

Dental claims review submission requirements

This guide outlines what information is needed to accurately and quickly review and pay dental claims.

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Elements of claims review

We assess dental claims against generally accepted standards of care, contractual requirements, and Current Dental Terminology (CDT) procedure coding. Your office can ensure timely, accurate payment by providing complete, precise information in your claims. Using correct CDT codes helps us understand what type of service has been delivered and how to pay a claim for that service.

To establish generally accepted standards of care, accuracy of CDT coding, and contract alignment, certain radiographs or photographs may be requested for clarification. Clinical chart notes, operative reports, exam forms, specialty referral forms, orthodontic indices, dental history, periodontal charting, narratives, pathology reports, and anesthesia records may be required.

Dental review means dental services that a dentist provides to a patient for the purpose of evaluating, diagnosing or treating a dental injury or disease or its symptoms. The dentist will use sensible clinical judgment when providing dental services. Dental services should be in accordance with the generally accepted standards of dental practice in terms of type, frequency, extent, and considered effective for the patient's dental injury or disease. The dental service is not primarily performed for the convenience of the patient or dentist, is not cosmetic, and is not more costly than an alternative service.



For dental purposes, generally accepted standards of dental practice means:

- Standards that are based on credible scientific evidence published in peer-reviewed, dental literature recognized by the practicing dental community
- Specialty society recommendations or criteria
- The views of recognized dentists practicing in the relevant clinical area
- Any other relevant factors from credible sources

Contract alignment means certain contractual items (e.g., time limits, frequency of procedures, age limits, exclusions) are supported by the clinical and administrative documentation submitted by the practitioner's office.

CDT coding accuracy means that current CDT Procedure Code(s) submitted for procedure(s) performed by the practitioner correspond with CDT Nomenclature and Descriptors. In August 2000, the CDT was designated by the federal government as the national terminology for reporting dental services on claims submitted to third party payers, in accordance with authority granted by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Dental services reported must utilize CDT Procedure coding and correspond with CDT Nomenclature and Descriptors.

Note: If a service is covered by the plan, when any service is performed in conjunction with or in preparation for a non-covered or denied service, all related services are also either not covered or denied.

The plan has a 12-month claims filing limit unless otherwise stated in the plan's contract of limitations.



Criteria required for a claim or pre-determination

Radiographic images

Radiographic images must be pre-treatment, current within 12 months, include an acquisition date, be properly mounted, labeled and oriented. The radiographic images must be of diagnostic quality - meaning sufficient contrast and density with no geometric distortion. All periapical radiographic images must include the entire tooth structure from the top of the crown to the apex of the root. Radiographic images cannot be faxed due to loss of diagnostic quality.

Periodontal charting

- A. Your documentation should follow 6-point periodontal charting as described by the American Dental Association (ADA®) and American Academy of Periodontology (AAP).
- B. Charts should be labeled and dated within 12 months of the submitted procedure.
- C. For surgical periodontal treatment, periodontal charting after completion of non-surgical periodontal therapy, **CDT codes D4341, D4342** and/or periodontal maintenance, **CDT code D4910** is required.

Submitted documentation

All submitted documentation must be legible. Chart note entries, narratives, correspondence, and other handwritten documentation must be written neatly, only in ink, and contain patient identification (i.e. claim number). Failure to provide legible records may result in postponement of determination of benefits and/or denial of payments. Clinical chart notes that are not legible must be transcribed, and both the original and transcription must be submitted.

Clinical chart notes

Clinical chart notes are acceptable when the documentation adequately represents the clinical findings, diagnosis, treatment plan, and treatment rendered.

Required attachments by CDT codes

The following codes for treatments and procedures applicable to this document are included below for informational purposes. Inclusion or exclusion of a procedure, diagnosis, or device code(s) does not constitute or imply member coverage or provider reimbursement policy. Please refer to the member's contract benefits in effect at the time of service to determine coverage or non-coverage of these services as it applies to an individual member.

Restorative procedures (D2390-D2983)		
Procedure code	Description	Send with claim/pre-determination
D2390	Resin crown	Prior placement date, dated pre-operative periapical radiographic images including bitewings. Periodontal charting upon request.
D2510 – D2664	Inlays/onlays	Prior placement date, dated pre-operative periapical radiographic images including bitewings. Periodontal charting upon request.
D2710 – D2799, D2971	Crowns	Prior placement date, dated pre-operative periapical radiographic images including bitewings. Periodontal charting upon request.
D2710 – D2799	Crowns specific to third molars	Prior placement date, dated pre-operative periapical radiographic images must include bitewings and opposing arch. Current, dated periodontal charting upon request.
D2928 – D2929	Prefabricated ceramic crowns	Dated pre-operative periapical radiographic images.
D2930 – D2934	Crowns (stainless steel)	Dated pre-operative periapical radiographic images.
D2940	Protective restoration	Dated pre-operative periapical radiographic images and chart notes.
D2950, D2951	Build-ups, pins	Dated pre-operative periapical radiographic images, and rationale for dental necessity and/or chart notes.
D2952 – D2957	Posts and core	Dated pre-operative periapical radiographic images for pre-determination and post-op RCT radiographs for claims, rationale for dental necessity and/or chart notes upon request.
D2960 – D2962	Veneers	Prior placement date, dated pre-operative periapical radiographic images including bitewings. Periodontal charting upon request.
D2980 – D2983	Crown repair	Dated pre-operative periapical radiographic images and chart notes/narrative.
Endodontic procedures (D3220-D3920)		
Procedure code	Description	Send with claim/pre-determination
D3220 – D3240	Endodontic therapy	Dated pre-operative periapical radiographic images.
D3310 – D3348	Endodontic therapy	Dated pre and post-operative (for claims) periapical radiographic images.
D3351 – D3353	Apexification/recalcification	Dated pre-operative periapical radiographic images.
D3355 – D3357	Pulpal regeneration	Dated pre-operative periapical radiographic images and chart notes.
D3410 – D3450	Apicoectomy/periradicular surgery	Dated pre-operative periapical radiographic images.
D3470	Reimplantation	Dated pre-operative periapical radiographic images.
D3471 – D3473	Surgical repair of root resorption	Dated pre-operative periapical radiographic images.
D3501 – D3503	Surgical exposure of root surface without apicoectomy or repair of root resorption	Dated pre-operative periapical radiographic images and chart notes/narrative.
D3920 - D3921	Hemisection	Dated pre and post-operative periapical radiographic images.

Required attachments by CDT codes continued

Periodontic procedures (D4210-D4910)		
Procedure code	Description	Send with claim/pre-determination
D4210 – D4211	Gingivectomy/gingivoplasty	Current, dated periodontal charting (pre- and post-operative root planing) and pre-operative radiographic images. Progress or clinical chart notes upon request. Intra-oral photographs may be requested for clarification.
D4212	Gingivectomy/gingivoplasty (to allow for restorative procedure, per tooth)	Dated pre-operative periapical radiographic images and clinical chart notes, dated current periodontal charting and intra-oral photographs may be requested for clarification.
D4230 – D4231	Anatomical crown exposure	Pre-operative periapical radiographic images, clinical chart notes upon request. Narrative, including dates of pre-operative root planing, and intra-oral photographs may be requested for clarification. Periodontal charting is not required.
D4240 – D4245	Flap procedures	Current, dated periodontal charting (pre- and post-root planing), pre-operative periapical radiographic images, clinical chart notes or narrative upon request.
D4249, D4268	Crown lengthening	Current, dated periodontal charting, dated pre-operative periapical and bitewing radiographic images. Clinical chart notes upon request.
D4260 – D4261	Osseous surgery	Pre-operative periapical radiographic images, progress or clinical chart notes. Narrative including dates of pre-operative root planing, and/or intra-oral photographs may be requested for clarification.
D4263 - D4264	Bone grafts	Current, dated periodontal charting, dated pre-operative periapical radiographic images. Clinical chart notes upon request.
D4265 – D4267	Tissue regeneration	Current, dated periodontal charting, dated pre-operative periapical radiographic images. Clinical chart notes upon request.
D4274	Distal wedge procedure	Current, dated periodontal charting, dated pre-operative periapical radiographic images. Clinical chart notes upon request.
D4270 – D4285	Tissue grafts	Dated pre-operative periapical radiographic image, current, dated periodontal charting showing attachment levels, recession (in millimeters), and amount of attached keratinized gingiva (in millimeters). Intra-oral photographs may be requested for clarification.
D4341 – D4342	Scaling and root planing	Current, dated periodontal charting, dated pre-operative full mouth radiographic images, clinical chart notes upon request. Documentation of the duration of treatment times for periodontal scaling and root planing may be required for individual case review.
D4346	Scaling in presence of generalized moderate or severe inflammation	Current, dated periodontal charting, dated pre-operative full mouth radiographic images, progress or clinical chart notes. Intra-oral photographs may be requested for clarification.
D4355	Full mouth debridement	Dated pre-operative full mouth radiographic images, clinical chart notes, and intra-oral photographs may be requested for clarification.
D4381	Local delivery antimicrobial agent	Current, dated periodontal charting, history of periodontal therapy, pre-operative periapical radiographic images.
D4910	Periodontal maintenance	Current, dated periodontal charting clinical chart notes/narrative regarding history of periodontal therapy.

Required attachments by CDT codes continued

Removable prosthodontics (D5110-D5982)

Procedure code	Description	Send with claim/pre-determination
D5110 – D5140, D5211 – D5228, D5282, D5283	Complete and partial denture placement	Prior placement date, dated pre-operative full mouth radiographic images. Clinical chart notes and current, dated periodontal charting upon request.
D5410 – D5761	Additional denture codes	Narrative for necessity.
D5982	Surgical stent	Clinical chart notes, narrative for necessity.

Implant procedures (D6010-D6190)

Procedure code	Description	Send with claim/pre-determination
D6010 – D6199, D3460	Implant procedures	Dated pre-operative full mouth radiographic images. Current, dated periodontal charting upon request.
D6190	Radiographic/surgical implant index	Narrative for necessity. Clinical chart notes upon request.

Fixed prosthodontics (D6205-D6999)

Procedure code	Description	Send with claim/pre-determination
D6205 – D6794	Bridge procedures	Prior placement date, dated pre-operative full mouth radiographic images. Current, dated periodontal charting upon request.
D6920 – D6999	Bridge repairs and misc. procedures	Dated pre-operative periapical radiographic images and clinical chart notes.

Oral and maxillofacial surgery procedures (D7210-D7963)

Procedure code	Description	Send with claim/pre-determination
D7210 – D7251	Surgical extraction	Dated pre-operative periapical radiographic images, clinical chart notes detailing rationale of care, and operative report. Medical estimate of benefits (EOB) upon request.
D7260 – D7283, D7287 – D7291	Other oral surgery procedures	Dated pre-operative periapical radiographic images and clinical chart notes and operative report.
D7270 – D7272	Reimplantation/transplantation	Dated pre-operative periapical radiographic images and clinical chart notes and operative report.
D7285 – D7286	Biopsies	Pathology report, clinical chart notes and operative report. Radiographs upon request.
D7296, D7297	Corticotomy	Dated pre-operative periapical radiographic images, clinical chart notes. Operative clinical chart notes and operative report. Intra-oral photographs upon request.
D7310 – D7321	Alveoloplasty	Dated pre-operative periapical radiographic images, clinical chart notes and operative report.
D7410 – D7461	Surgical excision (soft tissue)	Clinical chart notes and operative report. Intra-oral photographic Images upon request.
D7471 – D7490	Surgical excision (hard tissue)	Dated pre-operative periapical radiographic images, clinical chart notes, and operative report.
D7510 - D7560	Surgical incision/Incision and drainage	Dated pre-operative periapical radiographic images, clinical chart notes, and operative report.
D7810 – D7877	TMJ surgery	Appropriate radiographic images, clinical chart notes and operative report. Medical EOB upon request.

Required attachments by CDT codes continued

Oral and maxillofacial surgery procedures continued (D7210-D7963)

Procedure code	Description	Send with claim/pre-determination
D7880 – D7881	Occlusal device	Clinical chart notes, and operative report. Medical EOB upon request.
D7899	Unspecified TMD therapy by report	Appropriate radiographic images, clinical chart notes and operative report.
D7920 – D7951, D7970 – D7996	Other surgical repairs	Dated pre-operative periapical radiographic images, narrative, clinical chart notes and operative report.
D7953	Bone graft	Dated pre-operative periapical radiographic images, narrative, clinical chart notes and operative report.
D7960 – D7963	Frenulectomy/frenuloplasty	Clinical chart notes, intra-oral photographic images, current dated periodontal charting.

Orthodontics (medically necessary orthodontic care (D8030-D8090))

Procedure code	Description	Send with claim/pre-determination
D8030 - D8090	Medically necessary orthodontic treatment	Completed HLD Index Form. Electronic equivalent of orthodontically trimmed study models, or digitally acquired orthodontic models including all views. Orthodontic treatment plan. Surgical treatment plan and letter of medical necessity when appropriate. Intra-oral and extra-oral photographic images. Cephalometric analysis, full mouth or panoramic radiographic images.

Adjunctive services (D9120-D9946)

Procedure code	Description	Send with claim/pre-determination
D9120	Fixed partial denture sectioning	Dated pre-operative periapical radiographic images, clinical chart notes and operative report.
D9222, D9223	Deep sedation/general anesthesia	Complete anesthesia record including, but not limited to, start and stop times of anesthesia. For ease of claim processing, dental procedures performed on the same date of service that the sedation/general anesthesia was completed should be included on the claim form. If the procedures were provided by another practitioner these procedures should be in the "Remarks" (Section 35) of the claim form.
D9239, D9243	IV conscious sedation	Complete anesthesia record including, but not limited to, start and stop times of anesthesia. For ease of claim processing, dental procedures performed on the same date of service that the IV conscious sedation was completed should be included on the claim form. If the procedures were provided by another practitioner these procedures should be in the "Remarks" (Section 35) of the claim form.
D9610, D9630	Other drugs/medications	Clinical chart notes including drug/medication name.
D9920 – D9930	Behavior management	Clinical chart notes.
D9944, D9945, D9946	Occlusal guards	Clinical chart notes.
D9951 – D995	Occlusal adjustments	Clinical chart notes.

Sources:

- ADA Practical Guide to Frequently Asked Legal Questions, 2nd Edition; Practical Guide Series; American Dental Association Division of Legal Affairs
- The Risk Management Reference Guide; The Dentists Insurance Company Keith Horner, John Ru, and Vivian E Rushton,
- Interpreting Dental Radiographs, Quintessence Publishing Co. Ltd., 2002.

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