



April 11, 2018

Web Announcement 1570

Attention Provider Type 22 (Dentist) Specialties 080 (Oral Surgery) and 170 (Maxillofacial Surgery):

Procedure Codes 21215, 21210 and 99238 May Be Billed

Effective with dates of service on or after January 1, 2018, provider type 22 (Dentist) specialties 080 (Oral Surgery) and 170 (Maxillofacial Surgery) may bill Current Procedural Terminology (CPT) codes 21210 (Graft, bone; nasal, maxillary or malar areas, includes obtaining graft), 21215 (mandible, includes obtaining graft) and 99238 (Hospital discharge day management). Effective April 2, 2018, claims for these codes will no longer deny in error with edit codes 0148 (Rendering provider not certified to perform procedure) or 0210 (No fees found on file) for PT 22 specialties 080 and 170.

Claims for these codes with dates of service on or after January 1, 2018, and before April 2, 2018, that denied in error with edit codes 0148 or 0210 will be automatically reprocessed. Providers do not need to resubmit or appeal the denied claims. A future web announcement will notify providers when the claims will be reprocessed.