



Revised American National Standard/
American Dental Association
Specification No. 1047

Standard Content of an Electronic Periodontal Attachment

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REVISED AMERICAN NATIONAL STANDARD/AMERICAN DENTAL ASSOCIATION SPECIFICATION NO. 1047 FOR STANDARD CONTENT OF AN ELECTRONIC PERIODONTAL ATTACHMENT

The Council on Dental Practice of the American Dental Association has approved American Dental Association Specification No. 1047 for a Standard Content of an Electronic Periodontal Attachment. Working Groups of the ADA Standards Committee on Dental Informatics (SCDI) formulate this and other specifications and technical reports for the application of information technology and other electronic technologies to dentistry's clinical and administrative operations. The ADA SCDI has representation from appropriate interests in the United States in the standardization of information technology and other electronic technologies used in dental practice. The specification was forwarded to the American National Standards Institute with a recommendation that the specification be approved as an American National Standard. Approval of ADA Specification No. 1047 as an American National Standard was granted by the American National Standards Institute on January 19, 2010.

The ADA Standards Committee on Dental Informatics thanks the members of Working Group 10.10 for Electronic Dental Claim and the organizations with which they were affiliated at the time the specification was developed: S. Jerome Zackin (chairman), American Academy of Periodontology, Sarasota, FL; Robert Ahlstrom, University of the Pacific, San Francisco, CA; Maxwell Anderson, C3 Jian, Inc., Seattle, WA; Timothy Brown, National Association of Dental Plans, Dallas, TX; Richard Celko, P&R Dental Strategies, Inc., New York, NY; Mark Diehl, consultant, Rensselaer, NY; Christine Farrell, Michigan Dept. of Community Health, Lansing, MI; Brian Fitzgibbons, MetLife, Aurora, IL; Sheila Frank, Delta Dental Plans Association, Oak Brook, IL; Theresa Jansen, United Concordia Companies, Inc., Harrisburg, PA; Jean Narcisi, American Dental Association, Chicago, IL; Janis Oshensky, Delta Dental Plans Association, Oak Brook, IL; Frank Pokorny, American Dental Association, Chicago, IL; Pamela Porembski, American Dental Association, Chicago, IL; David Reneer, Essex Dental Benefits, St. Louis, MO; Kimberly Suda-Blake, American Academy of Periodontology, Chicago, IL; Scott Trapp, U.S. Public Health Service, Ogema, MN; Oren Weiss, University of Rochester, N.Y.; and Gregory Zeller, U.S. Department of Veterans Affairs, Washington, D.C.

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FOREWORD

(This foreword does not form a part of ANSI/ADA Specification No. 1047 for Standard Content of an Electronic Periodontal Attachment).

This edition is a revision of ANSI/ADA Specification No. 1047-2006. SCDI Working Group 10.10 for Electronic Dental Claim recommended a change in the text to address a question that arose as to whether the standard applies to predetermination or claims for actual services, or both. The revision of the scope states that the standard applies to both predetermination and claims for services and that data will be archived after submission for predetermination for a later claim.

Changes in the procedure codes cited in this specification necessitated further changes to the specification. For “Procedure D4245 – Apically positioned flap,” the requirement for radiographs should be changed from “Not needed” to “Required.” Additionally, two new codes, “D4230, Anatomical crown exposure - four or more contiguous teeth per quadrant”; and “D4231, Anatomical crown exposure -one to three teeth per quadrant,” have been added, with x-rays and probing depths required for each.

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1 INTRODUCTION

A number of periodontal procedures may require submission of supporting documentation before claims can be adjudicated by third-party payors. While this information (e.g., radiographs, periodontal charts) can be submitted electronically either directly or through a clearinghouse, the vast majority of periodontal claims and their attachments are submitted on paper. Due to the varying documentation requirements of third-party payors, dentists frequently send either insufficient or more supporting documentation than is required.

Submission of extraneous, irrelevant, or inadequate information due to a lack of standardization results in increased administrative costs to dentists and third-party payors. Errors and confusion regarding necessary data is to be avoided not only because of costs, but also in consideration of HIPAA Privacy regulations concerning the transmission of the minimum necessary personal health information required for claim processing.

It is also recognized that increased application of information technology standards and electronic transactions reduces the time required for claims processing and the costs associated with it by providing a seamless information exchange.

2 RATIONALE

A great deal of information is gathered during a comprehensive periodontal evaluation so the dentist can formulate a diagnosis and treatment plan for his/her patient. Third-party carriers require varying amounts of this information in order to adjudicate claims for periodontal treatment. Much of the information gathered by the dentist may not aid in claims adjudication and submission of extraneous or insufficient information may impede the adjudication process.

No standard exists to establish documentation requirements for the review of claims for specific periodontal procedures. This standard fills that void.

3 SCOPE

The purpose of this standard is to develop uniform content requirements for documentation to be included in a periodontal attachment. An attachment is separate from the original claim submission transaction. Attachment documentation specified in this standard will enable, for various periodontal procedures, claims adjudication both for predetermination of estimated benefits and for payment for actual services.

It is anticipated that documentation submitted with predeterminations for procedures will be archived for use by carriers when processing claims for actual services.

The documentation requirements for electronic attachments to periodontal claims established by this standard will be conveyed to HL7 for promulgation of the technical details necessary for transmission.

Columns in accompanying Table 1 specify the uniform information that a submitter, e.g., dentist, could be expected to transmit and a receiver, e.g., payor, could be expected to receive in a standard periodontal attachment. This data set is specified to support planning and implementation of the standard.

There remain circumstances where uniform data by procedure specified in this standard does not allow for appropriate review and adjudication of a periodontal claim. Requests for and conveyance of additional information in such unusual

circumstances is not precluded by this standard. This standard, however, requires that a request for additional information is limited to the universe of data elements specified by this Table, and must be clear and unambiguous.

4 REQUIRED DOCUMENTATION

4.1 Code on Dental Procedures and Nomenclature

This standard will utilize procedure codes and their nomenclatures from the American Dental Association's Code on Dental Procedures and Nomenclature, as published in the most recent edition of Current Dental Terminology (CDT) published by the American Dental Association.¹ The procedure codes and nomenclatures are listed in the two left hand vertical columns of Table 1.

4.2 Clinical data

Pertinent clinical information is listed in the headings for the other columns in Table 1. These column headings comprise the universe of clinical periodontal attachment information. Clinical information required for a particular procedure will be a subset of this universe. The need for specific documentation for each code is established by the presence of an "R" (Required) in a cell in Table 1. If there is no need for information an "N" (Not Needed) will be in a cell. For example, an attachment for procedure code D4260 would require the submission of radiographs, probing depths, tooth mobility and furcation classification. Tooth numbers and/or area of the mouth are listed on the original claim form, while probing depths, tooth mobility, and furcation classification will be found on the patient's periodontal chart.

4.3 Data values and cardinality

Table columns identify certain types of clinical data that may be transmitted in an attachment under this standard. For such data, the following requirements apply:

4.3.1 Probing Depths

- 0-10 mm, in increments of full mm, plus one value for > 10mm
- 0-6 positions per tooth with each probing site, identified as 1 = disto-facial (buccal) ; 2 = mid-facial (buccal), 3 = mesio-facial (buccal); 4 = mesio-lingual/palatal; 5 = mid-lingual/palatal; 6 = disto-lingual/palatal

4.3.2 Tooth Mobility (Miller Classification)

- 0.0– 3.0 in increments of 0.5
- 1 notation per tooth

4.3.3 Furcation (Glickman Classification)

- I – IV, in increments of I (roman numerals)
- 1 notation of furcation grade per tooth

4.3.4 Gingival Recession

- 0-10mm, in increments of full mm, plus one value for > 10mm
- 1 notation per tooth

4.3.5 Attached Gingiva

- 0-10mm, in increments of full mm, plus one value for > 10mm
- 1 notation per tooth