



What is a Dental Predetermination?

A predet can be sent for any dental service. A predet is recommended any time a member wants to know what their out-of-pocket expenses will be.

What is the difference between a predet and a claim?

The only difference between a predet and a claim is that a predet doesn't have any dates of services listed. Because the services haven't been completed yet, the dental office will usually enter anticipated dates of service. A Guardian predet is the most accurate way to predict what your out-of-pocket costs will be for a dental procedure.

What's Required for a Predet?

You or your dentist can submit a predet to Guardian. You may inform your dentist to send an itemized bill or completed claim form with the details below :

- Patient name
- Member name
- Group number
- Member ID number
- Procedure codes
- Teeth numbers
- Fee per service
- Provider's name and address
- Provider's tax ID number

The dentist then signs the predet, and sends it to Guardian for processing.

What will be sent back from Guardian?

A predetermination offers an estimate of your financial responsibility, if any, for a specific service covered by the dental plan. A processed predetermination is valid for 12 months unless your benefits have changed.

Predetermination Required Materials

Service	Code	Required Material
Inlays	2500 - 2799,	Radiographic image (X-rays)
Onlays	2950, 2952, 2954,	
Crowns	2960, 2962	
Crown buildup		
Post and Core	4240, 4241, 4249,	
Veneers	4263,	
Gingival flap	4264, 4266, 4267	
Crown lengthening		
Bone grafts	6970, 6972, 6976,	
Guided tissue regeneration	6979, 6700 - 6799, 6973	
Abutment crowns		
Surgical extraction	7210, 7953	
Bone replacement graft		
Osseous Surgery	4260, 4261, 4341,	Radiographic image (X-rays) and Periodontal charting
Root planning and scaling	4342	
Tissue Graft	4270, 4271, 4273, 4275, 4276	Periodontal charting

Please have your dentist send the predet and any required information using one of the following methods.

Mail:

Guardian, PO Box 981572, El Paso, TX 79998

Fax:

509-465-3404

How long will it take? ?

Predetermination requests are processed within 2-3 weeks unless additional information is requested. The member will receive a letter at their home address on file with the estimated benefit coverage and anticipated out-of-pocket expense.