



AmeriHealth Caritas[™]
District of Columbia

To: AmeriHealth Caritas DC Dental Providers
Date: July 11, 2024
Subject: D7473 Mandibular Torus Removal Updated Claims Requirement

Dear Dental Providers,

This is an update regarding the claim submission for CDT Code D7473 for the removal of Mandibular Tori. This is a covered procedure in the DC Medicaid Fee Schedule.

It has been brought to our attention by the Department of Health Care Finance (DHCF) that they require that the quadrant must be reported in the claim. From the date of this notice please be sure to include the quadrant when submitting your claim. Failure to include the quadrant will result in a claim denial and you will need to resubmit with that information.

Please do not hesitate to contact the Dental Director if you have any questions at nfletlcher@amerihealthcaritasdc.com.

Sincerely,



Nathan Fletcher, DDS
Dental Director