

Medical Billing for Dentistry and the Lifelong Smile

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The Case

It is a Monday morning and Dr. Gottlieb has returned from our location across the state. He hands me a stack of papers and says the one on top is my first priority for medical billing. My first thought is, I have not had enough coffee. As I begin reading the **health history** completed by a 17-year-old girl I will call, “Lisa”, my heart sinks. She writes, “I can eat mac & cheese, scrambled eggs, mashed potatoes, and some soups”, “I am tired of my teeth falling out in my hand”. Since I am the mother of three girls, this was heartbreaking. Her dad is in the military and her mom does not work due to severe epilepsy. Viewing the intraoral photos and radiographs, I knew why the doctor said it was top priority. It was critical to determine if this case fit requirement of medical billing for dentistry.

This true story may bring to your mind one of your patients. Possibly, you’re remembering a child who could not have the needed treatment because of cost.

Heritable Dental Developmental Anomalies

There are many areas in which children have a non-visible upon birth congenital defect. The following is a list of major defects that manifest in the oral cavity:

Lisa Before Treatment

- Osteogenesis Imperfecta
- Amelogenesis Imperfecta
- Dentinogenesis Imperfecta
- Dentin Dysplasia
- Ectodermal Dysplasia
- Hypoplastic Tissue
- Hyperplastic Tissue



- Microgenia
- Macrogenia

This list is considered [Heritable Dental Developmental Anomalies](#) according to the Council on Clinical Affairs.

Classifying Treatments for Coding

My question to you is, “How can the treatment for these defects be considered solely dental?” They affect the growth of a child, nutrition, and overall psychological development of any child suffering from them. If you will not help patients maximize benefits through medical insurance, they may leave to find a provider that will. Then again, they may give up and simply suffer through the symptoms.



“Lisa”

Let’s get back to my patient, “Lisa”. After I found proper medical billing for [dentistry codes](#) for the procedure, Tricare gave us a six-week pre-authorization to get a dual arch all-on-four procedure completed, which we did. We accepted the patient’s fee (not much of an adjustment) and were paid 60% from Tricare.

“Lisa” is my hero. She endured being made fun of by her peers, figured out what she could eat no matter what. In the end, the expertise of Dr. Gottlieb gave her back her smile. Because I understood correct medical billing for dentistry enabled us to obtain a payment of over 60% for this critical procedure..... By the way, when she had her surgery, “Lisa” only had eight teeth left in both arches.

What an amazing time we are in to be able to provide a service that will change a life! The option to learn how to use [medical billing for dentistry](#) to change more lives in your practice, is yours.