

## Orthodontia Prior Authorization Request Form Instructions

### Handicapping Labio-Lingual Deviations (HLD) Index Score

The intent of the HLD Index is to measure the presence or absence, and the degree of the handicap caused by the components of the Index. The Index does not diagnosis malocclusion. All measurements are to be made with a Boley Gauge scaled in millimeters. All lines must be completed, absence of any condition is to be recorded by entering "0".

### Instructions

- Occlude patient or models in occlusion position.
- Record all measurements in the order given and round off to the nearest millimeter.
- Enter score "0" if condition is absent.
- Start by measuring overjet of the most protruding incisor.
- Measure overbite from the labio-incisal edge of overlapped front tooth (or teeth) to point of maximum coverage.
- Score all other conditions listed.
- Ectopic eruption and anterior crowding: Do not double score. Record the most serious condition.
- Deciduous teeth and teeth not fully erupted are not to be scored.
- All submitted panoramic photos, cephalometric films, and photos must be clear in diagnostic quality.

### Category Clarifications

1. **Cleft Palate Deformities:** Indicate an "X" if present; a "0" if absent.
2. **Deep Impinging Overbite:** Indicate an "X" when lower incisors are destroying the soft tissue of the palate; a "0" if absent.
3. **Anterior Impactions:** Indicate an "X" if present; a "0" if absent. Anterior impactions include central incisors, lateral incisors, and canines in the maxillary and mandibular arches.
4. **Posterior Impactions** Indicate a "5" if present; a "0" if absent.
5. **Severe Traumatic Deviations:** Indicate a "15" if present; a "0" if absent. Traumatic deviations are, for example, loss of a premaxilla segment by burns or by accident, the result of osteomyelitis, or other gross pathology.
6. **Overjet in Millimeters:** This is recorded with the patient in the centric occlusion and measured from the labial of the lower incisor to the labial of the upper incisor. The measurement could apply to a protruding single tooth as well as to the whole arch. The measurement is read and rounded off to the nearest millimeter and entered on the form.
7. **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 form. Reverse overbite may exist in certain conditions and should be measured and recorded.

8. **Mandibular Protrusion in Millimeters:** Score exactly as measured from the labial of the lower incisor to the labial of the labial of the upper incisor. The measurement is entered on the form and multiplied by 5. A reverse overbite, if present, should be shown under “overbite”.
9. **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. This measurement is entered on the form and multiplied by 4. In cases of pronounced protrusion associated with open bite, measurement of the open bite is not always possible. In those cases, use a close approximation.
10. **Ectopic Eruption:** Count each tooth, excluding third molars. Enter the number of teeth on the form and multiply by 3. If anterior crowding with an ectopic eruption in the anterior portion of the mouth is also present, score **only** the most severe condition. Do not score both conditions.
11. **Anterior Crowding:** Arch length insufficiency must exceed 3.5 millimeters. Mild rotations that may react favorably to stripping or mild expansion procedures are not to be scored as crowded. If ectopic eruption is also present in the anterior portion of the mouth, score **only** the most severe condition. Do not score both conditions.
12. **Labio-Lingual Spread:** The Boley Gauge is used to determine the extent of deviation from a normal arch. Where there is only a protruded or lingually displaced anterior tooth, measure from the incisal edge of that tooth to the normal arch line. Otherwise, measure the total distance between the most protruded tooth and the lingually displaced anterior tooth. The labio-lingual spread probably comes close to a measurement of overall deviation from what would have been a normal arch. If multiple anterior crowding of teeth is observed, measure all deviations from the normal arch for labio-lingual spread, but only enter the most severe individual measurement. Additionally, anterior spacing may be measured as the total score in millimeters from the mesial of cuspid to the mesial of cuspid, totaling both arches. Only score the greater score attained by either of these two methods.
13. **Posterior-Unilateral Crossbite:** Indicate a “4” if present; “0” if absent. 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 may either be both palatal or both completely buccal in relation to the mandibular posterior teeth.
14. **Bilateral Posterior Crossbite:** Indicate an “8” if present; “0” if absent. This condition involves two or more adjacent teeth on both sides including a molar. The presence of a bilateral crossbite is indicated by a score of 8 on the form.
15. **Anterior Crossbite:** Indicate a “4” if present; “0” if absent. This condition involves central incisor, lateral incisor, and cuspid. In the transitional dentition an anterior slide is present.