

Hi Bob--

Here's what I've been doing with the insurance.

Filing on dental

Gingivectomy:

D4211-Gingivectomy 1-3 teeth per quadrant

D4310 Givivectom 4 or more teeth per quadrant

I have been filing out the insurance forms at \$200 per tooth.

Insurance pays per quadrant. BCBS of TN today pay \$221.46 per quad for D4211

TD (medicaid in TN) pays \$316 per quad for D4210

\$99 per quad for D4211

TD requires periodontal charting, photo and x-ray.

The statement that I put in the remarks on the insurance form is:

"Pt has \_\_\_\_\_mm pockets of teeth #\_\_\_\_\_. There is severe gingival hyperplasia on these teeth.

The patient is unable to reverse this condition unless the hyperplastic tissue is first removed."

Regular Insurance usually only requires before and after photos when file insurance.

If the patient doesn't have insurance we charge patient \$100 per tooth. If that is an issue we agree on a fee per quadrant that is affordable for the patient.

Frenectomy

D7960 Frenulectomy

Insurance requires a narrative and sometime a copy of x-ray.

We charge \$580 and I have had insurance pay \$300. We then adjust patients amount to match ins. pymt.

Tooth Exposure

D7280 Exposure of Unerupted Tooth. We charge \$480

D7283 Placement of device to facilitate eruption of impacted tooth. We charge \$50

The narrative I write in the remark section of the insurance form

"Pt has an impacted\_\_\_\_\_. The patient needs #\_\_\_\_\_surgically exposed.

A stainless

steel button with a stainless steel ligature will be attached to #\_\_\_\_\_."

I have had really go luck with this paying.