Procedure codes requiring X-ray or documentation submission

Procedures requiring X-ray submission
Delta Dental requires X-rays to be submitted with claims/predeterminations for the following procedure codes:

- D6205–D6252 . . . . . . . . . . . . . . . . . . Fixed partial denture (bridge) pontics
- D6545–D6634 . . . . . . . . . . . . . . . . . . Fixed partial denture retainers—inlays/onlays
- D6710–D6792, D6794 . . . . . . Fixed partial denture (bridge) retainers—crowns

Note: Do not submit X-rays for other procedure codes unless, under special circumstances, Delta Dental requests them. Submitting X-rays for procedure codes other than these will delay processing.

Procedure codes requiring documentation
Delta Dental requires documentation clarifying the service or verifying the need for treatment for the following procedure codes:

- DXX99 . . . . . . . . . . . . . . . . . . . . . . . . . . . . All unspecified procedure codes (examples: D0999, D2999, D3999, D4999, D5899, etc.)
- D6980 . . . . . . . . . . . . . . . . . . . . . . . . . . . . Fixed partial denture repair
- D7286 . . . . . . . . . . . . . . . . . . . . . . . . . . . . Biopsy of oral tissue—soft
- D7910 . . . . . . . . . . . . . . . . . . . . . . . . . . . . Suture of recent small wounds up to five centimeters
- D9410 . . . . . . . . . . . . . . . . . . . . . . . . . . . . House/extended care facility call
- D9420 . . . . . . . . . . . . . . . . . . . . . . . . . . . . Hospital call
- D9430 . . . . . . . . . . . . . . . . . . . . . . . . . . . . Office visit for observation (during regularly scheduled hours)
- D9440 . . . . . . . . . . . . . . . . . . . . . . . . . . . . Office visit for observation (after regularly scheduled hours)
- D9920 . . . . . . . . . . . . . . . . . . . . . . . . . . . . Behavior management
- D9930 . . . . . . . . . . . . . . . . . . . . . . . . . . . . Treatment of complications (post-surgical)

Note: Do not submit documentation for other procedure codes unless, under special circumstances, Delta Dental requests them. Submitting documentation for procedure codes other than these will delay processing.

Limit your documentation
When submitting claims to Delta Dental, avoid writing any information in the REMARKS area of the claim form, unless it’s necessary! Only attach a report if there is not enough space in the remarks section to provide complete information. Limit documentation in the remarks section to clarification of treatments that require special review and consideration (procedure codes listed above). All claims with information in the remarks section automatically route to one of our dental analysts. Since most services don’t require review, many claims that could be processed in one day are delayed.
Some examples of unnecessary remarks are:

- Second submission
- Oral surgeon performed extractions
- Upper RPD is over seven years old
- Panoramic attached
- Delta Dental/Delta Dental COB
- Consultation
- Practice limited to perio
- Pay within 30 days
- Statements issued by the insurance commissioner

**DO use the remarks section for:**

- Additional information for procedure codes requiring documentation
- Exceptions to standard coordination of benefits
- On electronic claims with electronic attachments, the National Electronic Attachment (NEA) number

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- Delta Dental of Ohio  www.deltadentaloh.com