



PROVIDER ALERT!

January 18, 2017

RE: New Orthodontia Scoring Tool Effective January 1, 2017

Dear Doctor:

Please be advised that Healthcare and Family Services (HFS) has implemented a new orthodontia scoring tool effective January 1, 2017. This new tool will be used to assess all orthodontic cases for LIBERTY Dental Plan (LIBERTY) members beginning January 1, 2017. This new scoring mechanism, referred to as HLD or Handicapping Labio-Lingual Deviation Index, will replace the former Salzmann Malocclusion Severity Assessment tool.

Beginning January 1, 2017, the new criteria are as follows:

1. Participants are required to score a minimum of 28 points on the HLD

OR

2. Participants are required to meet one of the following medically necessary orthodontia qualifiers

The automatic qualifiers include:

- Cleft palate
- Deep impinging bite with signs of tissue damage, not just touching palate
- Anterior cross bite with gingival recession
- Severe traumatic deviation (i.e., accidents, tumors, etc.)

If you have any questions regarding this notification, please contact LIBERTY's Professional Relations Department at (888) 352-7924. LIBERTY appreciates your participation, partnership and our mutual goal to provide your patients and our members the highest quality oral health care.

Sincerely,

LIBERTY Dental Plan
Professional Relations Department

HANDICAPPING LABIO-LINGUAL DEVIATION INDEX (HLD) SCORE SHEET

Name (Last, First): _____ Medicaid ID: _____ DOB: _____

All necessary dental work completed? Yes ___ No ___ Patient oral hygiene: Excellent ___ Good ___ Poor ___
(all dental work must be completed and oral hygiene must be good BEFORE orthodontic treatment is approved)

PROCEDURE (use this score sheet and a Boley Gauge or disposable ruler):

- **Indicate by checkmark next to A or B which criteria you are submitting for review**
- Position the patient's teeth in centric occlusion;
- Record all measurements in the order given and round off to the nearest millimeter (mm);
- ENTER SCORE "0" IF CONDITION IS ABSENT

A. _____ CONDITIONS 1-4 ARE AUTOMATIC QUALIFIERS (indicate with an "X" if condition is present)

1. **Cleft palate** _____
2. Deep impinging bite **with** signs of tissue damage, not just touching palate _____
3. Anterior crossbite **with** gingival recession _____
4. **Severe traumatic deviation** (i.e., accidents, tumors, etc. attach description) _____

B. _____ CONDITIONS 5-13 MUST SCORE 28 POINTS OR MORE TO QUALIFY

5. **Overjet** (one upper central incisor to labial of the most labial lower incisor) mm _____ x 1 = _____
6. **Overbite** (maxillary central incisor relative to lower anteriors) mm _____ x 1 = _____
7. Mandibular protrusion (reverse overjet, "**underbite**") mm _____ x 5 = _____
8. **Openbite** (measure from a maxillary central incisor to mandibular incisors) mm _____ x 4 = _____
9. **Ectopic teeth** (excluding third molars, see note below) # teeth _____ x 3 = _____

*Note: If anterior crowding and ectopic eruption are present in the anterior portion of the mouth, score only the most severe condition; **do not score both***

10. **Anterior crowding of maxilla** (greater than 3.5 mm) if present score _____ 1_ x 5 = _____
11. **Anterior crowding of mandible** (greater than 3.5 mm) if present score _____ 1_ x 5 = _____
12. **Labio-lingual** spread (either measure a displaced tooth from the normal arch form or labial-lingual distance between adjacent anterior teeth) mm _____ x 1 = _____
13. Posterior **crossbite** (1 must be a molar), score only 1 time – if present score _____ 1_ x 4 = _____

TOTAL SCORE (must score 28 points or more to qualify) _____

Provider Signature _____ Date _____