D1354 – ADA Guide to Reporting Interim Caries Arresting Medicament Application

Developed by the ADA, this guide is published to educate dentists and others in the dental community on this procedure and its code, first published in CDT 2016 and revised in CDT 2018.

Introduction

CDT code D1354 became effective on January 1, 2016, and has had one revision effective January 1, 2018. This revision was addition of “… – per tooth” to the nomenclature. The current full CDT Code entry as seen in CDT 2018 follows. Please note that the revision is highlighted for emphasis.

D1354 interim caries arresting medicament application – per tooth

Conservative treatment of an active, non-symptomatic carious lesion by topical application of a caries arresting or inhibiting medicament and without mechanical removal of sound tooth structure.

The Code Maintenance Committee (CMC) agreed with the action request submitter that a new code was needed to fill a procedure reporting gap. At that time, and today, the medicament commonly used in this procedure is Silver Diamine Fluoride (SDF). Please note that SDF is not cited in either the nomenclature or descriptor. The CMC determined that the more general term “caries arresting medicament” is more appropriate. This allows reporting D1354 when SDF or another appropriate medicament – as determined by the dentist – is used to treat an active, non-symptomatic carious lesion.

After D1354 was published in CDT 2016 a need for clarification became apparent as some in the dental community asked how this procedure is to be reported (e.g., by lesion; by tooth). The original intent was reporting by tooth and, as noted above, a clarifying nomenclature revision was approved for CDT 2018.

The following pages contain a number of Questions and Answers intended to provide readers with insight and understanding of the procedure, medicaments used, and appropriate documentation in patient records and on claims.

Questions and Answers

1. Is this code principally for reporting the application of Silver Diamine Fluoride?

   No – D1354’s CDT Code entry describes a discrete procedure for delivery "of a caries arresting or inhibiting medicament." The dentist providing this service would determine the appropriate medicament to be applied, and the choice is not limited to Silver Diamine Fluoride.

2. What other caries arresting medicament applications could be documented with D1354?

   This CDT Code entry would also be appropriate to document topical application of a 25% solution of silver nitrate followed by 5% sodium fluoride varnish. This technique is described in a Journal of the California Dental Association article that is available online at https://www.cda.org/Portals/0/journal/journal_112012.pdf.

3. Is the procedure reported with this code limited to primary teeth?

   No – There are no words in either the nomenclature or descriptor that limits the procedure to primary dentition.
4. Is the procedure reported by number of lesions treated, or by tooth treated?

D1354 is a per-tooth procedure. This point has been clarified in the code’s CDT 2018 nomenclature revision. The specific teeth treated on the date of service must be documented. Charting and recording of treated teeth are part of the patient’s dental record, which should also include information on the number and location of lesions that had the medicament applied.

5. What is the detailed rationale for reporting this procedure by tooth treated?

The D1354 nomenclature revision mirrors the nomenclature of other procedures in the CDT Codes “Other Preventive Services” category: D1351 sealant – per tooth; and D1353 sealant repair – per tooth. As D1354’s original nomenclature lacked such specificity it could be reasonably interpreted, for example, as application of the caries arresting or inhibiting agent to a specified tooth surface, a single tooth or a number of teeth, or all teeth in an area or the oral cavity such as a quadrant.

This created ambiguity and confusion for appropriate documentation of D1354.

It is important to report D1354 as a per tooth procedure to track individual tooth outcomes and follow-up procedures in the patient record. Some treated teeth will require reapplication at determined intervals, some will be followed to exfoliation, and others will eventually receive definitive restorative care as individual patient circumstances dictate.

While no single, exclusive treatment protocol exists for the application of a caries-arresting agent, the clinical protocol adopted at UCSF for the application of Silver Diamine Fluoride (J Calif Dent Assoc. 2016 Jan; 44(1):16–28) has been generally accepted by the dental community of providers and educators. While that protocol does not limit itself exclusively to single tooth application, it is consistent with and lends itself best to such practice.

6. How often may the D1354 procedure be delivered to the same tooth?

Reapplication may be required when the dentist determines that there is a clinical need. The CDT Code entry does not address application protocols. Literature that discusses SDF delivery protocols and related topics is available online from the National Library of Medicine at –

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4778976/

7. Does the D1354 procedure preclude a subsequent restorative procedure at a later time?

A subsequent restorative procedure may be needed at some time after application of a caries arresting medicament.

Caries is a disease that is treated with the medicament. The lesion in the tooth resulting from the disease (i.e. the cavity) may need a subsequent restoration to restore function.

8. Must there be a specific interval between the D1354 procedure and a restorative procedure on the same tooth?

No – As noted in the answers to questions 4 and 5, the clinical condition of a patient’s tooth is affected by a variety of factors and can change over time. The patient’s dentist is in the best position to evaluate the need for restorative services.
9. Does “without mechanical removal of sound tooth structure” in the D1354 descriptor mean that this procedure is for reporting Atraumatic Restorative Treatment (ART) therapy?

No – ART therapy was not cited in the action request for this CDT Code addition, nor was it brought up during the Code Maintenance Committee’s discussion before its vote to accept the action request. The D1354 descriptor does not cite ART when defining the procedure.

10. May other preventive procedures be delivered to the tooth on the same day it receives the D1354 treatment?

Yes – Other preventive procedures may be delivered as there is no such exclusionary language in D1354’s nomenclature or descriptor. Individual circumstances would affect the order in which preventive services are delivered (e.g., prophylaxis before medicament application).

11. May a hygienist or other allied dental personnel deliver the D1354 procedure?

That depends on individual state dental practice law. State scope of practice acts determine the training, permitting and licensing requirements of persons who may deliver the D1354 procedure, and the level of supervision that may be required.

12. Are there any other medicament delivery procedures that this code would be used to report?

No – D1354’s CDT Code entry describes a discrete procedure for delivery “of a caries arresting or inhibiting medicament...” Any other medicament delivery procedure would be reported by its own CDT Code (e.g., D9910 application of desensitizing medicament); or with an “unspecified, by report” (aka “999”) code.

13. How would D1354 be reported on a claim?

D1354 is reported on the claim detail line. Each claim detail line identifies the particular procedure, the date it was delivered to the patient, and tooth number or numbers involved. If more than one tooth is treated on the same date of service, the procedure may be reported:

- On one service line that also lists the tooth numbers (or letters) involved in the appropriate field, and the total number of teeth (i.e., Quantity) in the appropriate field
- On multiple service lines, one per tooth treated, listing the tooth number or letter and a Quantity of 1 in the appropriate fields on the service line

14. What dental benefit plan coverage – commercial or governmental – is anticipated?

Coverage and reimbursement for D1354 is likely to vary between commercial benefit plan offerings and by state for government programs (e.g. Medicaid). This information can be acquired when verifying a patient’s benefit plan enrollment and eligibility for services.
Questions or Assistance?

Call 800-621-8099 or send an email to dentalcode@ada.org

Notes:

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- Version History

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<th>Date</th>
<th>Version</th>
<th>Remarks – Change Summary</th>
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<tbody>
<tr>
<td>07/17/2017</td>
<td>1</td>
<td>Initial publication</td>
</tr>
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