



Automated Medical Payments

# Medicaid Bulletin Colorado Title XIX

Fiscal Agent



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## Medicaid Provider Services

303-534-0146  
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## Mailing Addresses

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Provider enrollment, Provider information, Changes,  
Signature authorization,  
and Claim requisitions  
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## Medicaid Fiscal Agent Information on the Internet

[coloradomedicaid.consultec-inc.com](http://coloradomedicaid.consultec-inc.com)

Distribution: Dentists

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Reference: B0100091

## Dental Coding replacement pages

The procedure code range for D9230 on page 8 has been corrected to D2110-**D4999**. The previously published range in bulletin B0100087 was incorrect.

**Treatment of Handicapping malocclusion + PAR required** was printed on page 9 in error. Page 9 has been corrected to read:

**Approval of a PAR does not guarantee Medicaid payment and does not serve as a timely filing waiver**

Please replace the following pages in B0100087, the 2001 Dental code bulletin:

Replace:	Dated:	With:	Dated:
Page 7	01/01	Page 7	01/01
Page 8	01/01	Page 8	03/01
Page 9	01/01	Page 9	03/01
Page 10	01/01	Page 10	01/01

Please direct questions about Medicaid billing or the information in this bulletin to:

## Medicaid Provider Services

303-534-0146

or

1-800-237-0757 (toll free Colorado)

Medicaid bulletins contain important policy and billing information and should be shared promptly with billing staff.

Bulletins supplement information in the Medicaid Provider Manual and should be retained with the provider manual for reference. Retain all bulletins until published notification advises that the information is obsolete or reproduced in subsequent bulletins or provider manual updates.

Please direct questions about bulletins and billing information to Medicaid Provider Services.

# CHILD BENEFITS

The comprehensive dental benefits listed in this section are available for children.

◆ Children's dental services must be completed before the individual client's 21<sup>st</sup> birthday ◆

## EXTRACTION

D7110 single tooth

➔ when doing multiple extractions on the same date of service, use this code only for the first extraction

D7120 each additional tooth

D7130 root removal - exposed roots

## SURGICAL EXTRACTIONS

D7210 surgical removal of erupted tooth requiring elevation of mucoperiosteal flap & removal of bone &/or section of tooth

D7220 removal of impacted tooth - soft tissue

D7230 removal of impacted tooth - partially bony

D7240 removal of impacted tooth - completely bony

D7241 removal of impacted tooth - completely bony, with unusual surgical complications

D7250 surgical removal of residual tooth roots (cutting procedure)

## OTHER SURGICAL PROCEDURES

D7260 oroantral fistula closure

D7270 tooth reimplantation &/or stabilization of accidentally avulsed or misplaced tooth &/or alveolus

D7272 tooth transplantation (includes reimplantation from one site to another and splinting &/or stabilization)

D7280 surgical exposure of impacted or unerupted tooth for orthodontic reasons (including orthodontic attachments)

D7281 surgical exposure of impacted or unerupted tooth to aid eruption

D7285 **revised** biopsy of oral tissue, hard (bone, tooth)

D7286 **revised** biopsy of oral tissue, soft (all others)

D7290 surgical repositioning of teeth

D7291 transseptal fibrotomy, by report

## ALVEOLOPLASTY - SURGICAL PREPARATION OF RIDGE FOR DENTURES

D7310 alveoplasty in conjunction with extraction - per quadrant

D7320 alveoplasty not in conjunction with extraction - per quadrant

## VESTIBULOPLASTY

D7340 vestibuloplasty - ridge extension (secondary epithelialization)

D7350 vestibuloplasty - ridge extension (including soft tissue grafts, muscle reattachment, revision of soft tissue attachment and management of hypertrophied & hyperplastic tissue)

## SURGICAL EXCISION OF REACTIVE

### INFLAMMATORY LESIONS

D7410 radical excision - lesion diameter up to 1.25cm

D7420 **ASSIST** radical excision - lesion diameter greater than 1.25cm

## REMOVAL OF TUMORS, CYSTS & NEOPLASM

D7430 excision of benign tumor - lesion diameter up to 1.25cm

D7431 **ASSIST** excision of benign tumor - lesion diameter greater than 1.25cm

D7440 excision of malignant tumor - lesion diameter up to 1.25cm

D7441 **ASSIST** excision of malignant tumor - lesion diameter greater than 1.25cm

D7450 removal of odontogenic cyst or tumor - lesion diameter up to 1.25 cm

D7451 **ASSIST** removal of odontogenic cyst or tumor - lesion diameter greater than 1.25cm

D7460 removal of nonodontogenic cyst or tumor - lesion diameter up to 1.25cm

D7461 **ASSIST** removal of nonodontogenic cyst or tumor - lesion diameter greater than 1.25cm

D7465 destruction of lesions(s) by physical or chemical methods, by report

## EXCISION OF BONE TISSUE

D7470 **deleted** removal of exostosis - maxilla or mandible

D7471 **new** removal of exostosis - per site

D7480 partial osteotomy (guttering or saucerization)

D7490 radical resection of mandible with bone graft

## SURGICAL INCISION

D7510 incision & drainage of abscess - intraoral soft tissue

D7520 incision & drainage of abscess - extraoral soft tissue

D7530 removal of foreign body, skin, or subcutaneous alveolar tissue

D7540 removal of reaction-producing foreign bodies, musculoskeletal system

D7550 sequestrectomy for osteomyelitis

D7560 maxillary sinusotomy for removal of tooth fragment or foreign body

## TREATMENT OF FRACTURES - SIMPLE

D7610 maxilla - open reduction (teeth immobilized, if present)

D7620 maxilla - closed reduction (teeth immobilized, if present)

D7630 mandible - open reduction (teeth immobilized, if present)

D7640 mandible - closed reduction (teeth immobilized, if present)

D7650 malar &/or zygomatic arch - open reduction

D7660 malar &/or zygomatic arch - closed reduction

D7670 **revised** alveolus - stabilization of teeth, closed reduction splinting

D7680 facial bones - complicated reduction with fixation & multiple surgical approaches

## TREATMENT OF FRACTURES - COMPOUND

D7710 **ASSIST** maxilla - open reduction

D7720 **ASSIST** maxilla - closed reduction

D7730 **ASSIST** mandible - open reduction

D7740 **ASSIST** mandible - closed reduction

D7750 **ASSIST** malar and/or zygomatic arch - open reduction

D7760 **ASSIST** malar and/or zygomatic arch - closed reduction

D7770 **ASSIST** alveolus - stabilization of teeth, open reduction splinting

D7780 **ASSIST** facial bones - complicated reduction with fixation & multiple surgical approaches

## REDUCTION OF DISLOCATION AND MANAGEMENT OF OTHER TEMPOROMANDIBULAR JOINT

### DYSFUNCTIONS

D7810 open reduction of dislocation

D7820 closed reduction of dislocation

D7830 manipulation under anesthesia

D7840 **PAR** **ASSIST** condylectomy

D7850 **PAR** **ASSIST** surgical discectomy, with/without implant

D7852 **PAR** **ASSIST** disc repair

D7854 **PAR** **ASSIST** synovectomy

D7856 **PAR** **ASSIST** myotomy

D7858 **PAR** **ASSIST** joint reconstruction

D7860 **PAR** **ASSIST** arthrotomy

D7865 **PAR** **ASSIST** arthroplasty

D7870 **PAR** **ASSIST** arthrocentesis

D7871 **PAR** **ASSIST** **new** non-arthroscopic lysis and lavage

# CHILD BENEFITS

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D7872 **PAR** **ASSIST** arthroscopy - diagnostic, with or without biopsy

D7873 **PAR** **ASSIST** arthroscopy - surgical: lavage & lysis of adhesions

D7874 **PAR** **ASSIST** arthroscopy - surgical: disc repositioning & stabilization

D7875 **PAR** **ASSIST** arthroscopy - surgical: synovectomy

D7876 **PAR** **ASSIST** arthroscopy - surgical: discectomy

D7877 **PAR** **ASSIST** arthroscopy - surgical: debridement

D7880 **PAR** occlusal orthotic device, by report

D7899 **PAR** **ASSIST** unspecified TMD therapy, by report

**REPAIR OF TRAUMATIC WOUNDS**

D7910 suture of recent small wounds - up to 5 cm

**COMPLICATED SUTURING**

D7911 complicated suture - up to 5 cm

D7912 complicated suture - greater than 5 cm

**OTHER REPAIR PROCEDURES**

D7920 **ASSIST** skin graft (identify defect covered, location and type of graft)

D7940 **PAR** **ASSIST** osteoplasty - for orthognathic deformities

D7941 **PAR** **ASSIST** **revised** osteotomy – mandibular rami

D7942 **deleted** osteotomy - ramus, open

D7943 **PAR** **ASSIST** **revised** osteotomy – mandibular rami with bone graft; includes obtaining the graft

D7944 **PAR** **ASSIST** osteotomy - segmented or subapical - per sextant or quadrant

D7945 **PAR** **ASSIST** osteotomy - body of mandible

D7946 **PAR** **ASSIST** Lefort I (maxilla - total)

D7947 **PAR** **ASSIST** Lefort I (maxilla - segmented)

D7948 **PAR** **ASSIST** Lefort II or Lefort III (osteoplasty of facial bones for mid-face hypoplasia or retrusion) - without bone graft

D7949 **PAR** **ASSIST** Lefort II or Lefort III - with bone graft

D7950 **PAR** **ASSIST** osseous, osteoperiosteal, or cartilage graft of the mandible or facial bones - autogenous or nonautogenous, by report

D7955 **PAR** **ASSIST** repair of maxillofacial soft and hard tissue defect

D7960 frenulectomy (frenectomy or frenotomy) - separate procedure

D7970 excision of hyperplastic tissue - per arch

D7971 excision of pericoronal gingiva

D7980 sialolithotomy

D7981 **ASSIST** excision of salivary gland, by report

D7982 sialodochoplasty

D7983 closure of salivary fistula

D7990 emergency tracheotomy

D7991 **PAR** **ASSIST** coronoidectomy

D7995 **PAR** **ASSIST** synthetic graft - mandible or facial bones, by report

D7996 **PAR** **ASSIST** implant - mandible for augmentation purposes (excluding alveolar), by report

D7997 **new** appliance removal (not by dentist who placed appliance), includes removal of archbar

D7999 **PAR** **ASSIST** unspecified oral surgery procedure, by report

**LIMITED ORTHODONTIC TREATMENT**

D8010 limited orthodontic treatment of the primary dentition

D8020 limited orthodontic treatment of the transitional dentition

D8030 limited orthodontic treatment of the adolescent dentition

D8040 limited orthodontic treatment of the adult dentition

**MINOR TREATMENT TO CONTROL HARMFUL HABITS**

D8210 removable appliance therapy

D8220 fixed appliance therapy

**UNCLASSIFIED TREATMENT**

D9110 palliative (emergency) treatment of dental pain – minor procedures

**ANESTHESIA**

D9220 general anesthesia - first 30 minutes

D9221 general anesthesia - each additional 15 minutes

D9230 **revised** analgesia, anxiolysis, inhalation of nitrous oxide

➔ This code can be billed only when one or more of the following operative and/or surgical procedures is billed on the same date of service for the client: D2110-D4999, D7110-D7999.

D9240 **deleted** intravenous sedation

D9241 **new** intravenous sedation/analgesia – first 30 minutes

D9242 **new** intravenous sedation/analgesia – each additional 15 minutes

D9248 **new** non-intravenous conscious sedation

X9250 **deleted** conscious sedation - parenteral route

➔ see D9248

X9260 **deleted** conscious sedation - oral route

➔ see D9248

**PROFESSIONAL CONSULTATION**

D9310 consultation (diagnostic services provided by dentist or physician other than practitioner providing treatment)

**PROFESSIONAL VISITS**

D9410 **revised** house/extended care facility call

D9420 hospital call

**MISCELLANEOUS SERVICES**

D9911 **new** application of desensitizing resin for cervical and/or root surface, per tooth

X9925 pedodontic restraining device

➔ special Colorado Medicaid code begins with an "X"

D9940 occlusal guard, by report

D9951 occlusal adjustment - limited

D9952 **PAR** occlusal adjustment – complete

D9971 **new** odontoplasty 1-2 teeth; includes removal of enamel projections

D9999 **PAR** unspecified adjunctive procedure, by report

# ADULT BENEFITS

Only the limited dental benefits listed in this section are available for adults, age 21 & older.

◆ A concurrent medical condition is required to provide any of the services listed below ◆

## PAR - Prior Authorization Review

**PAR** after the procedure code, designates that prior authorization review is required before starting the service for an adult.

## Electronic PAR

Electronic PAR is available only with Consultec's WINASAP program, which is supplied at no cost to dental providers. In the "Provider comments" field, write the dental condition supporting the need for service and one of the below listed concurrent medical conditions.

## Paper PAR

In the "Remarks for unusual services" area of the 1994 or 1999 ADA dental claim form, write the dental condition supporting the need for the service and one of the below listed concurrent medical conditions. Please do not send x-rays.

## Concurrent medical conditions

- Infection of an oral facial structure
- Accident to an oral facial structure
- Trauma to an oral facial structure
- Fracture of an oral facial structure
- Disorder of temporomandibular structure
- Mental retardation, severe mental condition
- Physical handicap
- Pregnancy
- Suppressed immune system
- Chemotherapy for cancer
- Organ transplant
- Other major medical condition - please describe

## TMJ surgery ◆ PAR required only for the primary surgeon

In the "Provider comments" field of Consultec's WINASAP program, or the "Remarks for unusual services" area of the 1994 or 1999 ADA dental claim form, write the TMJ diagnosis, duration of symptoms, number of previous TMJ surgeries, and prognosis with the planned surgery. CPT medical and surgical codes may not be used. Please do not send x-rays or attachments.

## Assistant surgeon ◆ PAR not required

**ASSIST** next to the code, indicates procedures for which an assistant surgeon is allowed for an adult. These claims must be submitted on paper, see page 14.

## Inpatient & Outpatient Hospitalization ◆ PAR not required

## Approval of a PAR does not guarantee Medicaid payment and does not serve as a timely filing waiver

Authorization only assures that the approved service, as identified on the PAR, is a medical necessity and is considered a benefit of the Medicaid program. All claims, including those for prior authorized services, must meet eligibility and claim submission requirements (e.g., timely filing, Primary Care Physician information completed appropriately, third party resources payments pursued, required attachments included, etc.) before payment can be made. Claims not in compliance with documentation and billing requirements may be denied or subject to recovery.

## CLINICAL ORAL EVALUATIONS

- D0140 **PAR** limited oral evaluation - problem focused
- D0150 **PAR** comprehensive oral evaluation
- D0160 **PAR** detailed & extensive oral evaluation problem focuses
- D0170 **new** re-evaluation-limited, problem focused (established patient; not post-operative visit)

## RADIOGRAPHS/DIAGNOSTIC IMAGING

- D0210 **PAR** intraoral - complete series (including bite wings)
- D0220 intraoral - periapical - first film
- D0230 intraoral - each additional film
- D0240 intraoral - occlusal film
- D0250 extraoral - single film
- D0260 extraoral - each additional film
- D0270 bitewing - single film
- D0272 bitewings - two films
- D0274 bitewings - four films
- D0277 **new** vertical bitewings - 7 to 8 films
- D0290 **PAR** posterior-anterior or lateral skull & facial bone survey film
- D0310 **PAR** sialography
- D0320 **PAR** temporomandibular joint arthrogram, including injection
- D0321 **PAR** other temporomandibular joint films, by report
- D0322 **PAR** tomographic survey
- D0330 panoramic film
- D0340 **PAR** cephalometric film
- D0350 **new** oral/facial images (includes intra and extraoral images)

## TESTS AND LABORATORY EXAMINATIONS

- D0415 bacteriologic studies for the determination of pathologic agents
- D0460 pulp vitality tests
  - ➔ includes multiple teeth & contralateral comparison/s
- D0470 **PAR** diagnostic casts
  - ➔ includes both maxillary and mandibular casts
- D0471 **deleted** diagnostic photographs
  - ➔ see new code D0350

## ORAL PATHOLOGY LABORATORY

- D0472 **new** accession of tissue, gross examination, preparation and transmission of written report
- D0473 **new** accession of tissue, gross and microscopic examination, preparation and transmission of written report
- D0474 **new** accession of tissue, gross and microscopic examination, including assessment of surgical margins for presence of disease, preparation and transmission of written report
- D0480 **new** processing and interpretation of cytologic smears, including the preparation and transmission of written report
- D0501 histopathologic examinations
- D0502 **PAR** other oral pathology procedure, by report
- D0999 **PAR** unspecified diagnostic procedure, by report

## AMALGAM RESTORATIONS

- D2140 **PAR** amalgam - one surface, permanent
- D2150 **PAR** amalgam - two surfaces, permanent
- D2160 **PAR** amalgam - three surfaces, permanent
- D2161 **PAR** amalgam - four or more surfaces, permanent

# ADULT BENEFITS

Only the limited dental benefits listed in this section are available for adults, age 21 & older.

◆ A concurrent medical condition is required to provide any of the services listed below ◆

## RESIN RESTORATIONS

- D2330 [PAR] resin - one surface, anterior
- D2331 [PAR] resin - two surfaces, anterior
- D2332 [PAR] resin - three surfaces, anterior
- D2335 [PAR] resin - four or more surfaces or involving incisal angle (anterior)
- D2385 [PAR] resin - one surface, posterior - permanent
- D2386 [PAR] resin - two surfaces, posterior - permanent
- D2387 [PAR] resin - three surfaces, posterior - permanent
- D2940 [PAR] sedative filling
- D2951 [PAR] pin retention - per tooth, in addition to restoration

## PULP CAPPING

- D3110 [PAR] pulp cap - direct (excluding final restoration)
- D3120 [PAR] pulp cap - indirect (excluding final restoration)

## PERIODONTICS - SURGICAL PROCEDURES

- D4210 [PAR] gingivectomy or gingivoplasty - per quadrant
- D4211 [PAR] gingivectomy or gingivoplasty - per tooth
- D4220 [PAR] gingival curettage, surgical - per quadrant, by report
- D4240 [PAR] gingival flap procedure, including root planing - per quadrant

## NON-SURGICAL PERIODONTAL SERVICE

- D4321 [PAR] provisional splinting - extracoronal
- D4341 [PAR] periodontal scaling and root planing, per quadrant
- D4355 [PAR] full mouth debridement to enable comprehensive periodontal evaluation and diagnosis
- D4381 [PAR] localized delivery of chemotherapeutic agents via a controlled release vehicle into diseased crevicular tissue, per tooth, by report

## MAXILLOFACIAL PROSTHETICS

- D5931 [PAR] obturator prosthesis, surgical
- D5932 [PAR] obturator prosthesis, definitive
- D5933 [PAR] obturator prosthesis, modification
- D5934 [PAR] mandibular resection prosthesis with guide flange
- D5935 [PAR] mandibular resection prosthesis without guide flange
- D5936 [PAR] obturator prosthesis, interim
- D5954 [PAR] palatal augmentation prosthesis
- D5955 [PAR] palatal lift prosthesis, definitive
- D5958 [PAR] palatal lift prosthesis, interim
- D5959 [PAR] palatal lift prosthesis, modification
- D5982 surgical stent
- D5983 [PAR] radiation carrier
- D5984 [PAR] radiation shield
- D5985 [PAR] radiation cone locator
- D5987 [PAR] commissure splint
- D5988 surgical splint

## IMPLANT SERVICES

- D6010 [PAR] surgical placement of implant body - endosteal implant
- D6020 [PAR] abutment placement or substitution - endosteal implant
- D6040 [PAR] surgical placement - eposteal implant
- D6050 [PAR] surgical placement - transosteal implant

## OTHER IMPLANT SERVICES

- D6080 [PAR] implant maintenance procedures including removal of prosthesis and cleaning of prosthesis and abutments and reinsertion of prosthesis
- D6095 [PAR] repair implant abutment, by report

- D6100 [PAR] implant removal, by report
- D6199 [PAR] unspecified implant procedure, by report

## EXTRACTION

- D7110 single tooth
  - ➔ when doing multiple extractions on the same date of service, use this code only for the first extraction
- D7120 each additional tooth
- D7130 root removal - exposed roots

## SURGICAL EXTRACTIONS

- D7210 surgical removal of erupted tooth requiring elevation of mucoperiosteal flap & removal of bone &/or section of tooth
- D7220 removal of impacted tooth - soft tissue
- D7230 removal of impacted tooth - partially bony
- D7240 removal of impacted tooth - completely bony
- D7241 removal of impacted tooth - completely bony, with unusual surgical complications
- D7250 surgical removal of residual tooth roots (cutting procedure)

## OTHER SURGICAL PROCEDURES

- D7260 oroantral fistula closure
- D7270 tooth reimplantation &/or stabilization of accidentally avulsed or displaced tooth &/or alveolus
- D7285 [revised] biopsy of oral tissue - hard (bone, tooth)
- D7286 [revised] biopsy of oral tissue - soft (all others)
- D7290 surgical repositioning of teeth

## ALVEOLOPLASTY - SURGICAL PREPARATION OF RIDGE FOR DENTURES

- D7310 alveoloplasty in conjunction with extraction - per quadrant
  - D7320 [PAR] alveoloplasty not in conjunction with extraction - per quadrant
- ## VESTIBULOPLASTY
- D7340 [PAR] vestibuloplasty - ridge extension (secondary epithelialization)
  - D7350 [PAR] vestibuloplasty - ridge extension (including soft tissue grafts, muscle reattachment, revision of soft tissue attachment and management of hypertrophied & hyperplastic tissue)

## SURGICAL EXCISION OF REACTIVE INFLAMMATORY LESIONS

- D7410 radical excision - lesion diameter up to 1.25cm
- D7420 [ASSIST] radical excision - lesion diameter greater than 1.25cm

## REMOVAL OF TUMORS, CYSTS & NEOPLASM

- D7430 excision of benign tumor - lesion diameter up to 1.25cm
- D7431 [ASSIST] excision of benign tumor - lesion diameter greater than 1.25cm
- D7440 excision of malignant tumor - lesion diameter up to 1.25cm
- D7441 [ASSIST] excision of malignant tumor - lesion diameter greater than 1.25cm
- D7450 removal of odontogenic cyst or tumor - lesion diameter up to 1.25 cm
- D7451 [ASSIST] removal of odontogenic cyst or tumor - lesion diameter greater than 1.25cm
- D7460 removal of nonodontogenic cyst or tumor - lesion diameter up to 1.25cm
- D7461 [ASSIST] removal of nonodontogenic cyst or tumor - lesion diameter greater than 1.25cm