

Insurance Coding: Teaching Our Periodontics Residents



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Objectives

- Our goals and expectations of the residents
- Our approach to teaching CDT insurance codes
- Describing and understanding the appropriate uses of the codes we teach
- How axiUm contributes to the educational process
- Understanding the use and benefits of organized quick lists in axiUm
- How to setup and use macro insurance codes in axi∪m

Insurance Coding: What do students learn in Pre-Doctoral Programs?

- The results of an informal survey minimal insight into coding
- What did they learn?
 - Some procedural codes, but no real understanding of the codes
 - Familiar codes (D1110 Adult Prophy, D0120 Periodic Oral Evaluation, D0210 - Complete Series of Radiographs)
 - Rarely any understanding of the differences between codes such as D1110 and D4910

Our Goal With Our Residents

- Reach an understanding of which codes should be chosen for specific patient visits.
- Reach an understanding of which codes must be "bundled" for complex treatments such as periodontal flap surgery, particulate graft, regenerative biologic, membrane.
- Become comfortable using the axiUm software choosing procedure codes.

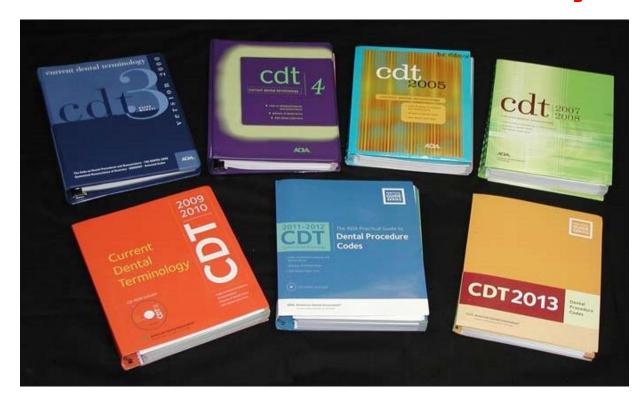
Our Goal With Our Residents

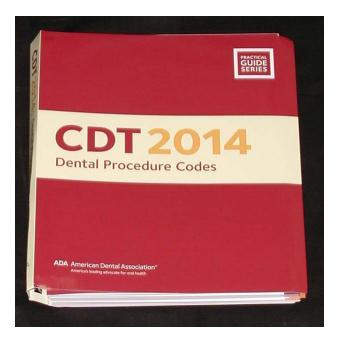
- Gain an understanding of how these insurance codes are developed, maintained, changed and the importance of remaining current with the code structure.
- Become comfortable consulting the CDT publication as a reference for these insurance coding issues.
- Consider the experiential information many of our faculty members bring from their private practices in the arena of claims filing, educating patients about insurance and the intricacies of dealing with insurance carriers.

What We Don't Expect of Our Residents

- Memorize the entire CDT publication.
- Complete patient visits without using the CDT or information embedded in axiUm by our administrator.

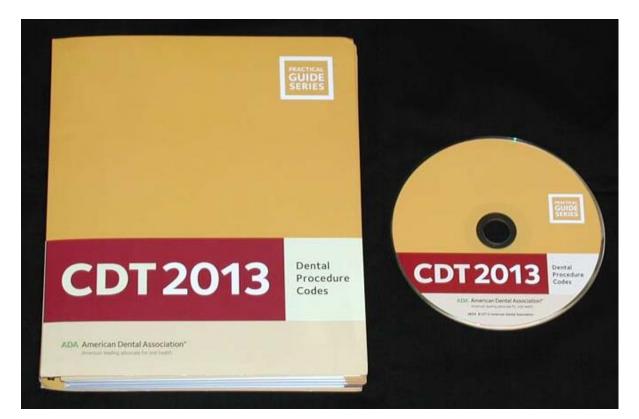
One MUST Stay Current With CDT Codes!

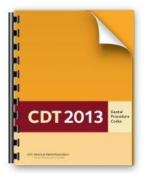




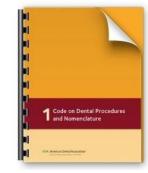
We have this book, but codes are not in effect until January 1, 2014

CDT Books Come With a CD

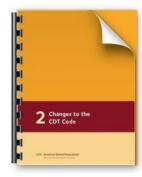




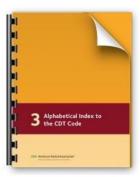
CDT 2013 0-Preface.pdf



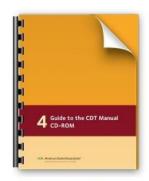
CDT 2013 1-Code.pdf



CDT 2013 2-Code Changes.pdf



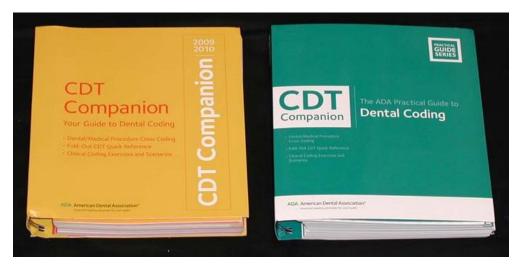
CDT 2013 3-Index.pdf



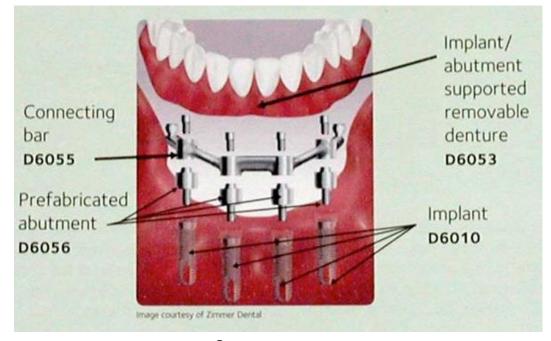
CDT 2013 4-CD-ROM Guide.pdf

These are PDF's

CDT Companion



Coding exercises and discussion on how to use codes appropriately



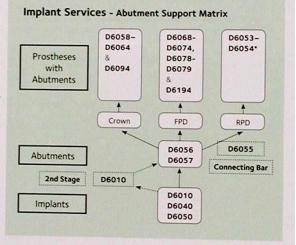
Diagrams

Summary – Choosing the Right Codes

Abutment supported implant prosthetics are documented with at least three procedure codes.

- 1. Implant body
- 2. Abutment
- 3. Prosthesis Single Crown / FPD / RPD)

When the prosthesis is a fixed partial denture (FPD) the pontic codes are located in the Prosthetics (fixed) Category of Service (D6205-D6252). A connector bar, when used, would be documented as D6055.



 Codes D6053, D6054, D6078 & D6079 have "implant/abutment" in their nomenclatures, which means that they are also found in the following implant support matrix.

Flow Chart

28 © 2010 American Custol Assessed

CDT Companion

Coding Exercise #21

When a "quadrant" procedure involves teeth that cross the midline

Lars was pretty good about taking care of his teeth, but struggled with his gums because of an anti-seizure medicine that he took for epilepsy. A hockey accident as a 25-year-old had left him with a fixed bridge from #22-27, replacing #'s 23, 24, 25, & 26. Although he brushed and flossed diligently, he had a hard time with flossing under the bridge because gum tissue had grown up around it. This seemed to make his gum problem even worse.

Now Lars had 4–5 mm pocket measurements around #22 & #27 because of the heavy fibrotic tissue. There was no apparent loss of bone around these teeth, so Dr. Svenson recommended surgically removing the excess tissue and restoring a more cleansable gingival contour around Lars' bridge.

How would you code this visit?

Solutions:

Dr. Svenson's reshaping of Lars' gingival tissue would be coded as:

D4211 gingivectomy or gingivoplasty – one to three contiguous teeth or tooth bounded spaces per quadrant

The code would be used twice, once for each quadrant. Even though the two teeth being treated are contiguous with the bounded space between them, the teeth are in different quadrants and the space is not bounded in either quadrant.

This procedure would usually be reported by listing the tooth numbers of the teeth treated. When reporting "quadrant" codes listing both tooth numbers and quadrants may facilitate third-party payer claim adjudication.

Our Approach

- Show the residents how the codes are accessed in axiUm.
- Discuss the most recent CDT publication available at the time of the new first-year residents' orientation period.
- Consider, in detail, the sections of the CDT that will apply most often to the residents' anticipated experiences.

The Most Recent Available CDT

- For this group of residents who began our program July 1, 2013, we are using the CDT-2013.
- We ordered the CDT-2014 from the ADA two days before the presentation with our residents this year.
- We explain the CDT as a reference tool.
- We stress that the ADA "owns" the CDT publication.
- We demonstrate how much the CDT must cover and how many of the sections will not apply to most of our patient visits.

The Most Recent Available CDT

• As an attempt to edit the information in the CDT to the information we feel is most applicable, we DO NOT cover:

D2000 – D2999 Most of the restorative procedures

D5900 - D5999 Most of the maxillofacial prosthetic procedures

D8000 – D8999 Most of the orthodontic procedures

As an attempt to edit the information in the CDT to the information we feel is most applicable, we DO cover in detail:

D0100 - D0999 Most of the diagnostic procedures

Some of the preventive procedures D1000 - D1999

Some of the endodontic procedures D3000 - D3999

D4000 - D4999 All of the periodontics procedures

Many of the implant procedures but not all the restorative aspect codes D6000 - D6199

Some of the oral and maxillofacial surgery procedures D7000 - D7999

Most of the adjunctive procedures including medicament administration, D9000 - D9999 sedation procedures and occlusion therapies

Diagnostic Codes (Codes D0100 – D0999)

Differentiation of the examination codes:

D0120 Periodic oral evaluation, established patient

D0140 Limited oral evaluation, problem focused

D0150 Comprehensive oral evaluation, new or established patient

D0180 Comprehensive periodontal evaluation, new or established patient

Diagnostic Codes (Codes D0100 – D0999)

Radiograph codes:

- When is a radiograph a part of a procedure and thus a no-charge event?
- When is a follow-up radiograph a no-charge event?
- Stress we have ALL our CBCT studies interpreted by our radiologist to avoid
- Any question of completeness of the interpretation

Preventive Procedures (Codes D1000 – D1999)

- D1110 Adult Prophy
- **D4910** Periodontal Maintenance
- **D4355** Full Mouth Debridement
- How do you explain these to the patient? "My insurance covers two cleanings per year."

Endodontic Procedures (Codes D3000 – D3999)

Some are applicable:

- **D3450** Root Amputation
- D3920 Hemisection
- BOTH include removal of the root; there is not an additional charge for an extraction
- Any attempt at socket preservation or ridge augmentation is a new charge

Codes with definitions of extent of procedure:

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D4210 / D4211 Gingivectomy
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Documentation for code chosen?

Extent of Procedure

"Site: A term used to describe a single area, position, or locus. The word 'site' is frequently used to indicate an area of soft tissue recession on a single tooth or an osseous defect adjacent to a single tooth; also used to indicate soft tissue defects and/or osseous defects in edentulous tooth positions." CDT-2013 page 29

Extent of Procedure

- If two contiguous teeth have areas of soft tissue recession, each area of recession is a single site.
- If two contiguous teeth have adjacent but separate osseous defects, each defect is a single site.
- If two contigous teeth have a communicating interproximal osseous defect, it should be considered a single site. CDT-2013 page 29

Extent of Procedure

- All non-communicating osseous defects are single sites.
- All edentulous non-contiguous tooth positions are single sites.
- Depending on the dimensions of the defect, up to two contiguous edentulous tooth positions may be considered a single site. CDT-2013 page 29

Codes for procedures that seem similar but are not

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D4240 / D4241 Gingival Flap
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- D4260 / D4261 Flap and Osseous Surgery
- D4245 Apically Positioned Flap
- What is the difference when choosing the code?

Codes for procedures that seem similar but are not

D4230 / D4231 Anatomic Crown Exposure

D4249 Crown Lengthening Surgery

What is the difference when choosing the code? Restorative?

Codes for nonsurgical therapies

D4341/D4342 Scaling and Root Planing

D4355 Full Mouth Debridement to Enable

Comprehensive Evaluation and Diagnosis

 How will you or should you combine any of these with D1110 Adult Prophy?

- Codes for regenerative therapies Membrane Assisted
 - D4266 (resorbable per site); D4267 (nonresorbable per site and includes removal of membrane)
 - How many membranes are available in your clinic?
 - How do you manage the dramatically variable costs to you for the membrane?

- Codes for regenerative therapies
 - D4265 Biologics
 - How many do you utilize? Emdogain; GEM-21; rHBMP-2
 - How do you manage the dramatically different costs to you of these materials?

- Codes for regenerative therapies
 - D4263/D4264 Particulate Grafts
 - How many do you have available: demineralized, mineralized freeze dried bone allograft; hydroxyapatite; BioOss; beta-tricaclium phosphate; calcium sulfate
 - What do you do about autogenous grafting? Charge? No Charge?

- Codes for periodontal plastic surgeries
 - It's not D4271 anymore for a gingival graft- now D4277/D4278 includes the donor site (for tooth and ridge)
 - D4273 Subepithelial Connective Tissue Graft procedure
 - D4276 Connective Tissue Graft with Double Papilla Flap
 - D4275 Soft Tissue Allograft- augment gingiva with or without root coverage; no donor site

- Biopsies
 - D7286 Soft tissue
 - -D7285 Hard tissue
 - -D7288 Brush biopsy
 - D7287 Exfoliative cytology

- Orthodontics Related Procedures
 - D7291 Transseptal Fiberotomy/Supracrestal Fiberotomy
 - D7292/D7293/D7294 Temporary Anchorage Devices: plate; screw with surgical flap; screw with no surgical flap
 - D7960/D7963 Frenectomy (frenulectomy)/Frenuloplasty

- "Repair Procedures"
 - D7951 Sinus augmentation with bone or bone substitutes via a lateral approach; includes any particulate graft materials; does NOT include any barrier membrane(s)
 - D7952 Sinus augmentation via a vertical approach (Internal Sinus Lift);
 includes any particulate graft materials

- "Repair Procedures"
 - D7953 Bone Replacement Graft for Ridge Preservation; includes any particulate graft materials; does NOT include any barrier membrane(s); socket graft procedure; does NOT include the extraction

- "Repair Procedures"
 - D7950 Osseous, osteoperiosteal, or cartilage graft of the maxilla or mandible – autogenous or nonautogenous; our block graft procedures; includes obtaining an autogenous graft and/or allograft materials; does NOT include any barrier membrane(s)

- "Repair Procedures"
 - D7955 Repair of maxillofacial soft and/or hard tissue defect; "This procedure does not include edentulous maxilla and mandibular reconstruction for prosthetic considerations" (congenital and traumatic). That is D7950.

Adjunctive Procedures (Codes D9000 – D9999)

- D9210/D9211/D9212 Diagnostic Block Anesthesia and Pain Management
- D9120 Sectioning a fixed partial denture— yes there is a code to help recoup the cost of those multiple burs for sectioning a bridge
- D9110 Palliative (emergency) treatment of dental pain

- Sedation
 - D9230 Inhalation Nitrous Oxide Oxygen Sedation
 - D9248 Oral (Enteral) Sedation
 - D9241/D9242 Intravenous (Parenteral) first 30 minutes; each additional
 15 minutes

- Occlusion
 - D9940 Occlusal Guard
 - D9950 Occlusal Analysis; mounted case
 - D9951 Occlusal Adjustment: "limited"
 - D9952 Occlusal Adjustment: "complete"

- Administration of Medicaments:
 - -Obviously other than local anesthetics for the procedures
 - Oral medication for prophylactic antibiotic coverage
 - Intravenous medication for prophylactic antibiotic coverage
 - Pain medication

- Administration of Medicaments:
 - D9610 Parenteral, single administration
 - D9612 Parenteral, two or more administrations
 - D9630 Other drugs and/or medicaments, by report: includes but is not limited to oral antibiotics, oral analgesics and topical fluoride dispensed in the office for home use

- Implant Placement
 - D6190 Radiographic/surgical implant index
 - D6010 Surgical placement of implant body; includes second stage surgery if needed and healing cap
 - D6104 Bone Graft at Time of Implant Placement; barrier membrane(s) and/or biologic materials, if used, are reported separately

- Implant Placement
 - D6012 Surgical placement of interim implant body for transitional prosthesis; includes removal later
 - D6100 Implant Removal; requires a report/narrative; does NOT include any treatment of the resulting socket/extraction site (D7953)

- D6101 Debridement of a periimplant defect and surface cleaning of the exposed implant surfaces, including flap entry and closure
- D6102 Debridement and osseous contouring of a periimplant defect and surface cleaning of the exposed implant surfaces, including flap entry and closure
- D6103 Bone graft for repair of periimplant defect; does NOT include flap entry and closure OR barrier membrane(s) and/or biologics

• D6080 Implant Maintenance "...including removal of prosthesis, cleansing of prosthesis and abutments and reinsertion of prosthesis."

"...includes a prophylaxis to provide active debriding of the implant and examination of all aspects of the implant system, including the occlusion and stability of the superstructure. The patient is also instructed in thorough daily cleansing of the implant."

- D6080 Implant Maintenance
- Is this separate from a D1110 in a patient with both natural teeth and implants?
- Is this separate from a D4910 in a patient with a history of periodontal therapy?

How does axiUm contribute to the educational process?

Comments & My Disclaimer

- As a Periodontist, clinician and axiUm administrator, I have a unique perspective on the software setup, functionality and use.
- 80% of U.S. dental schools use axi∪m. For those not using axi∪m, I hope that your software has similar features.
- This presentation serves as a resource for you and your axi∪m administrator
- Disclaimer: I do not receive compensation from the Exan Group (axiUm)

Electronic Health Record

Accessing the Chart Add tab

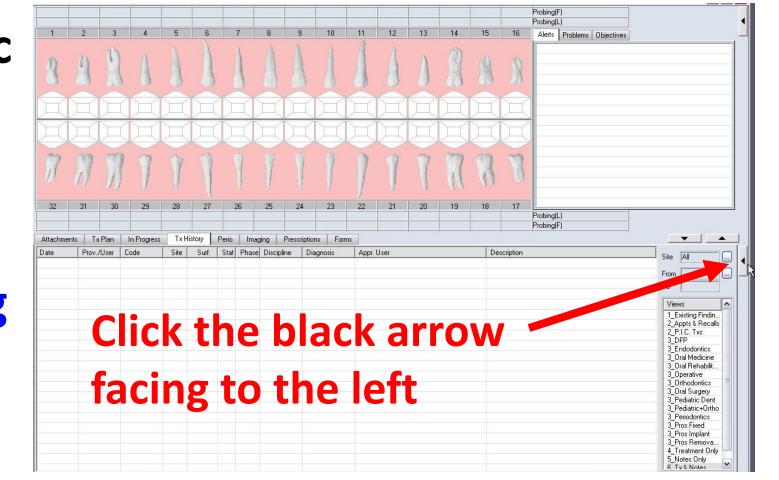


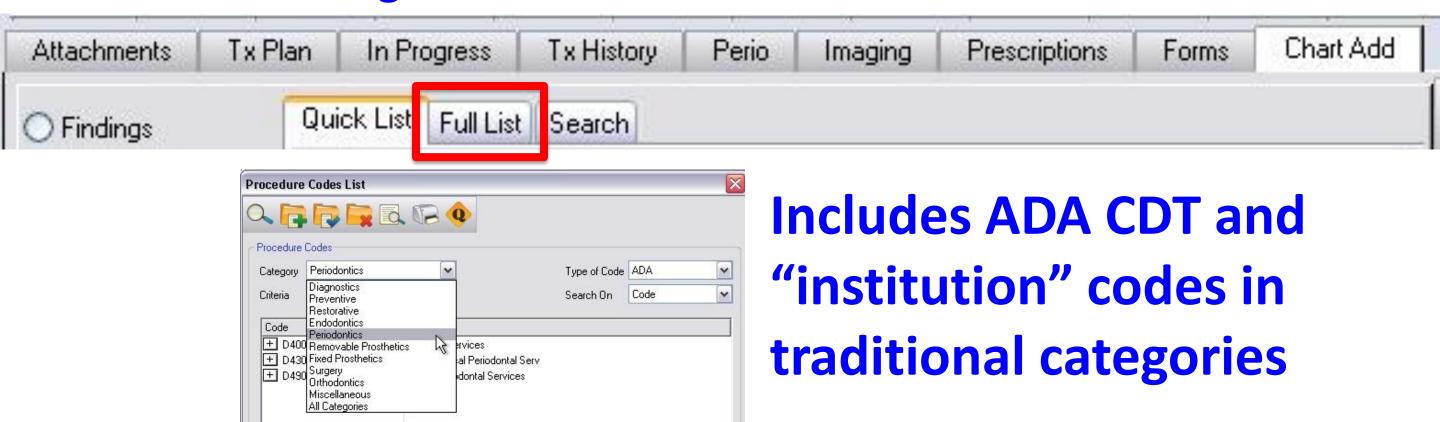


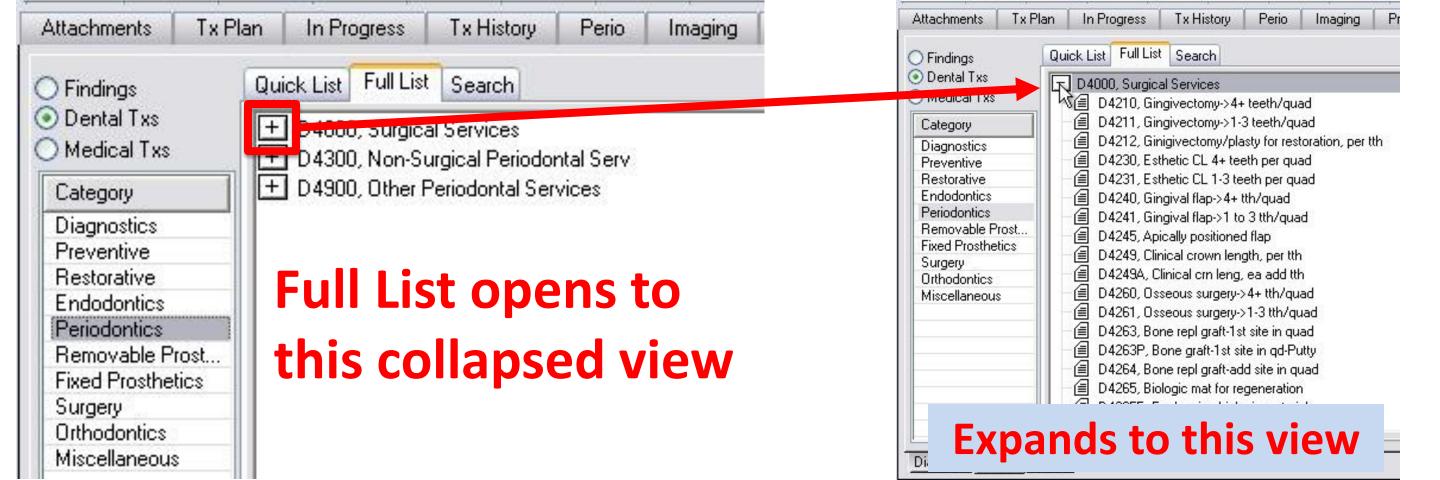
Chart Add tab opens to the "Quick List" tab



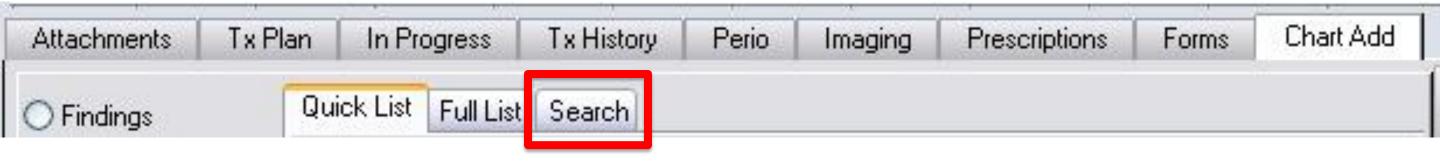
- Totally customizable by each institution!
- Provides for the best educational opportunity
- Provides a mechanism to create categories of treatment

"Full List" Sorting is NOT Customizable and is in CDT Number Order

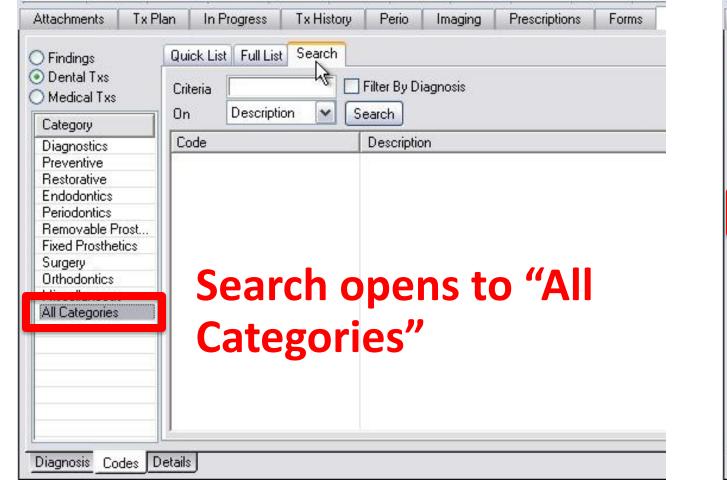


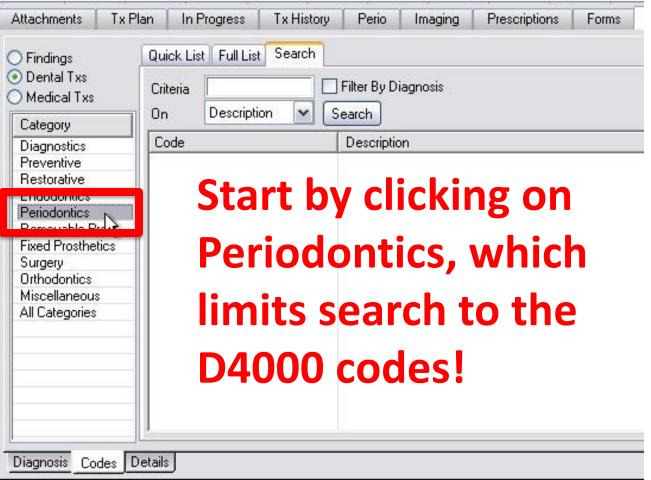


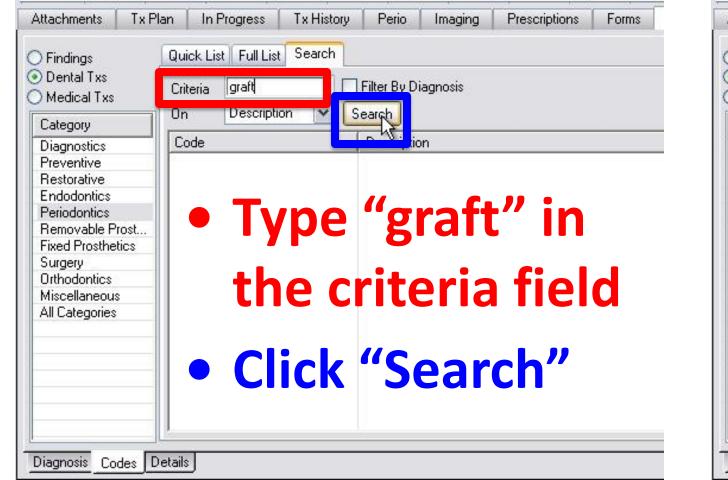
"Search" can be by DESCRIPTION or CODE

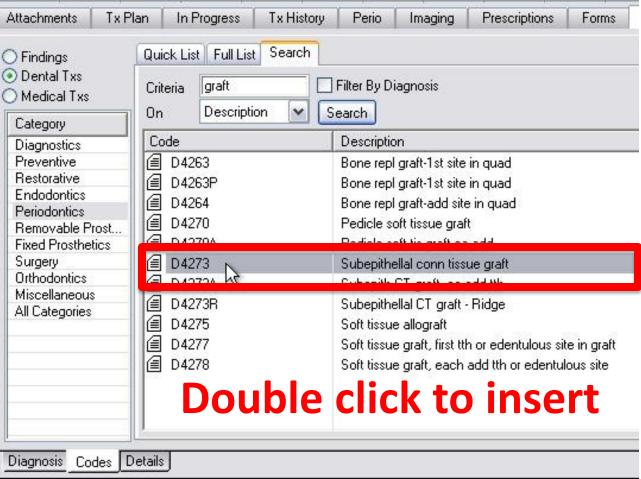


- If searching, the most common method is by description
- How do I search for the code for a Subepithelial Connective Tissue Graft?



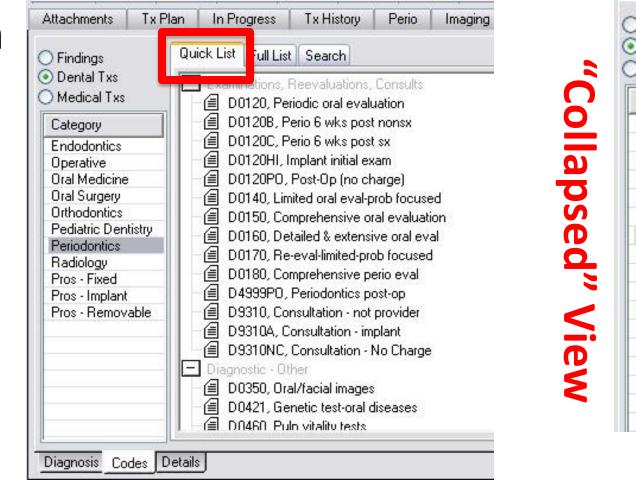






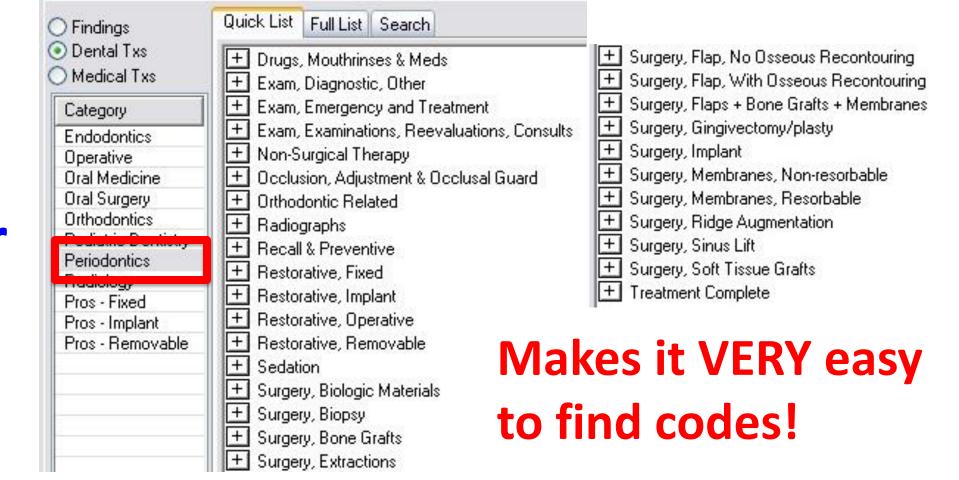
Quick List can
 open to an
 "expanded"
 view

 Collapsed view is my preferred choice



Quick List Full List Search Findings Dental Txs Drugs, Mouthrinses & Meds Medical Txs + Exam, Diagnostic, Other Exam, Emergency and Treatment Category + Exam, Examinations, Reevaluations, Consults Endodontics + Non-Surgical Therapy Operative + Occlusion, Adjustment & Occlusal Guard Oral Medicine Oral Surgery + Orthodontic Related Orthodontics + Radiographs Pediatric Dentistry + Recall & Preventive Periodontics + Restorative, Fixed Radiology + Restorative, Implant Pros - Fixed + Restorative, Operative Pros - Implant + Restorative, Removable Pros - Removable + Sedation Surgery, Biologic Materials + Surgery, Biopsy Surgery, Bone Grafts + Surgery, Extractions Must have axiUm 5.1 or higher

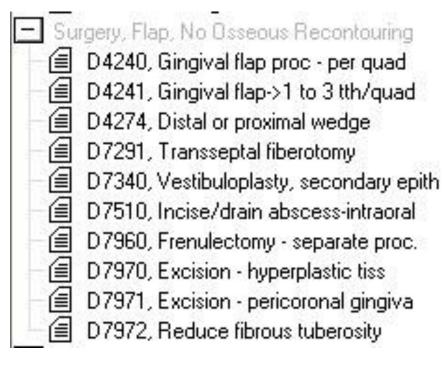
Alphabetical order of Quick List "headers" for **our Periodontics** residents



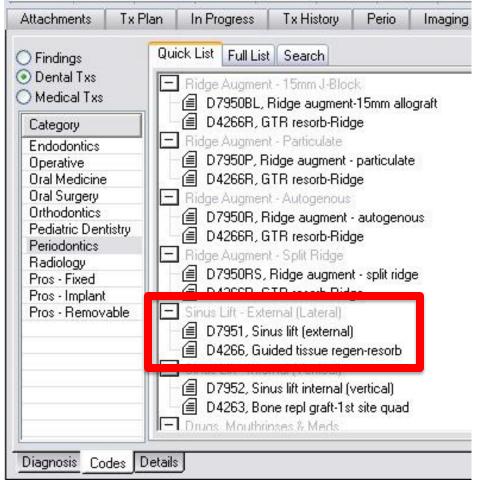
S Ш 0

 Drugs, Mouthrinses & Meds D9612, Therapeutic parental drug 2X+ D9610, Therapeutic parental drug 1X D9630A, Peridex - Periogard D9630B, Other meds - SBE antibiotics D9910, App - desensitizing medicament D9911, App - desensitiz resin-per tth D9972S, External bleaching - syringe Exam, Diagnostic, Other D0350, Oral/facial images D0421, Genetic test-oral diseases D0460, Pulp vitality tests D0470, Diagnostic casts Exam, Emergency and Treatment D0140, Limited oral eval-prob focused D7510, Incise/drain abscess-intraoral D9110, Palliative Treatment-dent pain

Exam, Examinations, Reevaluations, Consults D0120, Periodic oral evaluation **(** D0120B, Perio 6 wks post nonsx D0120C, Perio 6 wks post sx D0120HI, Implant initial exam-➂ D0120PO, Post-Op (no charge) D0140, Limited oral eval-prob focused D0150, Comprehensive oral evaluation D0160, Detailed & extensive oral eval D0170, Re-eval-limited-prob focused D0180, Comprehensive perio eval D4999PO, Periodontics post-op D9310, Consultation - not provider D9310A, Consultation - implant D9310NC, Consultation - No Charge



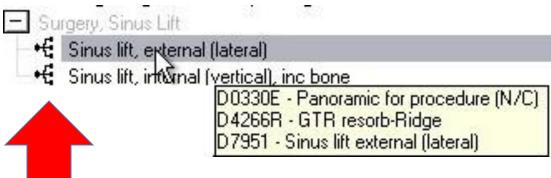
Originally I created individual procedure "headers", then placed the ADA CDT codes underneath the header



But, there is a better way.



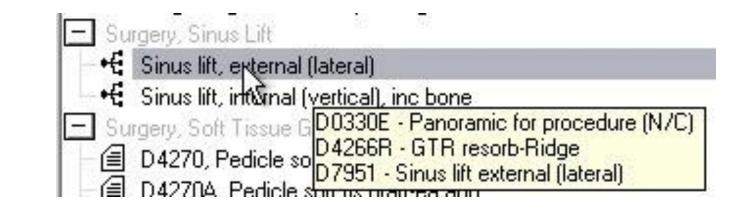
Procedure Macros!

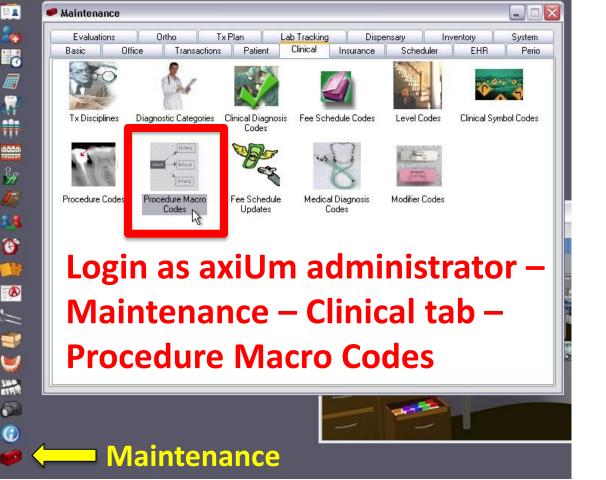


Looks like a pitch fork

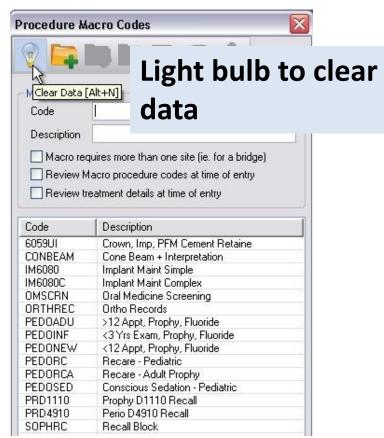
What is a Procedure Macro Code?

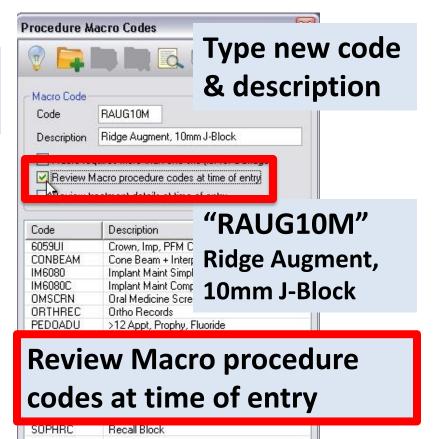
- In one "line item" are 2 or more embedded ADA CDT codes
- During planning or completion, codes can be added or deleted





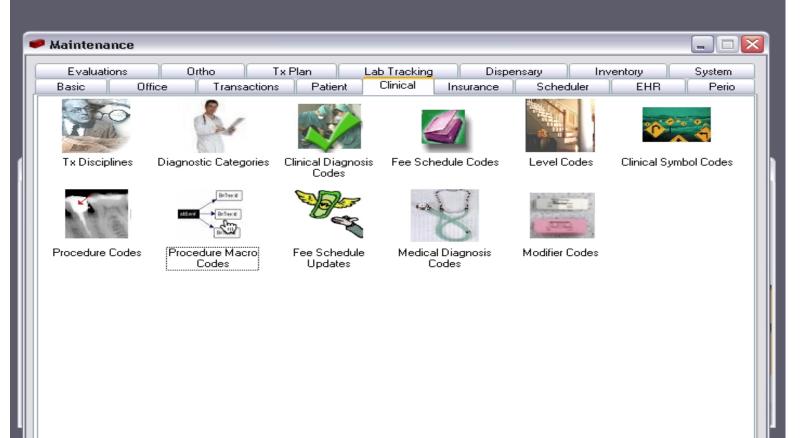
How Do I Create A Procedure Macro Code?





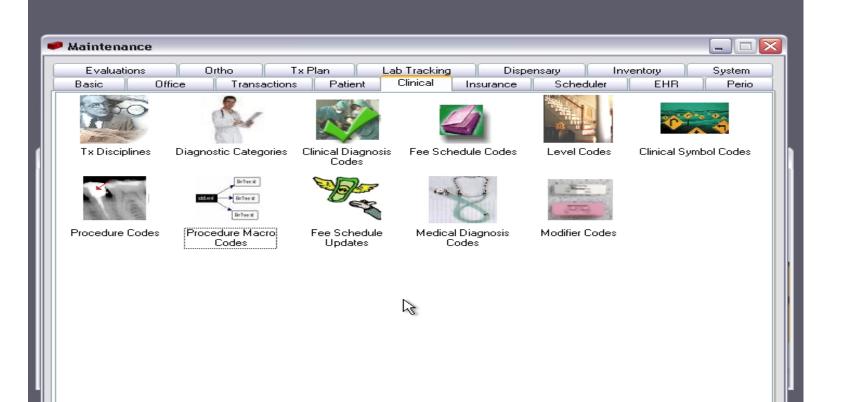
Looks complicated How long does is really take to **CREATE** a macro?



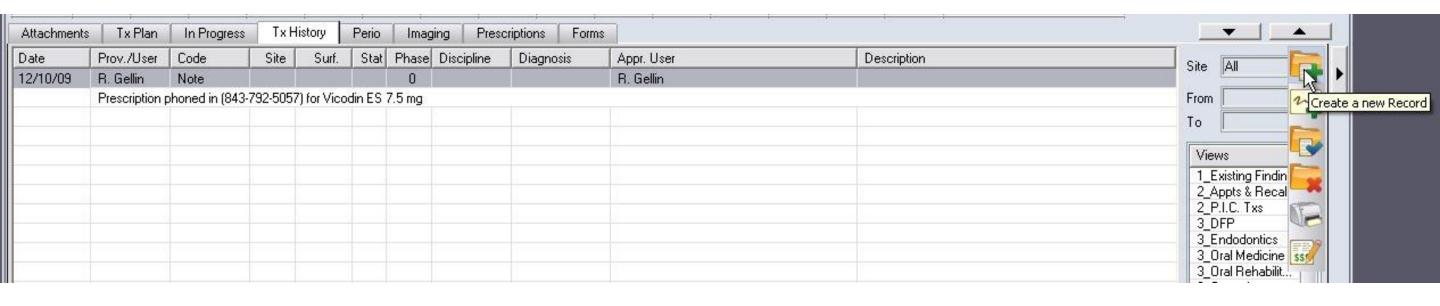


Looks complicated How long does is really take to ADD the macro to the **Quick List?**

Video

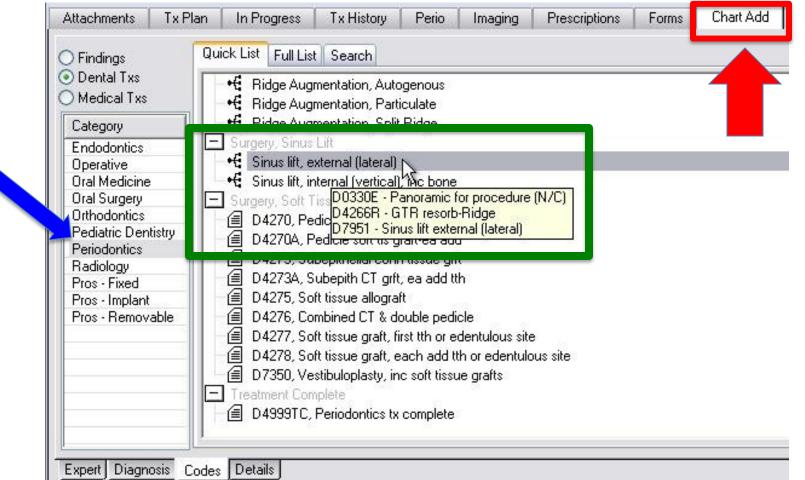


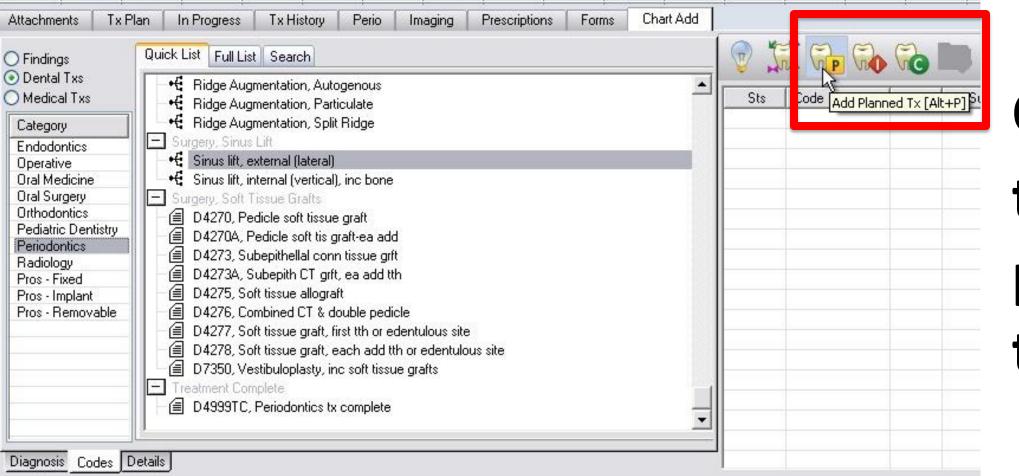
How Do I Use A Macro Code?



Electronic Health Record → Black triangle → Folder green "+" sign

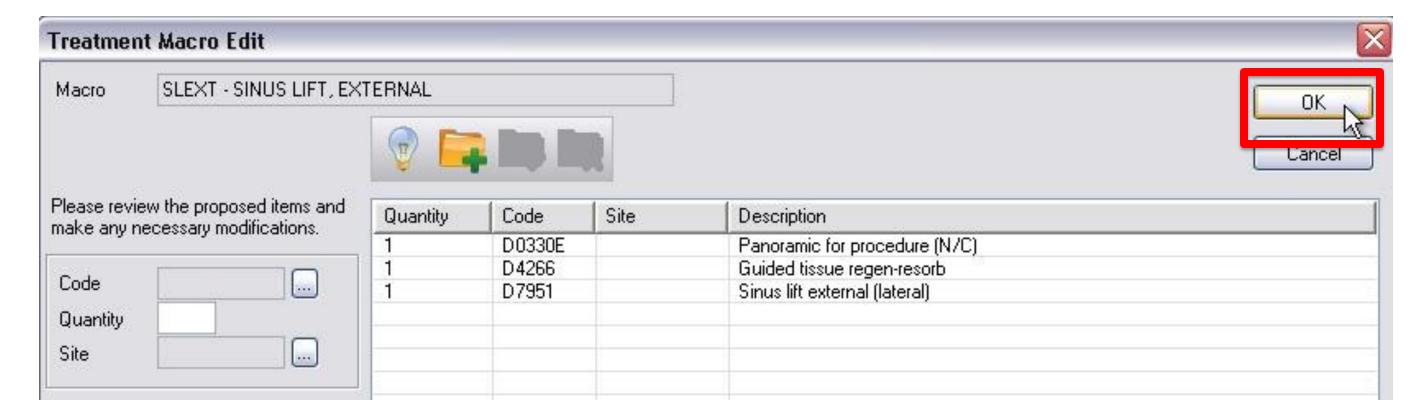
- Chart Add tab opens
- Category = Periodontics
- Hover over "Sinus lift, external (lateral)
 - Displays all codes in the macro
- This also works in the
 Treatment Planning module



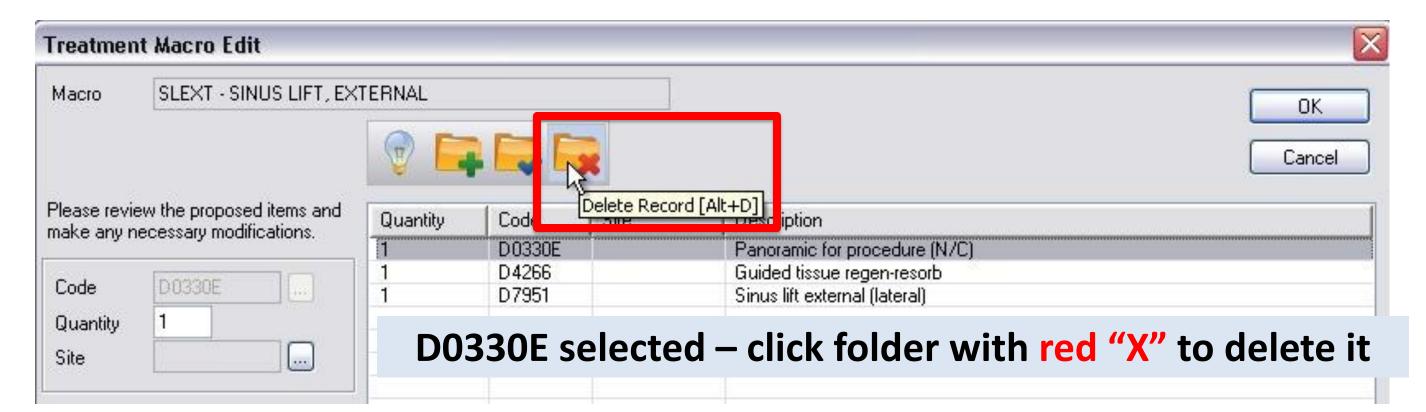


Click the "P" to plan all the procedures in the macro

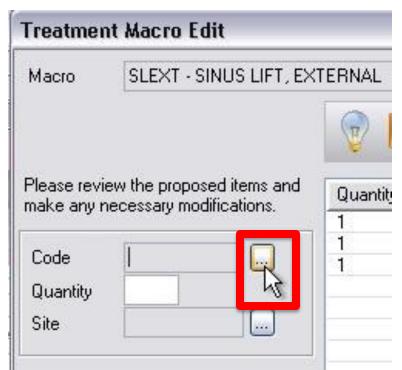
Click "OK" if there are no changes to the planned procedures



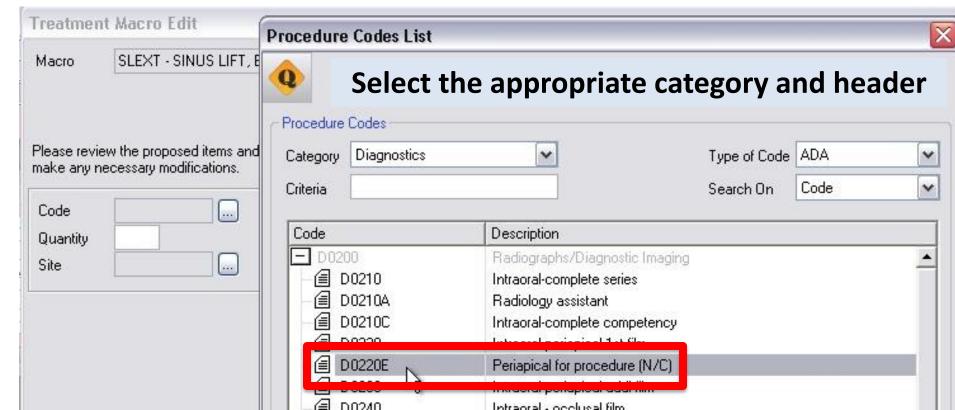
Any procedure can be selected and deleted



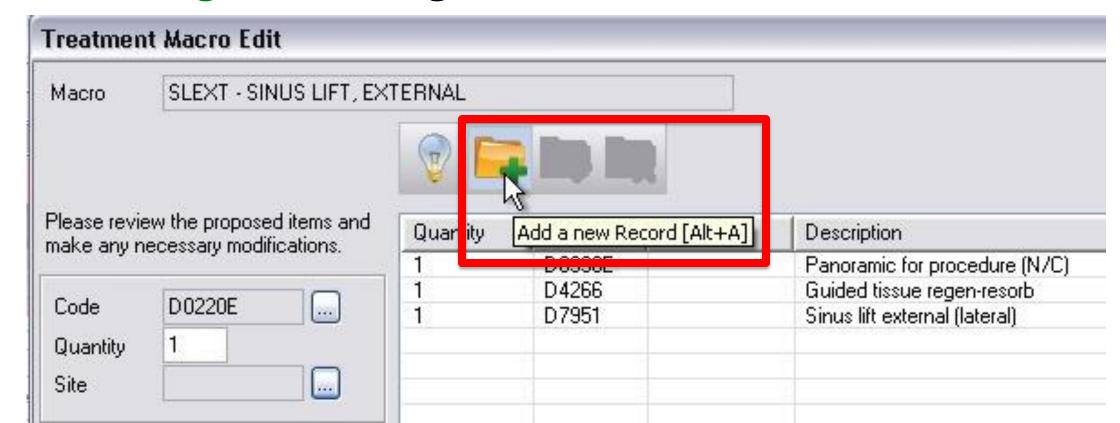
Click the ellipsis box to add a D0220E procedure



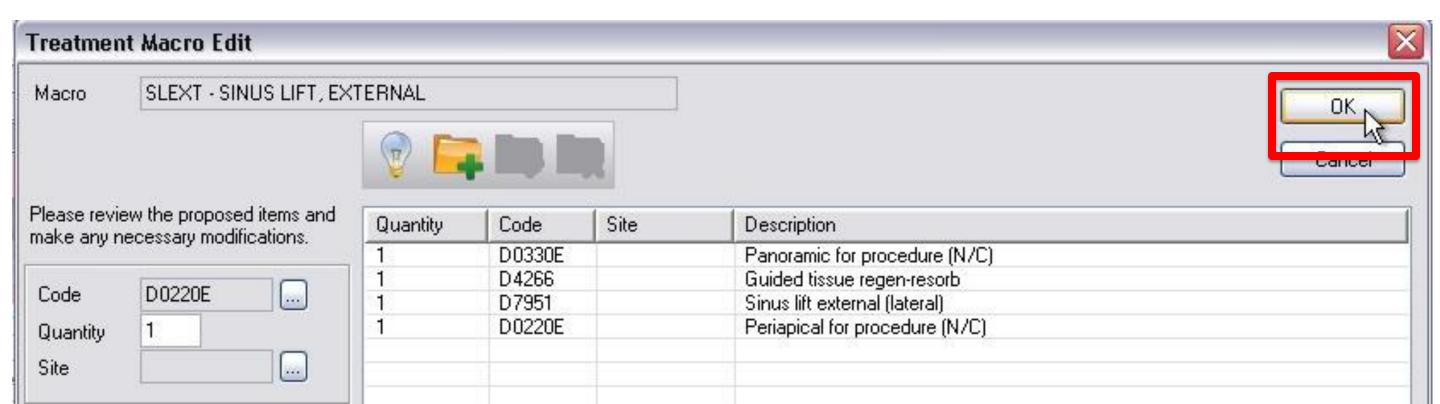
Double click the procedure to be added

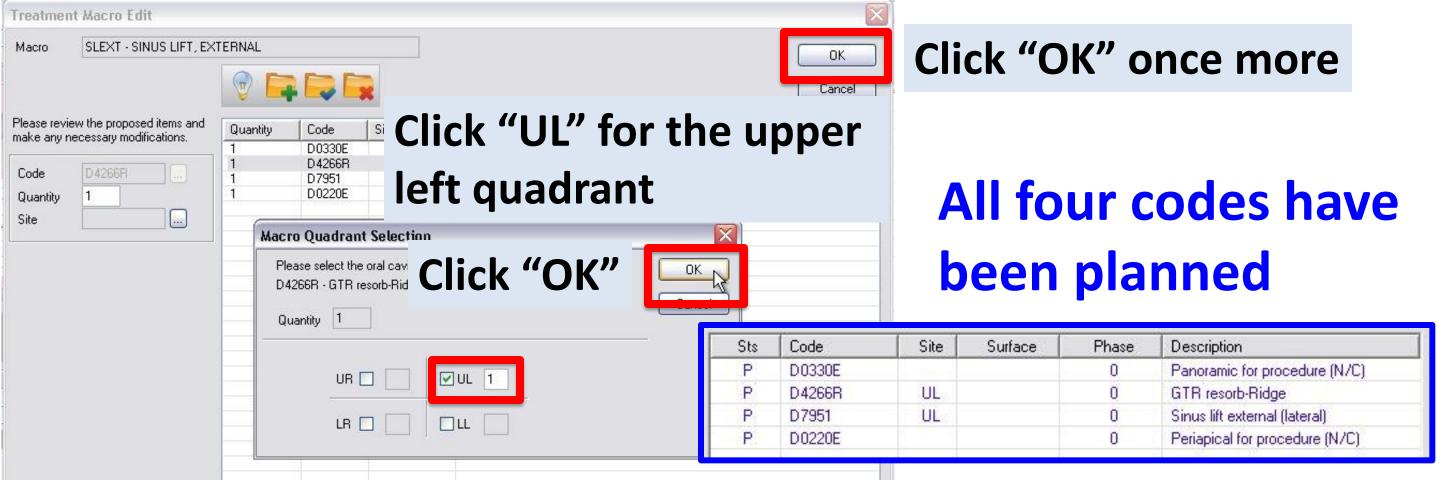


Click folder with green "+" sign to add D0220E to the other three codes



Click "OK" to add all four procedures codes at the same time





Video Demonstrating How To Use An axiUm Macro Code

Attachments	Tx Plan	In Progress	TxH	istory	Perio	Imag	ging Pres	criptions Forms			_ _
Date	Prov./User	Code	Site	Surf.	Stat	Phase	Discipline	Diagnosis	Appr. User	Description	Site All
12/10/09	R. Gellin	Note	27		1	0			R. Gellin		Site Mil
	Prescription (From									
					-						То
											10
											Views
											1_Existing Findin
								-			2_Appts & Recalls
											2_P.I.C. Txs
											3_DFP
									4		3_Endodontics
									70		3_Oral Medicine
											3_Oral Rehabilit
											3_Operative
											3_Orthodontics
					+						3_Oral Surgery
											3_Pediatric Dent
											3_Pediatric+Ortho
											3_Periodontics
											3_Pros Fixed
											3_Pros Implant
											3_Pros Remova
					_						4_Treatment Only 5_Notes Only
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Thank You

