# Zuub Data

Zuub is able to get EVERY ADA code that is entered in the SETTINGS so that there is no need to go to the web portal.

Here are the codes you have entered in Zuub settings to get for each payer (**Zuub gets 46/46 codes**):

D0210	D0220	D0272	D0274	D0330	D0367	D0431
D1120	D1206	D1208	D1351	D1510	D2390	D2393
D2643	D2740	D2750	D2790	D2929	D2930	D2932
D2934	D2950	D3120	D3220	D3230	D4341	D4355
D4910	D5110	D5670	D5751	D6010	D6240	D7140
D7953	D8010	D9230	D9248	D9310		
	D1120 D2643 D2934 D4910	D1120D1206D2643D2740D2934D2950D4910D5110	D1120         D1206         D1208           D2643         D2740         D2750           D2934         D2950         D3120           D4910         D5110         D5670	D1120         D1206         D1208         D1351           D2643         D2740         D2750         D2790           D2934         D2950         D3120         D3220           D4910         D5110         D5670         D5751	D1120         D1206         D1208         D1351         D1510           D2643         D2740         D2750         D2790         D2929           D2934         D2950         D3120         D3220         D3230           D4910         D5110         D5670         D5751         D6010	D1120         D1206         D1208         D1351         D1510         D2390           D2643         D2740         D2750         D2790         D2929         D2930           D2934         D2950         D3120         D3220         D3230         D4341           D4910         D5110         D5670         D5751         D6010         D6240

# Sample Differences (Delta Dental/Metlife/Cigna):

#### 1. D1110 (Prophylaxis)

- a. Full history
- b. Accurate Limitation
  - "Benefit is limited to 2 of any prophylaxis procedure within a calendar year period. If periodontal treatment has been performed, benefit is extended to 3 of any prophylaxis procedure within a calendar year period."
- c. Related Limitation codes

D1110	Prophylaxis - adult	In ne	work	
Disclaimers		Service Dates		Limitation Applies To
	ed to 2 of any prophylaxis	Procedure	Service Date	D1120 - Prophylaxis - child
procedure within a calendar year period.		D1110	05/23/2023	<ul> <li>D4910 - Periodontal maintenance</li> </ul>
	atment has been performed,	D1110	01/18/2023	
benefit is extended to 3 of any prop procedure within a calendar year pe		D1110	09/14/2022	
	,	D1110	04/20/2022	
		D1110	07/13/2021	
		D1110	01/12/2021	
		D1110	08/13/2020	
		D1110	02/19/2020	
		D1110	09/12/2019	
		D1110	04/24/2019	
		D1110	07/18/2018	
		D1110	02/28/2018	
		D1110	09/19/2017	
		D1110	05/16/2017	
		Ditto	00/00/0010	

# 2. D2950 (Core buildup)

- a. Full History
- b. Accurate Limitation
  - i. "Benefit is limited to once per tooth within a 5 year period. An allowance may be made for core buildup when extensive loss of tooth structure is supported by radiographic images or narrative report, or when following root canal treatment."

# Weave Data

Weave CAN ONLY get the ADA codes provided by the payer, and the data for those codes is limited / inaccurate.

Here are the codes that Weave provides compared to the ones you have in Zuub (Weave ONLY gets 11/46):

D2930	D2932	D2933	D2934	D2950	D3220	D3230	D4341
D4355	D4910	D5751					

# Sample Differences (Delta Dental/Metlife/Cigna):

#### 1. D1110

- a. NO HISTORY (last visit only)
- b. Inaccurate Limitation
  - i. "2 visits in 1 years"

# c. NO Related Limitation codes

Prophylaxis		2 visits in 1 years
Service Dates		
Туре	Service Date	
Latest visit or consultation	05/23/2023	

# 2. D2950

- a. NO HISTORY (last visit only)
- b. Inaccurate Limitation
  - i. "1 visit in 60 months"

# 3. D4341 (Periodontal scaling and root planning)

- a. Full History including Quadrant
- b. Accurate Limitation
  - i. "Benefit is limited to once per quadrant within a 24 month period. Requires radiographs and periodontal charting."

	D4341	Periodontal scaling and root planing	g - four or m	Premier		Ages 15 and over
	Disclaimers		Service Date	s		
· Benefit is limited to once per quadrant within a 24 month		Procedure	Tooth/Quad	Service Date		
	period. Requires radiographs a Frequency may be affected by [Limitations Apply]		D4341	LL	06/21/2023	

# 4. D4355 (Full mouth debridement)

- a. Full History
- b. Accurate Limitation
  - i. "Benefit is limited to once per lifetime. Following active periodontal therapy, allow completion of a 30 day postoperative period before performing this procedure. D4355 is not billable to the patient when performed on the same date of service, by the same provider as D0180."

# 5. Additional Plan and Payer Data:

a. Claims address:	PROVIDED
b. COB:	PROVIDED
c. History (including tooth/quad):	PROVIDED
d. Ortho Payment:	PROVIDED
e. Assignment of Benefits:	PROVIDED
f. Missing Tooth Clause:	PROVIDED
<ul> <li>g. Ability to find patients with</li> </ul>	

incorrect name/dob/ID: YES

# 3. D4341

- a. NO HISTORY (last visit only)
- b. Inaccurate Limitation
  - i. "1 visit in 24 months"

×	D4341	Periodontal scaling and root planing - four or m	1 visits in 24 month	Ages 15 and ove
	Service Dates			
	Туре	Service Date		
	Latest visit or consultation	06/21/2023		

#### 4. D4355

- a. NO HISTORY (last visit only)
- b. Inaccurate Limitation
  - i. "1 visit in lifetime"

# 5. Additional Plan and Payer Data:

<ul> <li>a. Claims address:</li> </ul>	MISSING
b. COB:	MISSING
c. History (including tooth/quad):	MISSING
d. Ortho Payment:	MISSING
e. Assignment of Benefits:	MISSING
f. Missing Tooth Clause:	MISSING
<ul> <li>g. Ability to find patients with</li> </ul>	
incorrect name/dob/ID:	NO