



Dental Customized Fee Analyzer

Fee information for your area

Sample Page

2021

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CUSTOMIZED REPORT FOR:

Sample

Oral Maxillofacial Surgery (OMS) and Dental



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Using the Analyzer

In the introduction, a number of applications were listed to illustrate ways that the *Analyzer* data might be used. In this section some of these applications are described in more depth. However, before beginning this analysis and adjusting your fees, consider the following:

1. How will the new fees compare with what payers are willing to reimburse?
2. How will your patients react to a change in charges?
3. Do the new fees accurately reflect the cost and worth of your services?
4. Realize that you may be restricted in adjusting some fees by Preferred Provider Organization (PPO) and Health Maintenance Organization (HMO) contracts, as well as Medicare and workers' compensation fee schedules.
5. Because fee ranges in the *Analyzer* are based on the first three digits or groups of the first three digits of ZIP codes, you need to assess where your locale stands in relation to others in this three-digit area.

Initial Comparison of Current Fees to Area Fees

Initially, you may want to compare a few of your most frequently reported services to get an idea of where your current fees fall when compared to others in your area. You can compare the data to all seven percentiles or, initially, you may want to select only two or three percentiles.

Step One

Select procedure codes for all types of services performed, including dental, evaluation and management, surgery, radiology, laboratory, and medicine.

Step Two

Using a spreadsheet, list the following items in separate columns:

Column 1	Code
Column 2	Current fee
Column 3	Medicare allowable if appropriate
Columns 4–10	<i>Analyzer</i> fees at the 50th, 60th, 75th, 80th, 85th, 90th and 95th percentiles

CPT Code	MOD Sub Description	Medicare BR	Area Allowable	Area 50th	Area 60th	Area 75th	Area 80th	Area 85th	Area 90th	Area 95th
42000	DRAINAGE ABSCESS PALATE UVULA		151.83	259	262	286	296	309	322	457
42100	BIOPSY PALATE UVULA		145.33	253	256	279	289	301	315	446
42104	EXC LESION PALATE UVULA W/O CLOSURE		207.39	367	371	404	419	437	456	647
42106	EXC LESION PALATE UVULA W/SMPL PRIM CLOSURE		259.90	468	473	516	534	558	582	825
42107	EXC LESION PALATE UVULA W/LOCAL FLAP CLOSURE		446.10	835	843	920	953	995	1,038	1,472
42120	RESCJ PALATE/EXTENSIVE RESCJ LESION		978.89	1,341	1,354	1,477	1,531	1,597	1,667	2,364
42140	UVULECTOMY EXCISION UVULA		247.64	531	537	585	606	633	661	937
42145	PALATOPHARYNGOPLASTY		699.04	2,289	2,313	2,522	2,613	2,728	2,847	4,036
42160	DSTRJ LES PALATE/UVULA THERMAL CRYO/CHEM		227.55	152	153	167	173	181	189	268
42180	REPAIR LACERATION PALATE <2 CM		239.79	278	281	307	318	332	346	491
42182	REPAIR LACERATION PALATE >2 CM/COMPLEX		317.22	683	690	752	780	814	849	1,204
42200	PALATOP CL PALATE SOFT&/HARD PALATE ONLY		851.67	2,959	2,990	3,261	3,379	3,526	3,680	5,218
42205	PALATOPLASTY W/CLSR ALVEOLAR RIDGE SOFT TISSUE		864.95	3,111	3,143	3,428	3,552	3,707	3,869	5,485
42210	PALATOP CLSR ALVEOLAR RIDGE GRF ALVEOLAR RIDGE		1,098.15	3,921	3,961	4,320	4,476	4,672	4,876	6,912
42215	PALATOPLASTY CLEFT PALATE MAJOR REVJ		673.01	3,794	3,833	4,180	4,332	4,521	4,718	6,689
42220	PALATOPLASTY CLEFT PALATE SEC LNGTH PX		513.76	2,909	2,939	3,205	3,321	3,466	3,617	5,129
42225	PALATOP CL PALATE ATTACHMENT PHARYNGEAL FLAP		882.03	2,529	2,555	2,787	2,888	3,014	3,146	4,460
42226	LENGTHENING PALATE & PHARYNGEAL FLAP		891.61	3,162	3,194	3,484	3,610	3,768	3,932	5,575
42227	LENGTHENING PALATE W/ISLAND FLAP		843.87	3,162	3,194	3,484	3,610	3,768	3,932	5,575
42235	REPAIR ANTERIOR PALATE W/VOMER FLAP		727.20	2,302	2,325	2,536	2,628	2,743	2,862	4,058
42260	REPAIR NASOLABIAL FISTULA		803.88	1,265	1,278	1,393	1,444	1,507	1,573	2,230

CPT Code MOD Sub Description	Medicare BR	Area Allowable	Area 50th	Area 60th	Area 75th	Area 80th	Area 85th	Area 90th	Area 95th
D6548 RETAINER - PORCELN/CERAMIC RSN BONDED FIX PROSTH			398	407	413	418	421	427	466
D6600 INLAY-PORCELAIN/CERAMIC TWO SURFACES			719	735	745	755	760	770	841
D6601 INLAY - PORCELAIN/CERAMIC THREE OR MORE SURFACES			754	771	781	791	798	807	882
D6602 INLAY - CAST HIGH NOBLE METAL TWO SURFACES			768	785	796	806	813	823	899
D6603 INLAY - CAST HIGH NOBLE METAL 3/MORE SURFACES			845	864	876	887	894	905	988
D6604 INLAY - CAST PREDOMINANTLY BASE METAL 2 SURFACES			753	769	780	790	796	806	881
D6605 INLAY - CAST PREDOM BASE METAL 3/MORE SURFACES			798	815	827	837	844	854	933
D6606 INLAY - CAST NOBLE METAL TWO SURFACES			741	757	768	778	784	793	866
D6607 INLAY - CAST NOBLE METAL THREE OR MORE SURFACES			822	840	852	863	870	880	961
D6608 ONLAY - PORCELAIN/CERAMIC 2 SURFACES			781	799	810	820	827	837	914
D6609 ONLAY - PORCELAIN/CERAMIC THREE OR MORE SURFACES			815	833	845	856	863	873	954
D6610 ONLAY - CAST HIGH NOBLE METAL TWO SURFACES			828	847	859	870	877	887	969
D6611 ONLAY - CAST HIGH NOBLE METAL 3/MORE SURFACES			906	926	939	952	959	971	1,060
D6612 ONLAY - CAST PREDOMINANTLY BASE METAL 2 SURFACES			824	842	854	865	872	883	964
D6613 ONLAY - CAST PREDOM BASE METAL 3/MORE SURFACES			861	880	893	904	911	923	1,008
D6614 ONLAY - CAST NOBLE METAL TWO SURFACES			807	824	836	847	853	864	943
D6615 ONLAY - CAST NOBLE METAL THREE OR MORE SURFACES			838	857	869	880	887	898	981
D6624 INLAY TITANIUM			768	785	796	806	813	823	899
D6634 ONLAY TITANIUM			807	824	836	847	853	864	943
D6710 CROWN INDIRECT RESIN BASED COMPOSITE			823	841	853	864	871	881	963
D6720 CROWN - RESIN WITH HIGH NOBLE METAL			960	981	995	1,008	1,016	1,028	1,123