

## Coding Corner

# Coding Advice on Primary Tooth Extractions

Coding errors are common when reporting extractions of primary teeth. Appropriate reporting is determined by the remaining root structure. The decision about reporting the proper code hinges on whether the root is intact or if only coronal remnants of the tooth remain.

A primary tooth with no roots remaining is appropriately reported using code D7111 extraction, coronal remnants – primary tooth. This procedure is performed when the crown of the tooth is retained by soft tissue. Do not report D7111 when extracting a primary tooth with root structures remaining.

The extraction of a primary tooth with roots remaining is appropriately reported using code D7140, extraction, erupted tooth or exposed root (elevation and/or forceps removal). Code D7140 does not indicate if the extraction involves a permanent or primary tooth. Reporting D7111 instead of D7140 is a common coding error that also decreases legitimate reimbursement. Most dental plans reimburse D7140 at a higher allowance than D7111.

Always review the code nomenclature and any descriptor associated with the code. Errors may occur when the entire code language is not reviewed. Relying on abbreviations of code nomenclatures entered or displayed in drop down menus of practice management software could lead to coding errors and misunderstanding of codes. Invest in current CDT code references and team training to ensure compliance and a thorough understanding of the code, which can lead to appropriate maximum reimbursement.

For more information, contact Dental Benefits Director Mary Essling at (312) 337-2169 or [meesling@aapd.org](mailto:meesling@aapd.org).

## Dental Claim Form

All dental treatment required due to trauma should be properly disclosed on the 2012 ADA Dental Claim Form. Most dental plans require that all treatment related to trauma be considered for reimbursement by the patient's medical plan first. Failure to properly disclose that the treatment is related to trauma may be considered fraudulent.

Most dental practice management software programs default to leave Box 45, 46, and 47 of the 2012 ADA Dental Claim Form blank. When reporting treatment related to trauma, Box 45 (Treatment Resulting from) must be completed. Check the appropriate box to indicate trauma caused by an occupational illness or injury, auto accident, or other accident.

Box 46 (Date of Accident) must be completed along with Box 45. Complete Box 47 (Auto Accident State) with the state where the auto accident occurred, when applicable. Completion of Box 47 ensures that the claim is processed using the correct state laws, since they vary by state.

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