



PROVIDER BULLETIN

BT200227

JUNE 14, 2002

To: All Dentists and Dental Clinics Including Federally Qualified Health Centers and Rural Health Clinics

Subject: Dental Code Changes

Note: The prior authorization, payment methodology, and maximum fees information in this bulletin may vary for providers rendering services to members enrolled in the risk-based managed care (RBMC) delivery system.

Overview

The Indiana Health Coverage Programs (IHCP) recently completed a review of dental services currently billed under local codes. Table 1.1 shows the local codes that will be end-dated and the replacement codes that will be used, effective July 29, 2002. There are also codes in Table 1.1 determined to be non-covered services. Claims submitted with end-dated procedure codes for dates of services on or after July 29, 2002, will be denied. The replacement procedure code is to be billed after July 29, 2002, for the specified services.

Table 1.1 Coding and Billing Information

Procedure Code	Description	Replacement Code	Description
D0130	Emergency oral examination	D0140	Limited oral evaluation – problem focused
Z3210	Therapeutic apical closure (pulpectomy)	D3351	Apexification/recalcification, Initial visit
		D3352	Interim visit
		D3353	Final visit
D9951	Occlusal adjustment, limited	N/A	Non-covered service

(Continued)

Table 1.1 Coding and Billing Information

Procedure Code	Description	Replacement Code	Description
D9552	Occlusal adjustment, complete	N/A	Non-covered service
Z5155	Administration of SQ/IM/oral sedation with monitoring, by report	D9248	Non-intravenous conscious sedation.

- Procedure code Z5155 was made non-covered effective March 29, 2002, as stated in *Banner Pages BR200207* and *BR200208*, published February 12, and February 19, 2002, respectively. Oral surgeons and practitioners who hold a permit for light conscious sedation or deep sedation may use *Current Procedural Terminology (CPT) procedure codes 99141, Sedation with or without analgesia (conscious sedation); intravenous, intramuscular, or inhalation* and *99142, Sedation with or without analgesia (conscious sedation); oral, rectal and/or intranasal*. The use of these codes requires the presence of an independent trained observer to assist the physician in monitoring the patient's level of consciousness and physiological status, as stated in the *CPT 2002 Manual*, published by the American Medical Association.
- D0130, *Emergency oral examination*, is a deleted code. Procedure code D0140, *Limited oral evaluation – problem focused*, should be used in place of D0130. D0140 is to be used as defined in the *Current Dental Terminology (CDT-3) Users Manual, Version 2000*. This type of evaluation is for patients who have been referred for a specific problem, such as dental emergencies, trauma, acute infections, and so forth. D0140 is not to be used for periodic oral evaluations or other types of evaluations. Periodic oral examinations or other types of evaluations that are filed using D0140 will be subject to recoupment. Documentation in the dental and medical records must support that the oral evaluation rendered is in compliance with the procedure code definition for the dental code being used. Dental providers are reminded that D0170, *Re-evaluation – limited, problem focused*, is a covered dental procedure code as stated in *Bulletin BT200010*, published April 4, 2000. Dental procedure code D0120, *Periodic oral evaluation*, is limited to one every six months, per member, per provider.

Further Information

Questions about this bulletin may be directed to EDS Customer Service at (317) 655-3240, in the Indianapolis local area, or 1-800-577-1278.

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