
Separating Fact from Fiction:

The Definition of Treatment Time and the use of The ODA Suggested Fee Guide

A Joint Message from the ODA and the CDHO

The Ontario Dental Association (ODA) and the College of Dental Hygienists of Ontario (CDHO) are often asked for advice and direction from dentists and dental hygienists about the definition of treatment time and how the dental hygienist would record this time in the patient's chart, what ODA procedure codes would be used for treatment and the suggested fees for treatment (billing).

What is the definition of treatment time?

Treatment time is not just "instrument on tooth time". Treatment time includes the time spent reviewing the chart to prepare oneself for the procedure. Also included is the time spent administering a local anaesthetic when required, performing the procedure, providing post operative instructions to the patient (when required) and recording the treatment notes in the chart. Examples of time spent that would *not* be included in treatment time would be the breakdown, disinfection and set up of the operatory, as well as administrative functions such as billing and reappointing the patient. Time spent measuring and recording periodontal findings would not be included in scaling/root planing. That time would be considered to part of the dentist's examination & diagnosis time whether dentist performs the examination & diagnosis at that appointment or at a subsequent appointment.

Do dental hygienists need to record the start and stop time for all patient appointments?

The CDHO advises dental hygienists that the record keeping regulation states that "for each intervention, the amount of time the member spent providing dental hygiene care" must be recorded. Compliance with this provision requires that the dental hygienist record the time spent providing services that are based upon units of time; specifically the time spent scaling and root planing, polishing and/or desensitizing must be recorded. Best practice is to record the number of minutes providing each of these services. Recording only as units may be confusing particularly when the office books in 10 minute units but uses procedure codes which are always based on 15 minute units. It is acceptable to also write the number of units in addition to the minutes spent providing these services although this is not a requirement of the regulation.

How are "per unit of time" procedure codes to be used and how are the fees to be billed to the patient determined?

The Ontario Dental Association publishes *The ODA Suggested Fee Guide for General Practitioners*[®] and is the ultimate authority on the use of the *Guide*. It is intended to serve only as a reference for the dentist to enable development of a structure of fees which is fair and reasonable to the patient and to the dentist. The suggested fees are not obligatory and each dentist is expected to determine independently the fees which will be charged for the services performed. The *Guide* is issued merely for professional information purposes, without any intention or expectation whatsoever that a dentist will adopt the suggested fees.

While the suggested fees are not obligatory, the use of correct procedure codes is and this means that the dentist must use the code that describes the actual service performed and that code must be the code that appears in the most current edition of the *Guide*. In the case of "per unit of time" procedures such as scaling and root planing, the code used must reflect the amount of time spent providing the service. **Time is measured in fifteen minute units.** If a procedure takes a partial unit of time, the procedure code which corresponds to the "half unit of time" should be used. Where a "half unit of time" code does not exist, the code which corresponds to the next higher unit of time may be used and the dentist may adjust his/her usual and customary fee and bill the patient for the actual time.

ODA member dentists and their employees who have questions about the use of the *Guide* should contact the ODA Practice Advisory Services Department.