State of Illinois
Department of Healthcare and Family Services

HANDICAPPING LABIO-LINGUAL DEVIATION INDEX (HLD) SCORE SHEET

Name (Last, First):_____ Medicaid ID:_____DOB: _____

All necessary dental work completed? ☐ Yes ☐ No *Patient oral hygiene:* ☐ Excellent ☐ Good ☐ Poor

Fully erupted set of permanent teeth ☐ Yes ☐ No

(All dental work must be completed and oral hygiene must be good BEFORE orthodontic treatment is approved)

PROCEDURE (use this score sheet and a Boley Gauge or disposable ruler):

- **Indicate by checkmark next to A or B which criteria you are submitting for review**
- Position the patient's teeth in centric occlusion;
- Record all measurements in the order given and round off to the nearest millimeter (mm);
- ENTER SCORE "0" IF CONDITION IS ABSENT

A. ☐ **CONDITIONS 1-6 ARE AUTOMATIC QUALIFIERS** (indicate with an "X" if condition is present)

1. **Cleft Palate or other Craniofacial anomalies** ☐
2. Deep impinging bite **with** signs of tissue damage, not just touching palate ☐
3. Anterior crossbite **with** gingival recession ☐
4. **Severe traumatic deviation** (i.e., accidents, tumors, etc.) ☐
5. **Overjet of 9mm or greater** ☐
6. **Impacted teeth** where eruption is impeded but where extraction is not indicated ☐

If none of the above automatic qualifiers are present in Section A, please use Section B below to score the patient based on the criteria listed.

B. ☐ **CONDITIONS 7-15 MUST SCORE 28 POINTS OR MORE TO QUALIFY**

7. **Overjet** (one upper central incisor to labial of the most labial lower incisor) mm _____ x1= _____
8. **Overbite** (maxillary central incisor relative to lower anteriors) mm _____ x1= _____
9. Mandibular protrusion (reverse overjet, **"underbite"**) mm _____ x5= _____
10. **Openbite** (measure from a maxillary central incisor to mandibular incisors) mm _____ x4= _____
11. **Ectopic teeth** (excluding third molars) # teeth _____ x3= _____
12. **Anterior crowding of maxilla** (greater than 3.5 mm) if present score _____1_____ x5= _____
13. **Anterior crowding of mandible** (greater than 3.5 mm) if present score _____1_____ x5= _____
14. **Labio-lingual** spread (either measure a displaced tooth from the normal arch form or labial-lingual distance between adjacent anterior teeth) mm _____ x1= _____
15. Posterior **crossbite** (1 must be a molar), score only 1 time - if present score _____1_____ x4= _____

TOTAL SCORE (must score 28 points or more to qualify) _____

*Effective January 1, 2025, if a prior authorization request for orthodontic treatment is denied, the provider who submitted the request shall be provided with the HLD scoring tool and the HLD score that prompted denial of the request.

_____ Date: _____
Provider Signature

NPI #: _____

_____
Provider Name

Phone #: _____

GUIDELINES AND RULES FOR APPLYING THE HLD INDEX

The provider is encouraged to score the case and exclude any case that obviously would *not* qualify for treatment. Upon completion of the HLD Index score sheet, review all measurements and calculations for accuracy.

1. Indicate by checkmark next to A or B which criteria you are submitting for review.
2. Position the patient's teeth in centric occlusion.
3. Record all measurements in the order given and round off to the nearest millimeter.
4. Enter the score "0" if condition is absent.

A. CONDITIONS 1-6 ARE AUTOMATIC QUALIFIERS (indicate with an "X" if condition is present)

1. **Cleft palate or other craniofacial anomalies -** a cleft palate or other craniofacial deformity must be demonstrated on the diagnostic records, if the deformity cannot be demonstrated on the diagnostic records, the condition must be diagnosed by properly credentialed experts and the diagnosis must be supported by documentation. if present, enter an "X".
2. **Deep impinging bite -** deep impinging overbite with signs of tissue damage, not just touching palate, including inflammation or damage of the gingiva palatal to the maxillary incisors. The condition must be clearly visible in the mouth and demonstrate on photos. On study models *(plaster or digital)*, the mandibular teeth must be clearly touching the palate and the tissue indentations or evidence of soft tissue damage or inflammation must be clearly visible. Tissue indentions without inflammation or soft tissue damage do not meet the criteria. If present, enter an "X".
3. **Anterior crossbite with gingival recession -** Must be visible in the mouth and reproducible and visible on the diagnostic models *(plaster or digital)*. Gingival recession *must* be at least 1.5 mm deeper than the adjacent teeth. If present, enter an "X". In the case of a canine, the amount of gingival recession should be compared to the opposite canine.
4. **Severe traumatic deviations** (i.e., accidents, tumors, etc) **-** these can include malocclusions caused by trauma, accidents, tumors, injury, disease process that significantly impact the patient's occlusion and function. If present, enter an "X".
5. **Overjet of 9 mm or greater -** Overjet is measured from the labial surface of the mandibular central incisor to the labial surface of the most prominent maxillary central incisor. If present, enter an “X”.
6. **Impacted teeth where eruption is impeded but where extraction is not indicated -** Impacted teeth, other than third molars, that are impacted and retrievable via surgical exposure, will be qualifying conditions. Impacted maxillary central incisors should be approved for treatment at the appropriate time as current research data recommends. If present, enter an “X”.

B. CONDITIONS 7 - 15 MUST SCORE 28 POINTS OR MORE TO QUALIFY

7. **Overjet** --this is recorded with the patient's teeth in centric occlusion and is measured from the labial surface of a lower incisor to the labial surface of an upper central incisor. Measure parallel to the occlusal plan. Do *not* use the upper lateral incisors or cuspids. The measurement may apply to only one (1) tooth if it is severely protrusive. Do *not* record overjet and mandibular protrusion (reverse overjet) on the same patient. Enter the measurement in millimeters.
8. **Overbite** --a pencil mark on the tooth indicating the extent of the overlap assists in making this measurement. Hold the pencil parallel to the occlusal plane when marking and use the incisal edge of one of the upper central incisors. Do *not* use the upper lateral incisors or cuspids. The measurement is done on the lower incisor from the incisal edge to the pencil mark. "Reverse" overbite may exist and should be measured on an upper central incisor - from the incisal edge to the pencil mark. Do *not* record overbite and open bite on the same patient. Enter the measurement in millimeters.
9. **Mandibular (dental) protrusion or reverse overjet** --measured from the labial surface of a lower incisor to the labial surface of an upper central incisor. Do *not* use the upper lateral incisors or cuspids for this measurement. Do *not* record mandibular protrusion (reverse overjet) and overjet on the same patient. The measurement in millimeters is entered on the score sheet and multiplied by five (5).
10. **Open bite** --measured from the incisal edge of an upper central incisor to the incisal edge of a lower incisor. Do *not* use the upper lateral incisors or cuspids for this measurement. Do *not* record overbite and open bite on the same patient. The measurement in millimeters is entered on the score sheet and multiplied by four (4).
11. **Ectopic eruption** --count each tooth excluding third molars. Enter the number of teeth on the score sheet and multiply by three (3).
12. **Anterior crowding of maxilla** --anterior 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. Score one (1) point for a maxillary arch with anterior crowding and one (1) point for a mandibular arch with anterior crowding and multiply by five (5).
13. **Anterior crowding of mandible** -- anterior 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. Score one (1) point for mandibular arch with anterior crowding and multiply by five (5).

14. **Labio-lingual spread** --use a Boley gauge (or disposable ruler) 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 a line representing the normal arch. The total distance between the most protruded tooth and the most lingually displaced adjacent anterior tooth is measured. In the event that multiple anterior crowding of teeth is observed, all deviations should be measured for labiolingual spread but only the most severe individual measurement should be entered on the score sheet. Enter the measurement in mm.

15. **Posterior crossbite** --this condition involves one (1) or more posterior teeth, one (1) of which *must* be a molar. The crossbite *must* be one in which the maxillary posterior teeth involved may be palatal to normal relationships or completely buccal to the mandibular posterior teeth. The presence of posterior crossbite is indicated by a score of four (4) on the score sheet.