2013 Coding and Payment Guide for Dental Services

The Coding and Payment Guide for Dental Services is your one-stop coding, billing, and documentation guide to submitting claims with greater precision and efficiency. This guide has the latest 2013 specialty-specific ICD-9-CM, HCPCS Level II, 2013–2014 CDT and CPT® code sets along with Medicare payer information, CCI edits, helpful code descriptions, and clinical definitions.

Key Features and Benefits

- **Increase coding efficiency.** All 2013–2014 CDT and CPT® code information is included on one page for quick and easy look-up.

- **Prevent claim denials and stay up-to-date with Medicare payer information.** Review Medicare Pub. 100 references containing information linked to HCPCS Level II, 2013–2014 CDT and CPT® codes tailored to dental services, to prepare cleaner claims before submission.

- **Avoid confusion with easy-to-understand descriptions.** Includes clear explanations of procedures represented by 2013–2014 CDT and CPT® codes, along with clinical definitions and ICD-9-CM code explanations specific to dental services.

- **Improve the precision of ICD-9-CM code selection.** Prevent claim denials often caused by incorrect code selection with icons that help identify the most appropriate ICD-9-CM code.

- **Prevent claim denials due to billing confusion.** Includes instructions for completing CMS-1500 and ADA billing forms.

*CPT® is a registered trademark of the American Medical Association. Current Dental Terminology, © 2012 American Dental Association. All rights reserved.*