

X-ray/Perio Charting Requirements Delta Dental of Oklahoma

Onlays and Veneers

(preoperative x-ray)

D2642 – D2644

D2662 – D2664

D2960 – D2962

Crowns

(preoperative x-ray)

D2740

D2750 – D2752

D2931 *(age 12 or older)*

D2950

D2954

Oral Surgery

(preoperative x-ray)

D7210

D7220

D7230

D7240

D7241

D7250

D7251

Periodontal*

(perio charting)

D2642 – D2644

Fixed Bridgework

(preoperative x-ray)

D6205 – D6214

D6240 – D6243

D6245

D6250 – D6252

D6545

D6549

D6608 – D6615

D6634

D6710 – D6722

D6740

D6750 – D6753

D6780 – D6784

D6790 – D6792

D6794

**All covered periodontal procedures (D4000 – D4999) for persons age 13 or younger require periodontal charting and/or preoperative x-rays*

Note: DDOK does not return x-rays unless a self-addressed, stamped/postage paid envelope is provided. Please clearly mark the request on your claim form and x-ray. We recommend original documents remain in the patient’s chart. For information on how to send x-rays and perio charting electronically, please contact our Provider Relations team.

SUBMITTING PREDETERMINATIONS FOR PAYMENT

Via PEARL: open the approved predetermination, add the date(s) of service and select ‘Submit.’

Manually: sign and return the Predetermination Notice with the date(s) of service completed.

BENEFIT AND ELIGIBILITY INFORMATION

PEARL

DeltaDentalOK.org/PEARL

Customer Service

Monday – Thursday 7:00 a.m. – 6:00 p.m.

Friday 7:00 a.m. – 5:00 p.m.

405-607-2189 (OKC Metro)

800-990-7337 (Toll Free)

CLAIMS SUBMISSION

PEARL

DeltaDentalOK.org/PEARL

US Mail

Delta Dental of Oklahoma

PO Box 548809

Oklahoma City, OK 73154-8809

DDOK Payer ID: 22229 or CDOK1

PROVIDER RELATIONS

405-607-2317 (OKC Metro)

PR@DeltaDentalOK.org

800-522-0188, Ext. 137 (Toll Free)

405-607-2198 (Fax)

