

Dental office update

2015 CDT changes and processing policy updates

On Jan. 1, 2015, Delta Dental of Alaska will implement the new codes that the ADA has outlined in CDT-15. The chart below shows how the Delta Dental of Alaska standard contract will cover these new CDT-15 codes. Please refer to the group limitations of each patient's plan in Benefit Tracker for specific benefit information as some plans may handle the codes differently than the Delta Dental of Alaska standard contract.

Also, some codes are being deleted with CDT-15. Delta Dental of Alaska will no longer accept deleted codes after March 2015.

New code books can be purchased through the American Dental Association at ada.org.

New CDT codes covered under Delta Dental of Alaska Standard Commercial plans. No other new codes will be covered by Standard plans.

Code	Description	Comments
D1353	Sealant repair – per tooth	Benefits for sealants include repair or replacement within 24 months by the same dentist/dental office. Fees for repair or replacement of a sealant are DISALLOWED if performed within 24 months of initial placement by same dentist/dental office.
D6110	Implant/abutment supported removable denture for edentulous arch - maxillary	Benefit is based on the accepted fee for D5110 (upper) or D5120 (lower). Any additional fee up to the approved amount for the D6110 is DENIED and is chargeable to the patient.
D6111	Implant/abutment supported removable denture for edentulous arch - mandibular	Benefit is based on the accepted fee for D5110 (upper) or D5120 (lower). Any additional fee up to the approved amount for the D6111 is DENIED and is chargeable to the patient.
D6112	Implant/abutment supported removable denture for partially edentulous arch - maxillary	Benefit is based on the accepted fee for D5213 (upper) or D5214 (lower). Any additional fee up to the approved amount for the D6112 is DENIED and is chargeable to the patient.
D6113	Implant/abutment supported removable denture for partially edentulous arch - mandibular	Benefit is based on the accepted fee for D5213 (upper) or D5214 (lower). Any additional fee up to the approved amount for the D6113 is DENIED and is chargeable to the patient.
D6114	Implant /abutment supported fixed denture for edentulous arch – maxillary	Benefit is based on the accepted fee for D5110 (upper) or D5120 (lower). Any additional fee up to the approved amount for the D6114 is DENIED and is chargeable to the patient.
D6115	Implant /abutment supported fixed denture for edentulous arch – mandibular	Benefit is based on the accepted fee for D5110 (upper) or D5120 (lower). Any additional fee up to the approved amount for the D6115 is DENIED and is chargeable to the patient.
D6116	Implant /abutment supported fixed denture for partially edentulous arch – maxillary	Benefit is based on the accepted fee for D5213 (upper) or D5214 (lower). Any additional fee up to the approved amount for the D6116 is DENIED and is chargeable to the patient.
D6117	Implant /abutment supported fixed denture for partially edentulous arch – mandibular	Benefit is based on the accepted fee for D5213 (upper) or D5214 (lower). Any additional fee up to the approved amount for the D6117 is DENIED and is chargeable to the patient.
D6549	Resin retainer – for resin bonded fixed prosthesis	By review
D9219	Evaluation for deep sedation or general anesthesia	The fee is disallowed and considered as part of the anesthesia.
Deleted Codes		
Delta Dental of Alaska will no longer accept the following codes after March 2015.		
D6053; D6054; D6078; D6079; D6975		

To learn more, please contact the Delta Dental of Alaska Dental Customer Service department at 888-374-8906 or email us at dental@modahealth.com.

Say goodbye to paper!

Email dpr@odscompanies.com and request this newsletter electronically.

Have one by one: Early childhood dental screenings

The dental profession has a long proud history of a commitment to prevention. One of our best opportunities to put this philosophy into practice is during early childhood dental screenings. The American Dental Association, the American Pediatric Dentistry Association and the American Academy of Pediatrics all advocate for a child to have his or her first visit within 6 months of the eruption of the first tooth or by age one.

First dental visits provide a great opportunity to establish rapport and trust with both the caregiver and child. This is a perfect time to educate the caregiver on oral health, nutrition and home care as well as to provide anticipatory

guidance. It's important to perform a knee to knee exam, caries risk assessment and discuss caries prevention and fluoride interventions as appropriate. Consider this as a "well baby check" for oral health.

But performing an exam on a one year old is no small task. There are many online resources for how to accomplish this. If you're interested, the Massachusetts Dental Society has a terrific video on YouTube. Enter "age-one dental care" into the search bar on the YouTube home page and it should be easily found.

Other helpful resources include:

- › Oral Health During Pregnancy & Early Childhood: Evidence-Based Guidelines for Health Professionals. Visit http://www.cdafoundation.org/Portals/0/pdfs/poh_guidelines.pdf.
- › The website of the American Academy of Pediatric Dentistry. Visit aapd.org.

Utilizing these principles, your one year old patients will start down a path toward a lifetime of good oral health.



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Thanks for helping update our provider directory

We'd like to thank each dental office that responded to our dental provider accuracy update request. Your participation is very important to helping us meet our goal of 100 percent accuracy so patients can easily find you.

We appreciate your time and thank you for helping us provide our members access to the highest quality of dental care throughout the state.