

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT2022111 DECEMBER 1, 2022

IHCP revises dental coding update

The Indiana Health Coverage Programs (IHCP) is requiring both fee-for-service (FFS) and managed care plans to align on dental coding for specified dental services, as published in *IHCP Bulletin* [BT202291](#).

After receiving feedback from our managed care entities (MCEs) on this new policy, the IHCP will be updating the codes in Table 1 to better align with American Dental Association (ADA) coding compliance.

This updated coding guidance is to be used across all MCEs and programs under the IHCP. These dental coding policy changes are retroactive for dates of service (DOS) on or after **Nov. 27, 2022**.

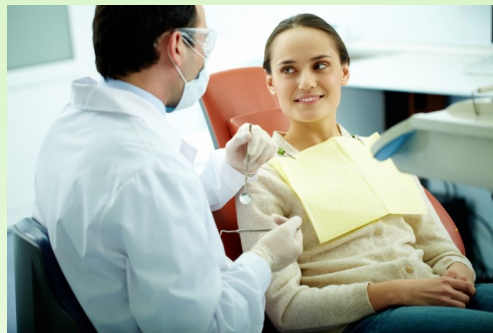


Table 1 – Revised tooth number requirements for dental procedure codes, effective for DOS on or after Nov. 27, 2022

Procedure code	Description	Previously announced tooth numbers	Revised tooth number requirements
D6081	Scaling and debridement in the presence of inflammation or mucositis of a single implant, including cleaning of the implant surfaces, without flap entry and closure	1-32, 51-82, A-T, AS-TS	1-32
D7285	Incisional biopsy of oral tissue—hard (bone, tooth)	1-32, 51-82, A-T, AS-TS	No longer applicable. The IHCP will be removing all tooth number requirements for D7285 and D7286.
D7286	Incisional biopsy of oral tissue—soft	1-32, 51-82, A-T, AS-TS	

Questions about billing and reimbursement under the FFS delivery system should be directed to Gainwell Technologies at 800-457-4584. Questions about managed care billing should be directed to the MCE with which the member is enrolled.

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

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