

Indian Health Service

Dental & ICD-10-CM

KRISTINA ROGERS

CODING AND TERMINOLOGY CONSULTANT
HEALTH INFORMATION MANAGEMENT, IHS

12 AUG 2024



Dental Then and Now

Dental Program

- Dental maintained their own record
- Dental did their own coding
- Dental Visits didn't pass to the Coding Queue

- Electronic Dental Record, Electronic Health Record, RPMS and patient medical home – more coordination to ensure inclusion of dental information for comprehensive health record
- Many sites changed their process while others made no change
- ICD-10 software changes to accommodate the larger code set limits ability to map codes one to one as before in ICD-9 for dental exams

Recommend sites review their dental workflow to ensure comprehensive and quality health information for patient care.



ICD-10 Codes

A diagnosis code is selected by the dentist based on the present condition(s) of the patient. Dentists should use their clinical education, experience and professional ethics while selecting the appropriate diagnostic code.

Most ICD codes that pertain to dental procedures are found in Chapter 11, Diseases of the Digestive System (K00-K95). However, other diseases relevant to dentistry may be found in other chapters.



ICD-10 Dental Codes

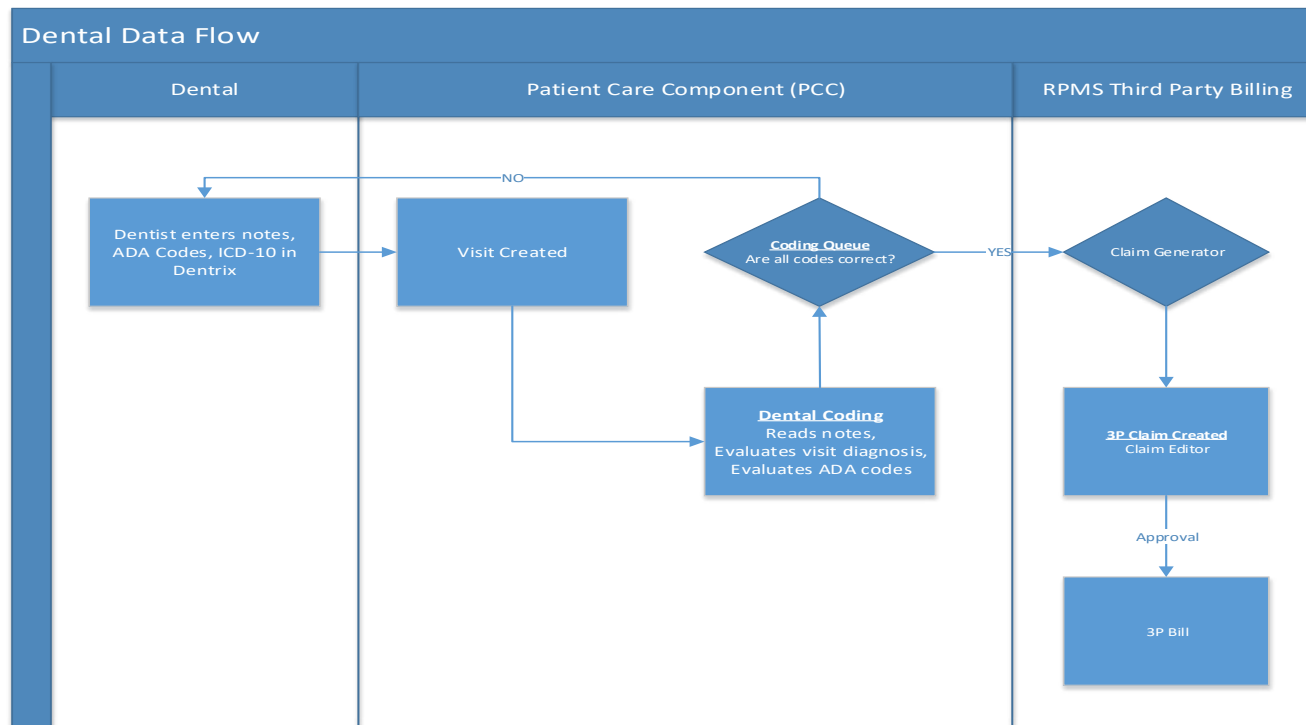
Use of ICD-10 DX codes

- Beginning to see payers require ICD diagnosis codes
 - Some State Medicaid Programs and Private Insurance companies require ICD reporting to:
 - Capture clinical data to support public health activities
 - Support development of evidence-based benefits plans
 - Support funding efforts
 - Facilitate payment for services related to the oral-systemic connection and coverage for additional dental services for certain medical conditions.
- Best practice to document (specific) reason for the visit
- Currently mapped to ZZZ.999

Coders should have access to Dentrix and review every visit for completeness and accuracy



EDR Data Flow



Dentrix and ICD-10 Codes

With current version of Dentrix and RPMS, ICD-10 codes can cross into RPMS with completed ADA codes.

Dental staff needs to attach the ICD-10 codes to treatment planned procedures before completing

ICD-10 codes attached after American Dental Association (ADA) code has been completed will NOT cross over into RPMS



Preventing Duplicate Visits

In BMW/BPRM Scheduling package, turn off “Create Visit On Check In”

Complete a code in Dentrix before writing a prescription

Insure all procedures are completed under the correct provider



ICD-10 Codes Related to Dental



Z Codes – Exams, Prevention, Etc.

- Z01.20 – Dental exam with normal findings
- Z01.21 – Dental exam with abnormal findings
- Z13.8 – Encounter for screening for dental disorders
- Z29.3 – Encounter for prophylactic fluoride administration
- Z41.8 – Encounter for other procedures for purposes other than remedying health state
(i.e. Prevention, Sealants, Prophy, Fluoride Varnish)
- Z46.3 – Encounter for fitting and adjustment of dental prosthetic device
- Z98.810 – Dental sealant status
- Z98.811 – Dental restoration, crown or filling status
- Z48.814 – Encounter for surgical aftercare following surgery on the teeth or oral cavity



“Normal” vs. “Abnormal” Findings

Z01.20 = Dental examination with normal findings = no active disease process (no caries, no perio, etc.) = 1% of those we see

Z01.21 = Dental examination with abnormal findings = active disease process (caries, perio, etc.) = 99% of those we see



ICD-10-CM Categories Utilized by Dental

- K00 Disorders of tooth development and eruption
- K01 Embedded and Impacted teeth
- K02 Dental caries
- K03 Other diseases of hard tissue of teeth
- K04 Diseases of pulp and periapical tissues

These codes can be used with Exam Code



ICD-10-CM Categories Utilized by Dental

K05 Gingivitis and periodontal diseases

For K05 codes use additional code to identify:

- Alcohol abuse and dependence (F10.-)
- Exposure to environmental tobacco smoke (Z77.22)
- Exposure to tobacco smoke in the perinatal period (P96.81)
- History of Tobacco Use (Z87.891)
- Occupational exposure to environmental tobacco smoke (Z57.31)
- Tobacco Dependence (F17.0-)
- Tobacco Use (Z72.0)

K06 Gingival recession

K08 Other disorders of teeth and supporting structures

These codes can be used with Exam Code



Other Noteworthy Codes

- A69.1 – Other Vincent’s Infections (Acute necrotizing ulcerative gingivitis, Acute necrotizing ulcerative gingivostomatitis, Trench mouth, Vincent’s gingivitis)
- K11.6 – Mucocele of salivary gland
- R68.2 – Dry mouth, unspecified
- K12.1 – Other forms of stomatitis (Stomatitis NOS, Denture stomatitis, Ulcerative stomatitis, Vesicular stomatitis)
- K12.2 – Cellulitis and abscess of mouth (Cellulitis of mouth, submandibular abscess)
- K13.1 – Cheek and lip biting
- K13.21 – Leukoplakia of oral mucosa, including tongue
- K14.0 – Glossitis (Abscess of tongue, Ulceration of tongue)

These codes can be used with Exam Code



Attaching ICD-10-CM & CDT Codes



Two Methods:

Link ICD-10-CM code to CDT code in Dentrix cross-coding file
(recommended method)

Link ICD-10-CM code to CDT code in Tx Plan module

REMEMBER:

ICD-10-CM code must be linked to CDT code before completing encounter in Dentrix otherwise the diagnoses codes come over as ZZZ.999 codes



Recommended Method

Link ICD-10-CM code to CDT code in Dentrix cross-coding file

HQs Dental program has:

- Spreadsheet created to recommend the most appropriate ICD-10 code for each CDT code
- Spreadsheet also provides 'shortlist' of alternatives
 - For Dentrix 8.0.5, 'linked' ICD-10 code must be in 'top four' of 'shortlist'



Microsoft Excel
Worksheet



Cross Coding & Medical Code Setup Steps

From the Dentrix Office Manager Clinic:

- Click on Maintenance
- Click on Practice Setup
- Click on Cross Coding and Medical Code Setup
- Click on Cross Code Setup
- Select CDT from the “Cross code for:” drop down
- Select ICD-10-CM from the “Link to:” drop down
- Select Category → CDT code → ICD-10-CM codes to assign the “shortlist” drop down for that CDT code
 - You can press and hold Ctrl button to select more than one ICD-10-CM code

To build a “shortlist” of ICD-10-CM codes:

- Click on either “Code” or “Description” to select ICD-10-CM codes
- Click “Attach Codes”

The “shortlist” is the list of ICD-10-CM codes that will appear in the Dentrix “Tx Plan” module when the CDT code is selected.

Confirm the default “linked” ICD-10-CM code:

- Click on the ICD-10-CM code in the “Code System” block
- Verify there is an “*” in the box next to the ICD-10-CM code number



Alternate Method

Link ICD-10-CM code to CDT code in treatment plan module **before** completing encounter in Dentrix

Verifying ICD-10-CM code for “Tx Planned” CDT codes:

- Once a procedure is “Treatment Planned”, click on treatment line to verify an ICD-10-CM code has been linked
- To change “linked” code, click on the Diagnoses >> button

Selecting ICD-10-CM codes for “Unlinked” CDT codes:

- To select an ICD-10-CM code for CDT codes that do not have a “linked” ICD-10-CM code, click on the Diagnoses >> button
- To “attach/link” an ICD-10-CM code to the CDT code, select a code from the list on the left, then click “Add>”, then click “OK”

Adding or Removing a Selected Code:

- To add an ICD-10-CM code, select a code from the list on the left, then click “Add>”
- To remove a selected code, select the code and click “<Remove”
- To save the edits, click “OK”

Using the “Search” function:

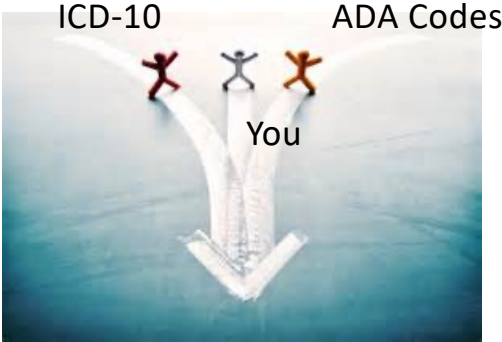
- If desired ICD-10-CM code is not present in the list on the left, click on the “List all codes” box on the bottom of the page, and use the “Search” function

Completing the Linked Codes:

- When the CDT code is “Completed” in Dentrix, the ICD-10-CM code will cross over to RPMS with the “Completed” CDT code



Aligning ICD-10 & ADA Codes (Making sense of it all?)



Sanity!

Thanks Dr. Tim Ricks for putting this together!



Diagnostic Codes

ADA Procedure Code	Possible Corresponding ICD-10 Code	Extra Documentation Needed/Notes
D0120, D0150	Z01.21 - 99% of the time, Z01.20 - 1% of the time (normal)	In clinical notes, document whether disease is present
D0160, D0180	Z01.21 (abnormal exam)	More detailed exams are likely the result of disease findings
D0140 (limited, problem-focused)	Often K02.52/K02.62 (caries), but depends on documentation	In clinical notes, document using SOAP format, with the "A" including the diagnosis (this can be used by coders)



Preventive & Periodontal Codes

ADA Procedure Code	Possible Corresponding ICD-10 Code	Extra Documentation Needed/Notes
D1110, D1120, D1206, D1208, D1351, D1352	Z41.8 (prevention, including sealants) Z98.810 (sealants only)	Nothing other than procedure performed
Periodontal codes (D4000 series, including D4341)	Most of the time category K05.32 (chronic periodontitis, generalized) codes used	If not chronic periodontitis, clinical note should detail other diagnosis (aggressive, LJP, ANUG, localized, etc.)



Restorative Codes

ADA Procedure Code	Possible Corresponding ICD-10 Code	Extra Documentation Needed/Notes
D2140, 2150, 2160, 2161, 2940	K02.52 (caries, pit & fissure)	Document in clinical notes/progress notes tooth surfaces restored
Crown codes	K02.52 (caries, pit & fissure) K02.62 (caries, smooth surface)	Usually .52 for posteriors, .52 or .62 for anteriors (document reason for crown)
D2330, 2331, 2332, 2335	K02.62 (caries, smooth surface)	Document in clinical notes/progress notes tooth surfaces restored



Endodontic Codes

ADA Procedure Code	Possible Corresponding ICD-10 Code	Extra Documentation Needed/Notes
D3221 (pulpal debridement)	K02.52 (caries, pit & fissure) K02.62 (caries, smooth surface)	Document in clinical notes/progress notes diagnosis (for posteriors, usually K02.52, for anteriors, K02.62...unless there is trauma)
D3310, 3320, 3330, 3331	K02.52 (caries, pit & fissure) K02.62 (caries, smooth surface)	Document in clinical notes/progress notes diagnosis (for posteriors, usually K02.52, for anteriors, K02.62...unless there is trauma)



Prosthetic Codes

ADA Procedure Code	Possible Corresponding ICD-10 Code	Extra Documentation Needed/Notes
D5110, 5120, 5130, 5140	K08.111, K08.121, K08.131, K08.191	In the clinical notes, document why the patient lost the majority of the teeth – caries, perio, trauma, etc.
D5211, 5212, 5213, 5214	K08.411, K08.421, K08.431	In the clinical notes, document why the patient lost the teeth being replaced – caries, perio, or trauma.



Oral Surgery Codes

ADA Procedure Code	Possible Corresponding ICD-10 Code	Extra Documentation Needed/Notes
D7111, 7140, 7210, 7220	K02.52/K02.62 (caries) K05.321, K05.322, K05.323, K05.329 (perio) K03.81 (trauma/cracked tooth) K03.89 (crowding)	The diagnosis must be in the clinical notes. Why is (are) the tooth (teeth) being extracted: caries, perio, trauma, crowding, other?



Other Common Dental Services

ADA Procedure Code	Possible Corresponding ICD-10 Code	Extra Documentation Needed/Notes
D9110 (palliative treatment)	K02.52 (caries, posteriors) K02.62 (caries, anteriors)	Usually due to caries, but if different, be sure to document in the clinical notes.
D9310 (consultation)	Usually contained within the medical electronic health record	Thoroughly document why a consultation is being done.
D9940 (mouthguard)	K03.2 (erosion)	Document in clinical notes the reason for the mouth guard, and use appropriate corresponding ICD-10 code



Bottom Line:

Understand your dental programs process

Work with your dental program to ensure codes are “linked” appropriately

- If you start to see a lot of ZZZ.999 codes coming from dental, it’s time for a conversation

You might still have to merge chart reviews and dental visits if:

- Dental staff are entering Blood Pressure values into RPMS/EHR
- Ordering prescriptions
- Completing GPRA screenings and entering them into the RPMS/EHR



