

KMAP DENTAL BULLETIN 13007

HCPCS 2013 and Other Updates

Effective with dates of service on and after January 1, 2013, the following dental codes will be covered for some KMAP beneficiaries:

- D1206 Topical application of fluoride varnish
- D1208 Topical application of fluoride

The maximum allowable for these codes will be \$17.

Code D1203 has been deleted by the American Dental Association.

Refer to the updated Dental Fee Schedule attached.

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Use the following resources to determine coverage and pricing information. For accuracy, use your provider type and specialty as well as the beneficiary ID number or benefit plan.

- Information is available on the public website.
- Information is available on the <u>secure website</u> under Pricing and Limitations.

A chart has been developed to assist providers in understanding how KMAP will handle specific modifiers. The <u>Coding Modifiers Table</u> is under Reference Codes on the Provider tab of the public website and Pricing and Limitations on the secure portion.

For the changes resulting from this provider bulletin, view the updated *Dental Provider Manual*, pages 1, 8, 10, 11, 13, 19, and 20; Appendix B, B-1 and B-2; Exhibit A, page EA-6 and EA-25; Exhibit B, EB-23; Exhibit C, EC-11; Exhibit D, ED-21; Exhibit E, EE-22.

KMAP

Kansas Medical Assistance Program

- Bulletins
- Manuals
- Forms

Customer Service

- 1-800-933-6593 (in-state)
- 785-274-5990
 8:00 a.m. 5:00 p.m.
 Monday Friday

Please refer to the exhibits at the end of the Dental Provider Manual for current benefit plan coverage.

All codes listed below are not covered under every benefit plan.

	All codes listed below are not covered under every bene	Maximum	
Code	Procedure	Allowance	
D0120	periodic oral evaluation - established patient	\$21.00	
D0140	limited oral evaluation	\$29.35	
D0145	oral eval for patient under 3 years of age	\$29.00	
D0150	comprehensive oral evaluation	\$29.00	
D0170	re-evaluation	\$25.00	
D0210	intraoral - complete series	\$60.00	
D0220	intraoral - periapical 1st film	\$12.00	
D0230	intraoral - periapical each additional	\$10.00	
D0240	intraoral - occlusal film	\$18.00	
D0250	extraoral - 1st film	\$20.00	
D0260	extraoral - each additional	\$12.50	
D0270	bitewing - single film	\$14.00	
D0272	bitewing - two films	\$20.00	
D0273	bitewing - three films	\$25.00	
D0274	bitewing - four films	\$29.00	
D0277	vertical bitewings - 7 to 8 films	\$25.00	
D0290	posterior-anterior or lateral skull film	\$60.00	
D0321	other tmj films - by report	\$60.00	
D0322	tomographic survey	\$55.00	
D0330	panoramic film	\$57.00	
D0460	pulp vitality tests	\$15.00	
D1110	prophylaxis - adult	\$41.00	
D1120	prophylaxis - child	\$30.00	
D1206	topical application of fluoride varnish	\$17.00	
D1208	topical application of fluoride-child	\$17.00	
D1351	sealant - per tooth	\$24.92	
D1510	space maintainer - fixed - unilateral	\$150.00	
D1515	space maintainer - fixed - bilateral	\$210.00	
D1525	space maintainer - removable - bilateral	\$200.00	
D1550	re-cementation space maintainer	\$30.00	
D2140	amalgam - 1 surface	\$53.50	
D2150	amalgam - 2 surface	\$64.00	
D2160	amalgam - 3 surface	\$76.00	
D2161	amalgam - 4+ surface	\$91.50	
D2330	composite - 1 surface anterior	\$66.00	
D2331	composite - 2 surface anterior	\$80.00	
D2332	composite - 3 surface anterior	\$95.00	
D2335	composite - 4+ surface anterior	\$110.00	
D2390	composite crown - anterior	\$150.00	
D2391	composite - 1 surface posterior	\$70.00	
D2392	composite - 2 surface posterior	\$75.00	
D2393	composite - 3 surface posterior	\$80.00	
D2394	composite - 4+ surface posterior	\$95.00	
D2710	crown - resin	\$400.00	
D2740	crown - porc/ceramic	\$300.00	
D2751	crown - porc/metal base	\$450.00	
D2752	crown - porc/metal noble	\$470.00	

1/1/2013

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Code	Procedure	Allowance	
D2783	crown - 3/4 porc/ceramic	\$270.00	
D2791	crown - full metal base	\$216.00	
D2792	crown - full metal noble	\$259.20	
D2910	recement inlay	\$10.80	
D2920	recement crown	\$31.00	
D2930	crown - prefab stainless steel - primary	\$120.00	
D2931	crown - prefab stainless steel - permanent	\$131.00	
D2934	crown - prefab esthetic coated stainless steel – primary	\$140.00	
D2940	sedative filling	\$30.00	
D2951	pin retention - per tooth	\$28.00	
D2954	prefab post & core	\$120.00	
D2957	each additional prefab post	\$110.00	
D3110	pulp cap - direct	\$28.00	
D3220	pulpotomy	\$60.00	
D3221	pulpal debridement - primary and permanent	\$60.00	
D3222	partial pulpotomy for apexogenesis - permanent	\$60.00	
D3310	endodontic therapy - anterior	\$250.00	
D3320	endodontic therapy - bicuspid	\$275.00	
D3330	endodontic therapy - molar	\$350.00	
D3331	treatment of root canal obstruction	\$250.00	
D3351	apexification/recalcification - initial	\$60.00	
D3352	apexification/recalcification - interim	\$100.00	
D3353	apexification/recalcification - final	\$100.00	
D3410	apicoectomy - anterior	\$90.00	
D3421	apicoectomy - bicuspid - first root	\$90.00	
D3425	apicoectomy - molar - first root	\$90.00	
D3426	apicoectomy - each additonnal root	\$90.00	
D3430	retrograde filling - per root	\$40.00	
D4210	gingivectomy/gingivoplasty - 4+ teeth per quad	\$118.80	
D4211	gingivectomy/gingivoplasty - 1 to 3 teeth per quad	\$30.00	
D4230	anatomical crown exposure - 4+ contiguous teeth per quad	\$118.80	
D4231	anatomical crown exposure - one to 3 teeth per quad	\$60.00	
D4268	surgical revision - per tooth	\$30.00	
D4341	scaling and root planing - 4+ teeth per quad	\$53.00	
D4342	scaling and root planing - 1 to 3 teeth per quad	\$53.00	
D4355	full mouth debridement	\$58.00	
D5110	complete denture - max	\$1,106.14	
D5120	complete denture - mand	\$1,107.92	
D5211	partial denture - resin base - max	\$830.35	
D5212	partial denture - resin base - mand	\$843.91	
D5213	partial denture - metal base - max	\$1,177.06	
D5214	partial denture - metal base - mand	\$1,176.75	
D5225	partial denture - flexible base - max	\$801.90	
D5226	partial denture - flexible base - mand	\$801.90	
D5281	removable unilateral partial denture	\$184.29	
D5410	adjustment - complete denture - max	\$89.10	
D5411	adjustment - complete denture - mand	\$89.10	

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Code	Procedure	Allowance	
D5421	adjustment - partial denture - max	\$59.40	
D5422	adjustment - partial denture - mand	\$48.17	
D5510	repair - complete denture base	\$132.05	
D5520	replace - missing/broken teeth - complete denture	\$113.28	
D5610	repair - partial denture base	\$131.25	
D5620	repair - cast framework partial denture	\$133.65	
D5630	repair - broken clasp partial denture	\$59.40	
D5640	replace - missing/broken teeth - partial denture	\$111.83	
D5650	add tooth - partial denture	\$138.87	
D5660	add clasp - partial denture	\$170.67	
D5670	replace all teeth - partial denture - max	\$103.95	
D5671	replace all teeth - partial denture - mand	\$103.95	
D5730	reline- complete denture - max - chairside	\$242.35	
D5731	reline- complete denture - mand - chairside	\$243.05	
D5750	reline- complete denture - max - lab	\$312.61	
D5751	reline - complete denture - mand - lab	\$314.29	
D5760	reline - partial denture - max - lab	\$297.00	
D5761	reline - partial denture - mand - lab	\$297.00	
D5850	tissue conditioning - max	\$96.23	
D5851	tissue conditioning - mand	\$96.23	
D6100	implant removal	By Report	
D6930	recement bridge	\$89.10	
D7140	extraction - erupted tooth or exposed root	\$90.00	
D7210	extraction - surgical	\$129.67	
D7220	impaction - soft tissue	\$110.00	
D7230	impaction - partially bony	\$150.00	
D7240	impaction - completely bony	\$175.00	
D7241	impaction - completely bony - surgical complications	\$205.00	
D7250	surgical removal of residual roots	\$110.00	
D7260	oroantral fistula closure	\$648.00	
D7270	tooth reimplantation	\$176.00	
D7280	surgical access of unerupted tooth	\$200.00	
D7285	biopsy of oral tissue - hard	\$75.00	
D7286	biopsy of oral tissue - soft	\$58.00	
	alveloplasty in conjunctino with extractions per quad -		
D7310	4+ teeth/spaces	\$167.32	
D7320	alveloplasty w/o extractions per quad - 4+ teeth/spaces	\$80.00	
D7350	vestibuloplasty w/ soft tissue grafts	\$800.00	
D7410	excision benign lesion - 1.25 cm	\$75.00	
D7411	excision benign lesion - >1.25 cm	\$50.00	
D7412	excision benign lesion - complicated	\$82.08	
D7413	excision malignant lesion - 1.25 cm	\$125.00	
D7414	excision malignant lesion - >1.25 cm	\$50.00	
D7415	excision malignant lesion - complicated	\$82.08	
D7440	excision malignant tumor - 1.25 cm	\$42.00	
D7441	excision malignant tumor - >1.25 cm	\$160.00	
D7450	removal odontogenic cyst/tumor - 1.25 cm	\$85.00	

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Code	Procedure	Allowance
D7451	removal odontogenic cyst/tumor - >1.25 cm	\$242.00
D7460	removal nonodontogenic cyst/tumor - 1.25 cm	\$125.00
D7461	removal nonodontogenic cyst/tumor - >1.25 cm	\$486.00
D7471	removal of lateral exostosis - max or mand	\$100.00
D7472	removal of torus palatinus	\$100.00
D7473	removal of torus mandibularis	\$100.00
D7490	radical resection of mand w/ graft	\$750.00
D7510	incision & drainage - intraoral	\$45.00
D7511	incision & drainage - intraoral - complicated	\$45.00
D7520	incision & drainage - extraoral	\$81.00
D7521	incision & drainage - extraoral - complicated	\$81.00
D7530	removal of foreign body	\$60.00
D7540	removal of reaction producing foreign bodies	\$17.28
D7550	partial ostectomy/sequestrectomy	\$360.00
D7560	maxillary sinusotomy	By Report
D7610	max - open reduction - teeth immobilized	\$340.20
D7620	max - closed reduction - teeth immobilized	\$540.00
D7630	mand - open reduction - teeth immobilized	\$335.00
D7640	mand - closed reduction - teeth immobilized	\$201.00
D7650	malar/zygo arch - open reduction	\$486.00
D7660	malar/zygo arch - closed reduction	\$113.40
D7670	alveolus - closed reduction - stabilization	\$216.00
D7680	facial bones - complicated reduction	By Report
D7710	max - open reduction - compound	\$810.00
D7720	max - closed reduction - compound	\$267.57
D7730	mand - open reduction - compound	\$335.00
D7740	mand - closed reduction - compound	\$335.00
D7750	malar/zygo - open reduction - compound	\$435.50
D7760	malar/zygo - closed reduction - compound	\$335.00
D7770	alveolus - open reduction - stabilization - compound	\$60.00
D7780	facial bones - complicated reduction with fixation	\$1,000.00
D7820	closed reduction - dislocation	\$150.00
D7860	arthrotomy	\$250.00
D7865	arthroplasty	By Report
D7910	suture of small wounds - 5.0 cm	\$60.00
D7911	complicated suture - 5.0 cm	\$91.00
D7912	complicated suture - >5.0 cm	\$175.00
D7920	skin graft	By Report
D7955	repair soft/hard tissue defect	By Report
D7960	frenulectomy	\$145.00
D7963	frenuloplasty	\$145.00
D7971	excision of periocoronal gingiva	\$56.00
D7980	sialolithotomy	\$20.10
D7981	excision of salivary gland - by report	\$33.50
D7982	sialodochoplasty	\$21.60
D7983	closure of salivary fistula	By Report
D7990	emergency tracheotomy	\$270.00

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		Maximum
Code	Procedure	Allowance
D8010	limited ortho - primary	\$300.00
D8020	limited ortho - transitional	\$375.00
D8050	interceptive - primary	\$1,728.00
D8060	interceptive - transitional	\$1,728.00
D8070	comprehensive - transitional	\$1,728.00
D8080	comprehensive - adolescent	\$1,728.00
D8210	removable appliance therapy	\$216.00
D8220	fixed appliance therapy	\$305.00
D8999	unspecified procedure - by report	By Report
D9212	trigeminal division block anesthesia	\$28.00
D9220	deep sedation/general anesthesia - 1st 30 min	\$190.00
D9221	deep sedation/general anesthesia - each 15 min	\$85.00
D9230	analgesia/anxiolysis/inhalation of nitrous oxide	\$20.00
D9241	iv conscious sedation/analgesia - 1st 30 min	\$95.00
D9242	iv conscious sedation/analgesia - each 15 min	\$35.00
	consultation - diagnostic service provided by dentist or	
D9310	physician other then requesting dentist or physician	\$30.00
D9410	house/extended care facility call	\$16.20
D9420	hospital call	\$75.00
D9610	therapeutic drug injection - by report	\$20.00
D9920	behavior management	By Report
D9999	unspecified procedure - by report	By Report