

## Implant Billing Tips

Benefits for implants and implant-related services under the 2008 ODS Standard Contract are 100 percent reviewed for favorable prognosis of the implant site.

Clinical review requirements are:

- Periapical radiograph of site
- One of the following types of radiographs: panoramic, full-mouth or CT scan
- Findings, diagnosis and narrative — chart notes are acceptable

Numerous situations pose contraindications for the placement of implants and should be determined by the surgeon or treating dentist. These include:

- Uncontrolled diabetes
- Alcoholism
- Immunosuppressive drug treatment
- Prolonged bisphosphonate usage (example: Fosamax)
- Prolonged corticosteroid treatment
- Recent radiation to head and neck
- Heavy smoking

Contraindications that could possibly be determined by the ODS dental consultants include:

- Cosmetically motivated treatment
- Inadequate vertical bone or inadequate bone density
- Proximity to maxillary sinus
- Proximity to inferior alveolar nerve canal
- Advanced periodontal disease
- Periapical lesion adjacent to implant site
- Bony defects
- Tipping of adjacent teeth into edentulous space
- Inadequate vertical dimension
  - Super-eruption of opposing teeth
  - Worn upper/lower dentition reducing interocclusal space
- Previous implant failure in this site

Radiographic/surgical implant indexes are indicated with multiple implants. However, they are not part of the clinical requirements, and we currently do not mandate that it is done. This is an FYI only to providers that it is considered good practice with multiple implants.

Implant-supported bridges are not covered if one or more of the abutments is supported by a natural tooth.

## Implant Billing Tips

Common billing errors in implant and implant-related services include:

- Billing D5982 surgical stent instead of D6190 radiographic/surgical implant index
  - D5982 is used to apply pressure to facilitate healing of a surgical site
  - D6190 is used during surgery for implant placement
- Implant abutment codes billed with implant-supported final restorations
  - D6056 prefabricated abutment with D6065 implant supported porcelain/ceramic crown. Correct combination is D6056 with D6058 abutment supported porcelain/ceramic crown. Implant-supported crowns or other implant-supported restorations by definition do not use an abutment
- Billing fixed partial dentures (fixed bridges) with an incorrect mixture of codes because of types of materials, i.e., an all-porcelain FPD abutment cannot be combined with a porcelain-to-metal pontic. Further examples:
  - Incorrect combinations:
    - D6068 abutment supported retainer for porcelain/ceramic FPD with D6240 porcelain fused to high noble metal pontic
  - Correct combinations:
    - D6068 abutment supported retainer for porcelain/ceramic FPD with D6245 porcelain/ceramic pontic
    - D6069 abutment supported retainer for porcelain fused to metal FPD (high noble metal) with D6240 porcelain fused to high noble metal pontic
  - If a disparate mixture of materials is in fact used, please provide narrative regarding the combination
- Billing single restoration crowns or fixed partial denture abutments instead of the implant-supported equivalent, including:
  - D2790 full-cast high noble metal crown instead of D6067 implant-supported metal crown (titanium, titanium alloy, high noble metal)
  - D6790 FPD retainer full-cast high noble metal crown instead of D6072 abutment support retainer for cast metal FPD (high noble metal)