
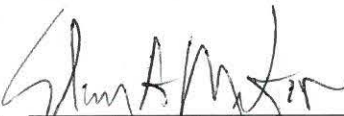


Wood County Board of Developmental Disabilities

POLICY

**Policy #:** 01-ALL-ALL-0160  
**Effective Date:** 03-01-06  
**Person Responsible:** Superintendent

**Subject:** Payment for Dental Services  
**Last Revision:** 09-01-09

**Approvals/Date:**  12/11/17  12/11/17  
Superintendent, WCBDD Date Board President, WCBDD Date

The Board has established a policy for the payment of dental services that are not covered by Medicaid for adults who are eligible for services from the Wood County Board of DD.
Reimbursement will be paid according to dental industry standards.
Prior to requesting payment from the Board, an assessment will be conducted by the Service Coordinator to determine the eligible individual's financial need.
The Board shall be the payor of last resort.
The Board shall pay for no more than one (1) routine visit per year, unless additional services are determined to be medically essential by the dentist. As needed, the Board will also pay the required co-payment for dental services.
For efficiency and effectiveness purposes, this policy shall be reviewed on a quarterly basis and shall be effective for no longer than twelve (12) months following the implementation date. Expenditures for this policy, in conjunction with the medical services policy, shall not exceed an annual cost of \$20,000 per person.

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