



Standard New York CHP Benefit Orthodontic Review Form

SUBMIT: cephalometric image, panoramic image, 5-7 intraoral photographs, and standard review form.

Orthodontics: We cover orthodontics used to help restore oral structures to health and function and to treat serious medical conditions such as: cleft palate and cleft lip; maxillary/mandibular micrognathia (underdeveloped upper or lower jaw); extreme mandibular prognathism; severe asymmetry (craniofacial anomalies); ankyloses of the temporomandibular joint; and other skeletal dysplasia.

Provider Name:
Patient Name:
Date

Indicate an "X" if present

- Cleft palate and/or Cleft lip
- Maxillary/mandibular micrognathia (underdeveloped upper or lower jaw)
- Extreme mandibular prognathism
- Severe asymmetry (craniofacial anomalies)
- Ankyloses of the temporomandibular joint
- Other skeletal dysplasia

Include a narrative of medical necessity here: