

Book sampler:

These are sample pages of the book containing front and back cover, table of contents, introduction, how to use this guide, what is ICD?, sample scenario, sample ICD-10-CM reference

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ICD-10-CM

**DIAGNOSTIC
CODING FOR**

**DENTAL CLAIM
SUBMISSION**

2017 EDITION

How to Use This Guide

Diagnostic Coding for Dental Claim Submission is a dynamic resource for any dental practice. Different practices have different levels of understanding and experience with ICD diagnostic coding. This Guide aims to provide a comprehensive resource for anyone submitting ICD-10-CM codes on the 2012 ADA Dental Claim Form. Dental coding is challenging but medical coding can be even more complex.

Dental-Related Diagnoses Codes

This Guide contains ICD-10-CM codes as they relate to dental procedures. The goal is to provide the user with a listing of diagnoses codes relating to dental procedures, thus reducing the time required to look up the codes in an all-encompassing ICD coding manual. This is helpful, as there are more than 70,000 ICD-10-CM codes. Toward the end of this Guide, each of the listed ICD-10-CM codes are broken down by procedure type.

Scenario-Based Teaching MethodSM – A Simplified Approach

For those new to ICD, the scenario section of this Guide will provide an in-depth example for submitting ICD-10-CM diagnoses codes on the dental claim form. Various scenarios with step-by-step guidance are provided. The scenarios begin with a simple explanation of the clinical situation at hand. The related diagnoses codes are then reviewed and the rationale for the selected codes provided. Next, a demonstration of proper reporting on the 2012 ADA Dental Claim Form is provided. Further information and coding tips are detailed to improve the reader's understanding of the coding process. **The scenarios presented in this Guide are to be used for training purposes only. In an actual clinical setting, the procedure and diagnoses codes may vary.**

Scenario Legend



This section describes the diagnoses codes applicable to each procedure in the scenario.



This section describes the rationale of why the selected diagnoses codes are appropriate for the procedures performed.



This section provides the basic instructions on properly reporting the diagnoses codes on the dental claim form.



This section provides tips for proper reporting of both diagnoses and procedure codes to maximize reimbursement and minimize coding errors and risk.

3 Evaluation/Preventive Visit – Child New Patient (Three Years and Over) – Comprehensive Oral Evaluation, Prophylaxis, Occlusal Radiographs, Fluoride Application, and Caries Risk Assessment

Comprehensive Oral Evaluation, Prophylaxis, Occlusal Radiographs, Fluoride Application, and Caries Risk Assessment

SCENARIO

A three-year-old patient presents as a new patient. The dentist performed a comprehensive oral evaluation (D0150). The hygienist performed a child prophylaxis (D1120) and fluoride varnish application (D1206). Due to poor homecare, a caries risk assessment (D0602) with a finding of moderate risk was performed. The hygienist provided homecare instructions to the mother. Two intraoral occlusal radiographic images (D0240) of the maxillary and mandibular arch were captured and reviewed by the dentist. The patient was not cooperative for bitewing radiographic images.

DIAGNOSIS

Pointer	ICD-10-CM	ICD-10-CM Description	CDT Codes
A	Z01.20	Dental examination and cleaning without abnormal findings	D0150, D0240, D0602, D1120
B	Z29.3	Encounter for prophylactic fluoride administration	D1206

RATIONALE

The primary diagnosis is listed in Box 34a "A." The primary purpose of the visit is a child new patient visit. In ICD-10-CM, Z01.20 describes the exam and cleaning when no abnormalities are found. This code is also assigned to the radiographic images and the caries risk assessment. Z29.3 is assigned to the fluoride varnish application.

RECORD OF SERVICES PROVIDED																					
24. Procedure Date (MM/DD/CCYY)	25. Area of Oral Cavity	26. Tooth System	27. Tooth Number(s) or Letter(s)	28. Tooth Surface	29. Procedure Code	29a. Diag. Pointer	29b. Qty.	30. Description													
					D0150	A	1	COMPREHENSIVE ORAL EVALUATION – NEW OR ESTABLISHED													
					D1120	A	1	PROPHYLAXIS – CHILD													
					D1206	B	1	TOPICAL FLUORIDE – EXCLUDING VARNISH													
	01				D0240	A	1	INTRAORAL – OCCLUSAL RADIOGRAPHIC IMAGE													
	02				D0240	A	1	INTRAORAL – OCCLUSAL RADIOGRAPHIC IMAGE													
					D0602	A	1	CARIES RISK ASSESSMENT – MODERATE RISK													
33. Missing Teeth Information (Place an "X" on each missing tooth.)					34. Diagnosis Code List Qualifier			34. Diagnosis Code List Qualifier AB (ICD-9 = B; ICD-10 = AB)						31a. Other Fee(s)							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	A	Z01.20	C			
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	(Primary diagnosis in "A")	B	Z29.3	D		32. Total Fee

FORM INFO

The 2012 ADA Dental Claim Form is limited to four diagnoses codes (Box 34a). The primary diagnosis should be placed in "A." The remaining order in which the diagnoses codes are entered into the other boxes is not critical. However, the order in which the pointers (Box 29a) are listed is critical. The pointer communicates to the payer the primary diagnosis for each procedure. For dental claims, always utilize a line for each dental procedure and enter the appropriate quantity of the service provided for the units (Box 29b). For ICD-10-CM, enter "AB" in Box 34.

TIP

Intraoral occlusal radiographic images are often taken on young children when they do not cooperate for bitewings.

ICD-10-CM Reference

This listing is not intended to be a comprehensive listing of all ICD-10-CM codes or their application to specific conditions and diseases. Examples listed for the application of use for each code are edited to include those most common to the dental practice. For a complete listing of all ICD-10 codes and their application please refer to an ICD-10-CM code book. The complete ICD-10-CM code set is available for download, free of charge, at www.cms.gov.

K01 Embedded and impacted teeth

 **Excludes1:** abnormal position of fully erupted teeth (M26.3-)


K01.0 Embedded teeth

Embedded teeth refers to teeth that are under the gum line (i.e., soft tissue impacted)

K01.1 Impacted teeth

Impacted teeth refer to teeth prevented from eruption by bone, another tooth or malposition (i.e., full or partial bony impacted)

K02 Dental caries

 **Includes:** caries of dentine
dental cavities
early childhood caries
pre-eruptive caries
recurrent caries (dentino enamel junction) (enamel) (to the pulp)
tooth decay

K02.3 Arrested dental caries

Arrested coronal and root caries

K02.5 Dental caries on pit and fissure surface

Dental caries on chewing surface of tooth

K02.51 Dental caries on pit and fissure surface limited to enamel

White spot lesions [initial caries] on pit and fissure surface of tooth

K02.52 Dental caries on pit and fissure surface penetrating into dentin

Primary dental caries, cervical origin

K02.53 Dental caries on pit and fissure surface penetrating into pulp

K02.6 Dental caries on smooth surface

K02.61 Dental caries on smooth surface limited to enamel

White spot lesions [initial caries] on smooth surface of tooth

K02.62 Dental caries on smooth surface penetrating into dentin

K02.63 Dental caries on smooth surface penetrating into pulp

K02.7 Dental root caries

K02.9 Dental caries, unspecified



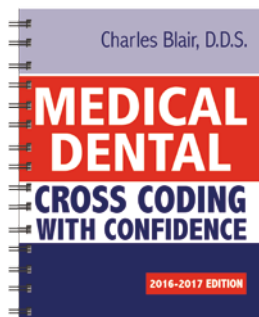
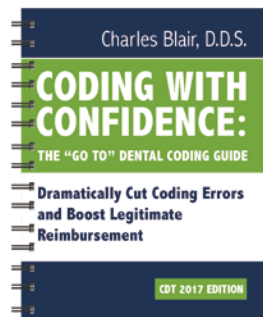
Dr. Charles Blair is one of dentistry's leading authorities on practice profitability, fee analysis, insurance coding and administration, insurance coding strategies, and strategic planning. As a former successful practitioner, his passion for the business side of dentistry is unparalleled. Dr. Blair has personally consulted with thousands of practices, helping them to identify and implement new strategies for improved productivity and profitability. Dr. Blair is a nationally acclaimed speaker for dental groups, study clubs, and other professional organizations. He is also a widely read and highly respected author and publisher. His extensive background and expertise makes him uniquely qualified to share his wealth of knowledge with the dental profession.

Diagnostic Coding for Dental Claim Submission is Dr. Blair's resource for learning how to assign ICD diagnostic codes to dental procedures when submitting dental claims using the 2012 ADA Dental Claim Form.

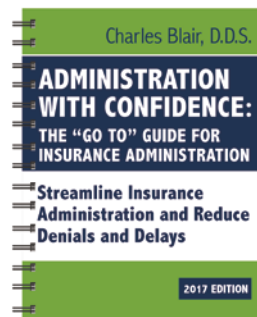
A few highlights include:

- Utilizes a Scenario-Based Teaching MethodSM to demonstrate proper code submission
- Includes ICD-10-CM diagnoses codes most commonly used for dental procedures
- Offers a user-friendly format that is effective for both the beginner and experienced dental team member
- Analyzes administrative matters as they relate to Medicaid, Affordable Care Act plans, audits, etc.
- Reviews the top Affordable Care Act plan questions and answers
- Enables the practice to prevent claim rejections through proper diagnostic coding
- Provides tips for gaining legitimate reimbursement

Related Resources



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A



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