Current Dental Terminology User's Manual.

III. Criteria

- A. In most cases requests for nitrous oxide are authorized (for procedures covered by health plan) if any of the following criteria are met:
 - 1. Extensive or complex procedures such as:
 - a. Four (4) or more simple and/or surgical extractions
 - b. Impacted wisdom teeth
 - c. Surgical root recovery from maxillary antrum
 - d. Surgical exposure of impacted or unerupted cuspids
 - e. Radical excision of lesions in excess of 1.25 cm.

Reference:

- American Association of Oral Maxillofacial Surgeons
- American Dental Association
- OAC 5160-5-01 Dental Services

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