Affordable Care Act (ACA) Salzmann Evaluation Form Orthodontic Services

CareFirst
Family of health care plans

INSTRUCTIONS

Submit completed form to Mail Administrator, P.O. Box 14115, Lexington, KY 40512-4115 or electronically using payer ID 00580.

INFORMATION

Patient's Name (Last, First, Middle Initial)	Date of Birth	Member ID
Referring Dentist		
Orthodontist's Name	Tax ID #	Date of Assessment

HANDICAPPING MALOCCLUSION ASSESSMENT RECORD

A. INTRA-ARCH DEVIATION

Score Teeth Affected Only		Missing	Crowded	Rotated	Spacing		No. of Teeth Affected	Point Value	Score
					Open	Closed			
Maxilla	Anterior							X2	
	Posterior							X1	
Mandible	Anterior							X1	
	Posterior							X1	
								Total Score	

B. INTER-ARCH DEVIATION

1. ANTERIOR SEGMENT

Score Maxillary Teeth Affected Only Except Overbite*	Overjet	Overbite	Crossbite	Openbite	No. Teeth Affected	Point Value	Score
						X2	
						Total Score	

2. POSTERIOR SEGMENT

Score Affected Teeth Only	Relate Mandibular to Maxillary Teeth				Score Affected Maxillary Teeth Only				Tooth No.	Point Value	Score
	Distal		Mesial		Crossbite		Openbite				
	Right	Left	Right	Left	Right	Left	Right	Left			
Canine										X1	
1st Premolar										X1	
2nd Premolar										X1	
1st Molar										X1	
										Total Score	
										Grand Total	

All orthodontic services included in ACA qualified dental products require prior authorization by a CareFirst dental consultant. The member must present with a fully erupted set of permanent teeth. At least 1/2 to 3/4 of the clinical crown should be exposed, unless the tooth is impacted or developmentally missing.

Salzmann Evaluation Index score of 25 points or more must be achieved to be eligible for comprehensive orthodontic treatment under the Commonwealth of Virginia Affordable Care Act products.

* Score Maxillary or Mandibular Incisor

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PLEASE COMPLETE THE FOLLOWING IN DETAIL

DESCRIPTION OF PATIENT'S CONDITION AND DIAGNOSIS

DIAGNOSTIC PROCEDURES

TREATMENT PLAN

REMARKS

Detailed Instructions for Completing the Salzmann Index Evaluation

Introduction

This assessment record (not an examination) is intended to disclose whether a handicapping malocclusion is present and to assess its severity according to the criteria and weights (point values) assigned to them. The weights are based on tested clinical orthodontic values from the standpoint of the effect of the malocclusion on dental health, function and esthetics. The assessment is not directed to ascertain the presence of occlusal deviations ordinarily included in epidemiological surveys of malocclusion. Etiology, diagnosis, planning, complexity of treatment and prognosis are not factors in this assessment. Please provide either scanned or photographed, dated, digital images of original diagnostic study models with frontal and profile views (2) with teeth in full occlusion, plus images from occlusal view of full upper and lower arches separately.

A. Intra-Arch Deviations

The casts are viewed, teeth upward in direct view via imaging (either scanned or photographed). When the assessment is made directly in the mouth, a mouth mirror is used. The number of teeth affected is entered as indicated in the Handicapping Malocclusion Assessment Record. The scoring can be entered later.

1. **Anterior segment:** A value of 2 points is scored for each tooth affected in the maxilla and 1 point in the mandible.
   - Missing teeth are assessed by actual count. A tooth with only the roots remaining is scored as missing.
   - Crowded refers to tooth irregularities that interrupt the continuity of the dental arch when the space is insufficient for alignment without moving other teeth in the arch. Crowded teeth may or may not also be rotated. A tooth scored as crowded is also not scored as rotated.
   - Rotated refers to tooth irregularities that interrupt the continuity of the dental arch but there is sufficient space for alignment. A tooth scored as rotated is also not scored as crowded or spaced.
   - Spacing:
     - Open spacing refers to tooth separation that exposes to view the interdental papillac on the alveolar crest. Score the number of papillae visible (not teeth).
     - Closed spacing refers to partial space closure that will not permit a tooth to complete its eruption without moving other teeth in the same arch. Score the number of teeth affected.
2. **Posterior segment:** A value of 1 point is scored for each tooth affected.
   - Missing teeth are assessed by actual count. A tooth with only the roots remaining is scored as missing.
   - Crowded refers to tooth irregularities that interrupt the continuity of the dental arch when the space is insufficient for alignment. Crowded teeth may or may not also be rotated. A tooth scored as crowded is also not scored as rotated.
   - Rotated refers to tooth irregularities that interrupt the continuity of the dental arch and all or part of the lingual or buccal surface faces some part or all of the adjacent proximal tooth surfaces. There is sufficient space for alignment. A tooth scored as rotated is also not scored as crowded.

Spacing:

- Open spacing refers to interproximal tooth separation that exposes to view the mesial and distal papillae of a tooth. Score the number of teeth affected (not the spaces).
- Closed spacing refers to partial space closure that will not permit a tooth to erupt without moving other teeth in the same arch. Score the number of teeth affected.

B. Interarch Deviations

When the casts are assessed for interarch deviations, they are placed in full occlusion and scanned or photographed in profile view to be able to note the relationship of the upper to the lower teeth in occlusion. When the assessment is made in the mouth, terminal occlusion is obtained by bending the head backward as far as possible while the mouth is held wide open. The tongue is bent upward and backward on the palate and the teeth are quickly brought to terminal occlusion before the head is again brought downward. A mouth mirror is used to obtain a more direct view in the mouth.

1. **Anterior segment:** A value of 2 points is scored for each affected maxillary tooth only.
   - Overjet refers to labial axial inclination of the maxillary incisors in relation to the mandibular incisor, permitting the latter to occlude on or over the palatal mucosa. If the maxillary incisors are not in labial axial inclination, the condition is scored as overbite only.
   - Overbite refers to the occlusion of the maxillary incisors on or over the labial gingival mucosa of the mandibular incisors, while the mandibular incisors themselves occlude on or over the palatal mucosa in back of the maxillary incisors. When the maxillary incisors are in labial axial inclination, the deviation is scored also as overjet.
   - Crossbite refers to maxillary incisors that occlude lingual to their opponents in the opposing jaw, when the teeth are in terminal occlusion.
   - Openbite refers to vertical interach dental separation between the upper and lower incisors when the posterior teeth are in terminal occlusion. Openbite is scored in addition to overjet if the maxillary incisor teeth are above the incisal edges of the mandibular incisors when the posterior teeth are in terminal occlusion, edge-to-edge occlusion in not assessed as openbite.
2. **Posterior segment:** A value of 1 point is scored for each affected tooth.
   - Crossbite refers to teeth in the buccal segment that are positioned lingually or buccally out of entire occlusal contact with the teeth in the opposing jaw when the dental arches are in terminal occlusion.
   - Openbite refers to the vertical interdental separation between the upper and lower segments when the anterior teeth are in terminal occlusion. Cusp-to-cusp occlusion is not assessed as openbite.
   - Anteroposterior deviation refers to the occlusion forward or rearward of the accepted normal of the mandibular canine, first and second premolars and first molar in relation to the opposing maxillary teeth. The deviation is scored when it extends a full cusp or more in the molar and the premolars and canine occlude in the interproximal area mesial or distal to the accepted normal position.