

TO: Dentists, Independent Clinics,
Hospitals - Chief Executive Officer

(ROUTE TO: Hospital Chief Medical Officer,
Billing and Accounting Offices)

SUBJECT: Dental Procedure Codes
Use of Quadrant Designation - Corrected List

BACKGROUND: This Newsletter, Vol. 3, No. 54, supersedes Newsletter Vol. 3,
No. 36. Please discard the previously issued Newsletter, Vol. 3, No.

As part of the implementation of Paramax/Unisys as the New Jersey Medicaid fiscal agent, the requirement that quadrant codes be used when billing for certain procedure codes was eliminated.

It has now been determined that this change may result in provider difficulties concerning the duplicate claims editing. Therefore, the New Jersey Medicaid program is reinstating the requirement that quadrant codes be used when billing for certain dental services.

ACTION: For claims submitted on or after September 1, 1993, the appropriate quadrant codes must be entered in Field 17 F. (Tooth Code) of the Dent

Acceptable quadrant values are as follows:

- UL - Upper Left
- UR - Upper Right
- LL - Lower Left
- LR - Lower Right

The codes requiring the quadrant values are:

- 04210 - Gingivectomy or Gingivoplasty
- 04220 - Gingival Curettage
- 04341 - Periodontal Scaling and Root Planning

04272 - Apically repositioning Flap Procedure
07310 - Alveoloplasty in Conjunction with Extraction
07320 - Alveoloplasty not in Conjunction with Extraction
07340 - Alveoplasty - Ridge Extension
07350 - Vestibuloplasty...
09951 22 - Occlusal Adjustment
04260 - Osseous Surgery
07470 - Removal of Exostosis

When billing any of the above procedure codes together with the appropriate quadrant code, enter 1 in the Units Requested Field (17D) on the MC-10 claim form. Failure to do so may cause your claim to be pended for Edit Code 733 - "Claim Exceeds Limit of One Unit of Service."

Please direct any questions concerning this Newsletter to the Division of Medical Assistance and Health Services, Bureau of Dental Services, at (609) 588-7136 or 1-800-782-0181.

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(BLUE TAB MARKED "5").