

## Insurance Coding for Dentakote® and DentaKote-S®

DentaKote-S™ is a biologically safe polymer coating for all prosthetic appliances.

- It is a unique concept in preventing biofilms from adhering to all dental surfaces.
- It is safe for implants and natural teeth.
- When applied, the polymer forms a strong bond to a substrate or dental appliance.
- The exposed side provides a hydrophobic surface that resists the bacteria and debris.
- This will last from six months to one year depending on each individual case, before reapplication is needed.
- It was developed by a dentist.
- It is FDA accepted & registered for all dental uses intraorally with FDA/NDC Numbers
- It could effectively reduce remakes and reduce the likelihood of implant failures.
- It could help restorations last longer.
- It can make hygiene easier for the patient.

### Submitting dental insurance with these codes: DENTAKOTE Classic

**D1330** Oral hygiene instructions. It is very important that patients understand the negative role bacteria and microbiota play in disease and dental support breakdown. With proper explanation on home care guidance and follow up therapy will this uphill battle be controlled.

**D4381** is the code for "**localized delivery of antimicrobial agents via a controlled release vehicle into diseased crevicular tissue, per tooth,**" according to the American Dental Association Code on Dental Procedures and Nomenclature (CDT) as shared by Practice Booster. DentaKote® DentaKote-S™ is used and delivered as prescribed medicament for sustained contact with the gingiva, alveolar mucosa, and into the periodontal sulcus or pocket.

**D4921** reports **periodontal pocket irrigation using medicinal agents, e.g., chlorhexidine, per quadrant.** However, payers typically consider gingival irrigation a part of the global D4910. PPO contracts may limit reimbursement for the use of gingival irrigation in periodontal maintenance. A custom fabricated, processed delivery carrier that places the polymer directly onto the teeth or prosthesis in direct contact with the alveolar mucosa. Used as a vehicle to deliver prescribed medicaments for sustained contact with the gingiva, alveolar mucosa, and into the periodontal sulcus or pocket. Can be placed onto teeth or prosthetics directly.

**D9910** application of desensitizing medicament o Includes in-office treatment for root sensitivity. Typically reported on a "per visit" basis for application of topical fluoride. This code is not to be used for bases, liners or adhesives used under restorations.

When submitting a claim for D1330 and D4381, it may be important to document the rationale for periodontal medicament delivery. This documentation could include the periodontal diagnosis, pocket probing depth charts, the extent of tissue ulceration in the form of bleeding points, patient health history of systemic diseases, and/or brief description of prior periodontal treatment history.

## **DentaKote-S® can be submitted with this code:**

**D0140** Limited examination if evaluating and diagnosis root sensitivity as a separate appointment

**D9110** palliative treatment for pain, per tooth in root sensitivity situations.

**D9630** Drugs or medicaments dispensed in the office for home use. Includes, but is not limited to oral antibiotics, oral analgesics, and topical fluoride dispensed in the office for home use; does not include writing prescriptions. D9630 is used for all medication dispensed from your office, so you may want to establish a specific identifying number or name for **Dentakote® and DentaKote-S®** in your practice management software. We have been recommending using D4921 for full mouth DentaKOTE application.

### **Talking to Patients about Dentakote® and DentaKote-S®**

With any insurance plan, there can be no guarantee of payment. Many patients, especially those with complete treatment plans will maximize their insurance benefits and still have some out-of-pocket expenses. It is important to discuss this with patients and explain the importance of their treatment. Patients must understand that dental insurance pays only a percentage of the fee charged, and only until the maximum annual benefit has been exhausted. Listed below are ideas to help you talk to patients.

Patients need to know how important dental care and management is to their general health and wellness. Chronic infections and inflammation of the gingival tissues can make it harder for type 2 diabetics to manage blood sugar, can lead to inflammation in the cells lining the arteries, appear to speed up the progression of dementia. Gum disease is also associated with other chronic systemic inflammatory conditions like ED, pulmonary diseases, cancers, rheumatoid arthritis, and pregnancy complications. Be sure to refer to the patient's health history. Tactfully explain that a disease should be treated. Gum disease is caused by a chronic infection and is the leading cause of tooth loss and can impact a person's smile, appearance, and ability to chew and enjoy food. As time goes by, untreated disease will get progressively worse. Be sure to present treatment plans showing the long-term savings with **Dentakote® and DentaKote-S®**. The goal is to avoid periodontal infections and bone loss.

Addressing the disease and improving health now can save a lot of money in the future. For the fearful patients, you can emphasize the uniquely non-invasive delivery technique offered by the **Dentakote® and DentaKote-S®**. Dental fear and phobia are the leading cause of patients staying away from the dentist. Use of this product will minimize the complications and make it easier on the patients fear factor in returning to the dentist on a regular basis. The possible lack of insurance coverage should not discourage anyone from performing a procedure that is known to provide a positive result. With or without reimbursement, **Dentakote® and DentaKote-S®** provide preventive therapy at a modest cost to the patient. Happy patients are referring patients; they will grow dental practices. You may also want to explain that new therapeutic concepts are not readily accepted by insurance carriers until the procedure becomes so pervasive it can no longer be ignored. (As an example, you may remind patients that dental implants were being performed for more than 20 years before the first insurance carriers began to provide coverage for them.) Other forms of coverage are with the Medical Flexible Spending Accounts (FSA) and Health Savings Accounts (HSA) For patients with a medical FSA or HSA, **Dentakote® and DentaKote-S®** and its use will often apply. The active ingredient in **Dentakote® and DentaKote-S®** is cleared by the FDA as a safe and effective product to use intra orally. Instructions for use may be obtained with a written request. The Internal Revenue Service specifically states in Publication 502 that

whitening treatments are not valid for FSA, but under subhead Dental Treatment, it is clear that “You can include in medical expenses the amounts you pay for the prevention and alleviation of dental diseases.” Full details are available here: [http://www.irs.gov/publications/p502/ar02.html#en\\_US\\_2012\\_publink1000178851](http://www.irs.gov/publications/p502/ar02.html#en_US_2012_publink1000178851). If there are any questions, be sure to have patients check their account plans or ask your CPA.