

## **Indiana Medicaid Resolutions Manual**

**NAME:**                   **6204    PULPOTOMY VS ROOT CANAL THERAPY**

**ERROR TYPE:**       Contra Audit

**HEADER/DETAIL:** Detail

**OVERRIDABLE:**    N

**ALLOW DENIAL:** Y

### **DESCRIPTION:**

This contra-indicated audit will set when a pulpotomy is billed on the same or later date as a root canal on the same tooth.

### **CRITERIA:**

When a pulpotomy (see procedure codes within audit rules) is billed on the same or later date as a root canal on the same tooth by the same provider (specialties 270-277, ) set this audit with EOB 6204.

### **DISPOSITION:**

Note: EOB 9999 with a Do Not Post status is for internal system use only. This EOB is used to avoid potential system processing abends. This EOB is not posted on the RA and the disposition may be ignored.

**Claim Type:** 0 - All Claim Types   **Member Plan:** ALL   **Status:** Do Not Post

<b>Location</b>	<b>Region</b>	<b>EOB</b>	<b>Disposition</b>
00	00	9999	PAY

**Claim Type:** D - Dental Claims   **Member Plan:** ALL   **Status:** Post

<b>Location</b>	<b>Region</b>	<b>EOB</b>	<b>Disposition</b>
21	00	6204	DENY
21	30	6204	PAY
21	32	6204	PAY
21	33	6204	PAY
21	34	6204	PAY
21	52	6204	PAY

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21	55	6204	PAY
21	64	6204	PAY
21	70	6204	PAY
21	72	6204	PAY
21	73	6204	PAY
21	74	6204	PAY

**EOB: 6204 - A PULPOTOMY IS NOT REIMBURSABLE WHEN PERFORMED ON A TOOTH WHICH PREVIOUSLY HAS HAD ROOT CANAL THERAPY.**

<b>ARC Code</b>	<b>ARC Description</b>	<b>Effective Date</b>	<b>End Date</b>
97	The benefit for this service is included in the payment/allowance for another service/procedure that has already been adjudicated. Usage: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	19950101	22991231

**EOB: 9999 - PROCESSED PER POLICY.**

<b>ARC Code</b>	<b>ARC Description</b>	<b>Effective Date</b>	<b>End Date</b>
97	The benefit for this service is included in the payment/allowance for another service/procedure that has already been adjudicated. Usage: Refer to the 835	19950101	22991231

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Healthcare Policy  
Identification  
Segment (loop 2110  
Service Payment  
Information REF), if  
present.

### **METHOD OF CORRECTION:**

Claims will systematically deny when pulpotomy is billed on the same date or a later date as a root canal.

