



COMPLICATED SUTURING

Policy # D018

Implementation Date: 01/01/2022

Review Dates:

Revision Dates:

Disclaimer:

1. Policies are subject to change without notice.
2. Policies outline coverage determinations for Select Health Commercial, Select Health Advantage (Medicare/CMS), and Select Health Community Care (Medicaid/CHIP) plans. Refer to the "Policy" section for more information.

Description

Complicated suturing (Reconstruction Requiring Delicate Handling of Tissues and Wide Undermining for Meticulous Closure) Excludes closure of surgical incisions.

Commercial Plan Policy

Select Health **will reimburse codes D7911 and D7912 when criteria are met:**

Chart notes are submitted and indicate that the suturing is required due to a laceration.

These codes will deny as inclusive to any surgical procedure that is reported on the same date of service.

Select Health Advantage (Medicare/CMS)

Select Health Advantage will follow the commercial plan.

Billing/Coding Information

CDT CODES

D7911 complicated suture – up to 5 cm

D7912 complicated suture – greater than 5 cm

Key References

1. Coding Companion for Dental Services – Ingenix (2022)
2. *Current Dental Terminology* (2022) – American Dental Association

Disclaimer

This document is for informational purposes only and should not be relied on in the diagnosis and care of individual patients. Dental Coding/Reimbursement policies do not constitute dental advice, plan preauthorization, certification, an explanation of benefits, or a contract. Members should consult with appropriate dental care providers to obtain needed dental advice, care, and treatment. Benefits and eligibility are determined before dental guidelines and payment guidelines are applied. Benefits are determined by the member’s individual benefit plan that is in effect at the time services are rendered.

The codes for treatments and procedures applicable to this policy are included for informational purposes. Inclusion or exclusion of a procedure, diagnosis or device code(s) does not constitute or imply member coverage or provider reimbursement policy. Please refer to the member's contract benefits in effect at the time of service to determine coverage or non-coverage of these services as it applies to an individual member.

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Members may contact Customer Service at the phone number listed on their member identification card to discuss their benefits more specifically. Providers with questions about this Coverage Policy may call Select Health Dental Provider Relations at **800-538-5054**.

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