

THE SIGNAL | DENTAL PRACTICES | TEXAS RELEVANCE

Medicaid is pressuring states to move away from dental amalgam - but Texas has not made a verified change.

The federal guidance matters, but it is not a nationwide reimbursement change. States still decide what Medicaid covers.

IN PLAIN ENGLISH

CMS is urging every state Medicaid program to restrict or end coverage for amalgam fillings, or to encourage resin-based alternatives. The federal guidance is not a requirement: states still make their own coverage decisions.

Texas's public Medicaid provider manual, checked August 4, continues to list both amalgam and resin restoration codes for eligible children and youths and for certain adults living in intermediate-care facilities. We did not find a Texas notice changing that policy.

For multi-provider dental practices, the immediate issue is not to assume reimbursement has changed. It is to watch for a state or managed-plan decision that could alter covered codes, restorative-material economics, and patient conversations.

01 Federal direction CMS asked states to restrict or end coverage for amalgam codes D2140-D2161, or encourage resin alternatives such as D2330-D2394.	02 State authority The request is guidance, not a requirement. States remain responsible for Medicaid coverage and medical-necessity decisions.	03 Texas status The current public Texas manual still lists both restoration options for bounded eligible populations. No Texas change notice was verified.
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WHAT TO WATCH

Texas Medicaid bulletins, provider-manual revisions, managed dental plan notices, effective dates, and fee-schedule changes.

THE BOUNDARY

This is a business-policy brief, not clinical, coding, billing, legal, or compliance advice. A federal recommendation should not be treated as a verified Texas coverage change.

SOURCE TRAIL

The evidence behind this Signal

These three sources do different jobs: the federal announcement states the recommendation, the ADA explains its limits, and the Texas manual shows the current public state policy we could verify.

HHS/CMS - July 22, 2026 - Primary federal announcement	Recommendation to states, procedure-code ranges, and policy framing. https://www.hhs.gov/press-room/trump-administration-encourages-states-end-mercury-containing-dental-fillings.html
American Dental Association - July 24, 2026 - Qualified stakeholder view	Clarifies that the guidance is not mandatory and that states retain coverage decisions. https://adanews.ada.org/ada-news/2026/july/center-for-medicaid-and-chip-services-encourages-states-to-restrict-amalgam-coverage/
Texas Medicaid Provider Procedures Manual - Retrieved August 4, 2026	Current public Texas policy text listing amalgam and resin restoration benefits for bounded eligible populations. https://www.tmhp.com/sites/default/files/microsites/provider-manuals/tmpppm/html/TMPPM/2_04_Childrens_Services/2_04_Childrens_Services.htm

QUESTIONS FOR THE NEXT UPDATE

Has Texas issued a Medicaid bulletin or revised the provider manual? Has a managed dental plan issued a plan-specific notice? Have covered codes, fees, or effective dates changed?

EVIDENCE BOUNDARY

The absence of a public Texas change notice is not proof that no internal or future change exists. This pilot reports the latest authoritative public evidence we could verify by the editorial cutoff.