

## Dental Provider Bulletin From Molina Healthcare of Nebraska

July 2024

## **Guidelines for Periodontal Scaling and Root Planing**

- CDT codes: D4341- Periodontal Scaling and Root Planing 4+ teeth/quadrant and D4342- Periodontal Scaling and Root Planing 1-3 teeth/quadrant
- Benefit covers 4 quadrants once every 365 days.
- Clinical criteria:

-Periodontal charting indicates abnormal pocket depths in multiple sites. Probing depths must be 4mm or greater.

-Radiographic evidence of root surface calculus.

-Radiographic evidence of noticeable loss of bone support. Attachment loss with the appearance of reduction of the alveolar crest beyond 1-1 1/2mm proximity to the cement-enamel junction (CEJ) exclusive of gingival recession.

- Prior Authorization is required and must be submitted with the following:
  -Appropriate radiographs: bitewings or periapicals
  -Complete periodontal charting
  -Narrative
- Prior Authorization will be denied if provided within 21 days of D4355.

Should you have any questions or need further clarification, do not hesitate to contact our provider services department at (855-806-5192), Phone hours: 7 a.m. to 8 p.m. CT, Monday through Friday, excluding holidays.