

Handicapping Labio-Lingual Deviation (HLD) Index Form

Provider Name Provider Number		Patient Name Patient Medicaid Number Patient Date of Birth Patient Age	
Proce	dure:		
1. Er	nter the requested	d provider and patient information above. Provider must <u>sign and date</u> at the bottom of th	ne form.
	·	t's teeth in centric occlusion.	
	·	ements in the order given and round off to the nearest millimeter (mm).	
		the condition is absent.	
		er (hygienist, assistant) is recommended.	
		ying "Scoring Instructions" beginning on page 2 for guidance on completing the assessme	n+
6. US	e the accompan	ying scoring instructions beginning on page 2 for guidance on completing the assessme	erit.
Cond	ditions		
		THIS SECTION AUTOMATICALLY QUALIFY FOR TREATMENT.	SCORE
	cate an "X" in the		300K2
1.	Cleft lip and/o		
2.	Cranio-facial a	J	
3.	Severe trauma		
4.	Severe imping		
5.	Crossbite of ar		
6.		r than 9.0 mm or reverse overjet greater than 3.5 mm	
7.		manent anterior teeth where extraction is not indicated	
8.		factors affecting development	
		THIS SECTION MUST TOTAL 30 OR MORE TO QUALIFY FOR TREATMENT.	SCORE
		alue in the score column.	
9.	Overjet, in mn		
10.	Overbite, in m		
11.		otrusion, in mm X5 =	
12.	Open bite, in r		<u></u>
		DING, or ECTOPIC ERUPTION ARE PRESENT IN THE ANTERIOR PORTION OF THE MOU OST SEVERE CONDITION.	JIH,
Indic	cate a numeric v	alue in the score column.	
13.	Posterior unila	steral or bilateral quadrant crossbite; List teeth #'s Score 5	
14.	Ectopic erupti	on: Count each tooth, excluding 3 rd molars; List teeth #'s X 3 =	
15.	Anterior crowd	ding: Score one point for MAXILLA, and/or one point for MANDIBLE; Two X 5 =	
	points maxim	um for anterior crowding	
16.	Labio-Lingual	spread, in mm	
		Total Score (must score 30 or more to quality for treatment)	
autho or ado	orized upon a de olescent. Writte	score at least 30 points, based upon the sixteen (16) criteria listed above, treatme monstration of medical, social or emotional conditions, which affect the functioning on n documentation must be attached and submitted with the index form.	
Classi	fication of Malo	cclusion and significant qualifying conditions:	

Orthodontist's Signature

Date __

Handicapping Labio-Lingual Deviation (HLD) Index Form SCORING INSTRUCTIONS

The intent of the index is to measure the presence and the degree, of the malocclusion. All measurements are made with a Boley Gauge (or a ruler) scaled in millimeters.

The following information should help clarify the categories on the index:

- 1. Cleft lip and/or palate: Indicate an "X" on the score sheet. This condition is considered an automatic qualifying malocclusion. Continue scoring all applicable conditions.
- **2. Cranio-facial anomaly**: Indicate an "X" on the score sheet. This condition is considered an automatic qualifying malocclusion. Continue scoring all applicable conditions.
- **3. Severe traumatic deviation**: Indicate an "X" on the score sheet when damage to skeletal and or soft tissue as a result of trauma or other gross pathology. Include a written report and intraoral photographs. *This condition is considered an automatic qualifying malocclusion. Continue scoring all applicable conditions.*
- **4. Severe impinging overbite**: Indicate an "X" on the score sheet when incisors are providing damage/indentation to the soft tissue of the palate. Document soft tissue damage/indentation with an intraoral photograph or scan. Consider adding additional information regarding damage seen as needed. This condition is considered an automatic qualifying malocclusion. Continue scoring all applicable conditions.
- **5.** Crossbite of anterior teeth: Indicate an "X" on the score sheet when destruction of soft tissue is present. For anterior crossbite to be approved you must see hard tissue wear into dentin or gingival recession. This condition is considered an automatic qualifying malocclusion. Continue scoring all applicable conditions.
- **6. Overjet greater than 9.0 mm/reverse overjet greater than 3.5 mm:** If the overjet is greater than 9.0 mm with incompetent lips or the reverse overjet (mandibular protrusion) is greater than 3.5 mm, indicate an "X". If the reverse overjet is not greater than 3.5 mm, score under the "Mandibular Protrusion in Millimeters" item. This condition is considered an automatic qualifying malocclusion. Continue scoring all applicable conditions.
- 7. Impacted permanent anterior teeth where extraction is not indicated: Indicate an "X" on the score sheet when the anterior tooth or teeth (incisors and cuspids) is or are impacted (soft or hard tissue); exposure and passive eruption is unlikely; extraction would compromise the integrity of the arch; and the tooth or teeth are not indicated for extraction and treatment planned to be brought into occlusion. Arch space available for correction. This condition is considered an automatic qualifying malocclusion. Continue scoring all applicable conditions.
- **8.** Psychological factors affecting development: Indicate an "X" if present and include detailed documentation by licensed behavioral health professional (LBHP) that identifies the psychological/psychiatric diagnosis, prognosis and indication that orthodontic correction will improvement mental/psychological condition. This condition is considered an automatic qualifying malocclusion. Continue scoring all applicable conditions.
- 9. Overjet in millimeters: This is recorded with the patient's teeth in centric occlusion and measured from the labial portion of the lower incisors to the labial of the upper incisors. This condition must exist for at least two (2) teeth or to the whole arch. The measurement is read and rounded off to the nearest millimeter and entered on the score sheet. Continue scoring all applicable conditions.
- **10. Overbite in millimeters**: A pencil mark on the tooth indicating the extent of overlap facilitates this measurement. It is measured by rounding off to the nearest millimeter and entered on the score sheet. *Continue scoring all applicable conditions.*

- 11. Mandibular protrusion (reverse overjet) 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). Continue scoring all applicable conditions. Continue scoring all applicable conditions.
- **12. 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. <u>The measurement is entered on the score sheet and multiplied by four (4).</u> Continue scoring all applicable conditions.
- **13. Posterior unilateral or bilateral quadrant crossbite**: This condition involves two (2) 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 either palatal or both completely buccal in relation to the mandibular posterior teeth. <u>The presence of posterior crossbite is indicated by a score of five (5) on the score sheet</u>. *Continue scoring all applicable conditions*.
- 14. Ectopic eruption: OHCA defines this as when the eruption path is incorrect, and the tooth erupts in the mouth in an incorrect position or may not erupt at all. Ectopic eruption often occurs when there is inadequate space for the teeth. An ectopically erupting tooth may erupt against the root of an adjacent tooth with enough pressure to cause root resorption and the ultimate loss of the adjacent tooth. Count each tooth, excluding third molars. If condition No. 15, anterior crowding, is also present with ectopic eruption in the anterior portion of the mouth, score only the most severe condition. DO NOT SCORE BOTH CONDITIONS. However, posterior ectopic teeth can still be counted separately from anterior crowding when they occur in the same arch. The measurement is entered on the score sheet and multiplied by three (3). Continue scoring all applicable conditions.
- **15. 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 condition No. 14, ectopic eruption, is also present in the anterior portion of the mouth, score the most severe condition. DO NOT SCORE BOTH CONDITIONS. Continue scoring all applicable conditions.
- 16. Labio-lingual spread in millimeters: A Boley Gauge (or disposable ruler) is used 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 anterior tooth and the most lingually displaced adjacent anterior tooth is measured. In the event that multiple anterior crowding of teeth is observed, all deviations from the normal arch should be measured for the labio-lingual spread, but only the most severe individual measurement should be entered on the score form.