

Handicapping Labiolingual Deviation (HLD) Index Report

Provider Name: _____

NPI: _____

Recipient Name: _____

Recipient ID: _____

Instructions:

1. Position the recipient's teeth in centric occlusion.
2. Record all measurements in the order given and round off to the nearest millimeter (mm).
3. Enter a score of "0" if condition is absent.
4. Enter the requested provider and recipient information above. Provider must sign and date at the bottom.

CONDITION	HLD SCORE
Cleft palate deformities (automatic qualifying condition - if present, indicate "X" and score no further).	
Deep impinging overbite when lower incisors are destroying the soft tissue of the palate. Tissue laceration and/or clinical attachment loss must be present (automatic qualifying condition - if present, indicate "X" and score no further).	
Crossbite of individual anterior teeth when destruction of soft tissue is present (automatic qualifying condition - if present, indicate "X" and score no further).	
Severe traumatic deviation. Attach description of condition. For example: loss of a premaxilla segment by burns or by accident, the result of osteomyelitis, or other gross pathology (automatic qualifying condition - if present, indicate "X" and score no further).	
Overjet greater than 9mm with incompetent lips or reverse overjet greater than 3.5 mm with reported masticatory/speech difficulties (automatic qualifying condition - if present, indicate "X" and score no further).	
Overjet equal to or less than 9 mm (in mm).	_____ x 1 = _____
Overbite in mm.	_____ x 1 = _____
Mandibular protrusion in mm.	_____ x 5 = _____
Open bite in mm.	_____ x 4 = _____
If both anterior crowding and ectopic eruption are present in the anterior portion of the mouth, score only the most severe condition. Do not score both conditions.	
Ectopic eruption: Count each tooth, excluding 3rd molar.	_____ x 3 = _____
Anterior crowding: Score only one point for maxilla and/or one point for mandible; two points maximum for anterior crowding.	_____ x 5 = _____
Labiolingual spread in mm.	_____ x 1 = _____
If the recipient has a posterior unilateral crossbite, involving two or more adjacent teeth, one of which is a molar, enter/score a "4" for this item.	
TOTAL SCORE:	_____

Provider Signature: _____ **Date:** _____

The following documentation must be submitted with the request for prior authorization and HLD Index:

- ADA 2006 or newer claim form with service code requested;
- Diagnostic study models (trimmed) with waxbites or OrthoCad equivalent;
- Cephalometric head film with measurements;
- Panoramic or full series periapical radiographs;
- Treatment plan.

Handicapping Labiolingual Deviation Index Scoring Instructions

The intent of the Handicapping Labiolingual Deviation (HLD) Index is to measure the presence or absence and the degree of the handicap caused by the components of the Index and not to diagnose malocclusion. All measurements are made with a Boley Gauge (or a disposable ruler) scaled in millimeters. Absence of any conditions must be recorded by entering "0" (refer to attached score sheet). The following information is provided to clarify the categories on the HLD Index Report:

Cleft Palate Deformities: Indicate an "X" on the score sheet and do not score any further if present. This condition is considered to be a handicapping malocclusion.

Deep Impinging Overbite: Indicate an "X" on the score sheet when lower incisors are destroying the soft tissue of the palate and do not score any further. This condition is considered to be a handicapping malocclusion.

Individual Anterior Teeth Crossbite: Indicate an "X" on the score sheet when destruction of soft tissue is present and do not score any further. This condition is considered to be a handicapping malocclusion.

Severe Traumatic Deviations: Traumatic deviations include loss of a premaxilla segment by burns or by accident, the result of osteomyelitis or other gross pathology. Indicate with an "X" on the score sheet, attach documentation of condition, and do not score any further. This condition is considered to be a handicapping malocclusion.

Overjet greater than 9mm: If the overjet is greater than 9 mm with incompetent lips or the reverse overjet (mandibular protrusion) is greater than 3.5 mm with reported masticatory and speech difficulties, indicate an "X" and score no further. If the reverse overjet is not greater than 3.5 mm, score under the "Mandibular Protrusion in Millimeters" item.

Overjet in Millimeters: This is recorded with the recipient's teeth in centric occlusion and measured from the labial portion of the lower incisors to the labial of the upper incisors. The measurement may apply to a protruding single tooth as well as to the whole arch. Round this measurement to the nearest millimeter and enter on the score sheet.

Overbite in Millimeters: A pencil mark on the tooth indicating the extent of overlap facilitates this measurement. Round off to the nearest millimeter and enter on the score sheet. "Reverse" overbite may exist in certain conditions and should be measured and recorded.

Mandibular Protrusion in Millimeters: Score exactly as measured from the labial of the lower incisor to the labial of the upper incisor. The measurement in millimeters is entered on the score sheet and multiplied by five (5). A reverse overbite, if present, should be shown under "overbite."

Open Bite in Millimeters: This condition is defined as the absence of occlusal contact in the anterior region. It is measured from edge to edge in millimeters. Enter the measurement on the score sheet and multiply by four (4). In cases of pronounced protrusion associated with open bite, measurement of the open bite is not always possible. In those cases, a close approximation can usually be estimated.

Ectopic Eruption: Count each tooth, excluding third molars. Enter the number of teeth on the score sheet and multiply by three (3). If anterior crowding is present with an ectopic eruption in the anterior portion of the mouth, score only the most severe condition. DO NOT SCORE BOTH CONDITIONS.

Anterior Crowding: Arch length insufficiency must exceed 3.5 mm. Mild rotations that may react favorably to stripping or mild expansion procedures are not to be scored as crowded. Enter five (5) points each for maxillary and mandibular anterior crowding. If ectopic eruption is also present in the anterior portion of the mouth, score the most severe condition. DO NOT SCORE BOTH CONDITIONS.

Labiolingual Spread: Use a Boley Gauge or a disposable ruler to determine the extent of deviation from a normal arch. Where there is only a protruded or lingually displaced anterior tooth, the measurement should be made from the incisal edge of that tooth to the normal arch line. Otherwise, the total distance between the most protruded tooth and the lingually displaced anterior tooth is measured. The labiolingual spread probably comes close to a measurement of overall deviation from what would have been a normal arch. In the event that multiple anterior crowding of teeth is observed, all deviations from the normal arch should be measured for labiolingual spread, but only the most severe individual measurement should be entered on the index.

Posterior Unilateral Crossbite: This condition involves two or more adjacent teeth, one of which must be a molar. The crossbite must be one in which the maxillary posterior teeth involved may either be both palatal or both completely buccal in relation to the mandibular posterior teeth. The presence of posterior unilateral crossbite is indicated by a score of four (4) on the score sheet on the index.