

CDT Code	Enhanced Fee Codes for Crowns	Participating Dentist - effective 07/01/18	Non-participating Dentist
D2740	Crown - porcelain/ceramic substrate	686.00	185.00
D2750	Crown - porcelain fused to high noble metal	614.00	180.00
D2751	Crown - porcelain fused to predominantly base metal	546.00	160.00
D2752	Crown - porcelain fused to noble metal	617.00	170.00
D2780	Crown - 3/4 cast high noble metal	595.00	165.00
D2783	Crown - 3/4 porcelain/ceramic	708.00	160.00
D2790	Crown - full cast high noble metal	630.00	170.00
D2791	Crown - full cast predominantly base metal	523.00	145.00
D2792	Crown - full cast noble metal	556.00	160.00
D2952	Post and core in addition to crown, indirectly fabricated	209.00	60.00
D2954	Prefabricated post and core in addition to crown	162.00	40.00
D3310	Endodontic therapy, anterior tooth (excluding final restoration)	488.00	418.00
D3320	Endodontic therapy, bicuspid premolar tooth (excluding final restoration)	615.00	495.00
D3330	Endodontic therapy, molar tooth (excluding final restoration)	755.00	651.00
D3346	Retreatment of previous root canal therapy - anterior	620.00	555.00
D3347	Retreatment of previous root canal therapy - bicuspid premolar	782.00	632.00
D3348	Retreatment of previous root canal therapy -	880.00	768.00

CDT Code	Enhanced Fee Codes for Implants	Participating Dentist - effective 07/01/18	Non-participating Dentist
D6010	Surgical placement of implant body: endosteal implant	985.00	225.00
D6011	Second stage implant surgery	385.00	110.00
D6050	Surgical placement: transosteal implant	1,466.00	335.00
D6056	Prefabricated abutment - includes modification and placement	420.00	96.00
D6057	Custom fabricated abutment - includes placement	579.00	133.00
D6058	Abutment supported porcelain/ceramic crown	810.00	185.00
D6059	Abutment supported porcelain fused to metal crown (high noble metal)	829.00	180.00
D6060	Abutment supported porcelain fused to metal crown (predominantly base metal)	1,143.00	160.00
D6061	Abutment supported porcelain fused to metal crown (noble metal)	659.00	170.00
D6062	Abutment supported cast metal crown (high noble metal)	776.00	170.00
D6064	Abutment supported cast metal crown (noble metal)	700.00	160.00
D6065	Implant supported porcelain/ceramic crown	875.00	185.00
D6066	Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal)	837.00	180.00
D6067	Implant supported metal crown (titanium, titanium alloy, high noble metal)	837.00	170.00
D6068	Abutment supported retainer for porcelain/ceramic FPD	810.00	185.00
D6069	Abutment supported retainer for porcelain fused to metal FPD (high noble metal)	859.00	180.00

D6071	Abutment supported retainer for porcelain fused to metal FPD (noble metal)	659.00	170.00
D6072	Abutment supported retainer for cast metal FPD (high noble metal)	818.00	170.00
D6076	Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, or high noble metal)	859.00	180.00
D6092	Recement or re-bond implant/abutment supported crown	98.00	28.00
D6093	Recement or re-bond implant/abutment supported fixed partial denture	137.00	39.00
D6094	Abutment supported crown (titanium)	818.00	170.00
D6095	Repair implant abutment, by report	252.00	72.00
D6104	Bone graft at time of implant placement	389.00	111.00
D6110	Implant/abutment supported removable denture for edentulous arch - maxillary	1,046.00	231.00
D6111	Implant/abutment supported removable denture for edentulous arch - mandibular	1,046.00	231.00
D6190	Radiographic/surgical implant index, by report	256.00	73.00

CDT Code	Enhanced Fee Codes for Orthodontics	Participating Dentist - effective 07/01/18	Non-participating Dentist
D8020	Limited orthodontic treatment of the transitional dentition - <i>Considered under age 19</i>	880.00	163.00
D8030	Limited orthodontic treatment of the adolescent dentition - <i>Considered under age 19</i>	880.00	163.00
D8060	Interceptive orthodontic treatment of the transitional dentition - <i>Considered under age 19</i>	1,237.00	229.00
D8070	Comprehensive orthodontic treatment of the transitional dentition - <i>Considered under age 19</i>	3,526.00	653.00
D8080	Comprehensive orthodontic treatment of the adolescent dentition - <i>Considered under age 19</i>	3,526.00	653.00
D8090	Comprehensive orthodontic treatment of the adult dentition - <i>Considered under age 19</i>	3,526.00	653.00
D8660	Pre-orthodontic treatment examination to monitor growth and development - <i>Considered under age 19</i>	340.00	63.00
D8670	Periodic orthodontic treatment visit - <i>Considered under age 19</i>	76.00	14.00
D8680	Orthodontic retention (removal of appliances, construction and placement of retainer(s)) - <i>Considered under age 19</i>	572.00	106.00
D8681	Removable orthodontic retainer adjustment - <i>Considered under age 19</i>	22.00	4.00

CDT Code	Enhanced Fee Codes for Oral Surgery	Participating Dentist - effective 07/01/18	Non-participating Dentist
D9223	Deep sedation/general anesthesia – each subsequent 15 minute increment	138.00	103.00
D9243	Intravenous moderate (conscious) sedation/analgesia – each subsequent 15 minute increment	138.00	93.00

CDT Code	All Covered Procedures	Participating Dentist - effective 07/01/18	Non-participating Dentist
D0120	Periodic oral evaluation - established patient	24.00	24.00
D0140	Limited Oral Evaluation - problem focused	38.00	38.00
D0145	Oral evaluation for a patient under three years of age and counseling with primary caregiver	39.00	39.00
D0150	Comprehensive oral evaluation - new or established patient	39.00	39.00
D0180	Comprehensive periodontal evaluation - new or established patient	39.00	39.00
D0210	Intraoral - complete series of radiographic images	75.00	75.00
D0220	Intraoral - periapical first radiographic image	15.00	15.00
D0230	Intraoral - periapical each addition radiographic image	9.00	9.00
D0240	Intraoral - occlusal radiographic image	20.00	20.00
D0270	Bitewing - single radiographic image	17.00	17.00
D0272	Bitewings - two radiographic images	22.00	22.00
D0273	Bitewings - three radiographic images	24.00	24.00
D0274	Bitewings - four radiographic images	34.00	34.00
D0277	Vertical bitewings - 7 to 8 radiographic images	44.00	44.00
D0330	Panoramic radiographic image	63.00	63.00
D0431	Adjunctive pre-diagnostic test that aids in detection of mucosal abnormalities including premalignant and malignant lesions, not to include cytology or biopsy procedures	28.00	28.00
D0470	Diagnostic casts	11.00	11.00
D1110	Prophylaxis - Adult	53.00	53.00
D1120	Prophylaxis - Child	38.00	38.00
D1206	Topical application of fluoride varnish	19.00	19.00
D1208	Topical application of fluoride - excluding varnish	19.00	19.00
D1351	Sealant - per tooth	27.00	27.00
D1352	Preventive resin restoration in a moderate to high caries risk patient - permanent tooth.	27.00	27.00
D1510	Space maintainer - fixed - unilateral	194.00	194.00
D1515	Space maintainer - fixed - bilateral	303.00	303.00
D1520	Space maintainer - removable - unilateral	180.00	180.00
D1525	Space maintainer - removable - bilateral	282.00	282.00
D1550	Re-cement or re-bond space maintainer	37.00	37.00
D1555	Removal of fixed space maintainer	25.00	25.00
D1575	Distal shoe space maintainer - fixed - unilateral	194.00	194.00
D1575	Distal shoe space maintainer - fixed - unilateral	194.00	194.00
D2140	Amalgam - one surface, primary or permanent	58.00	58.00
D2150	Amalgam - two surfaces, primary or permanent	77.00	77.00
D2160	Amalgam - three surfaces, primary or permanent	98.00	98.00
D2161	Amalgam - four or more surfaces, primary or permanent	117.00	117.00

D2330	Resin-based composite - one surface, anterior	77.00	77.00
D2331	Resin-based composite - two surfaces, anterior	107.00	107.00
D2332	Resin-based composite - three surfaces, anterior	117.00	117.00
D2335	Resin-based composite - four or more surfaces or involving incisal angle (anterior)	126.00	126.00
D2391	Resin-based composite - one surface - posterior	58.00	58.00
D2392	Resin-based composite - two surfaces - posterior	77.00	77.00
D2393	Resin-based composite - three surfaces - posterior	98.00	98.00
D2394	Resin-based composite - four or more surfaces - posterior	117.00	117.00
D2510	Inlay - metallic - one surface	300.00	110.00
D2520	Inlay - metallic - two surfaces	355.00	130.00
D2530	Inlay - metallic - three or more surfaces	382.00	140.00
D2542	Onlay - metallic - two surfaces	437.00	160.00
D2543	Onlay - metallic - three surfaces	437.00	160.00
D2544	Onlay - metallic - four or more surfaces	450.00	165.00
D2610	Inlay - porcelain/ceramic - one surface	273.00	100.00
D2620	Inlay - porcelain/ceramic - two surfaces	355.00	130.00
D2630	Inlay - porcelain/ceramic - three or more surfaces	396.00	145.00
D2642	Onlay - porcelain/ceramic - two surfaces	382.00	140.00
D2643	Onlay - porcelain/ceramic - three surfaces	437.00	160.00
D2644	Onlay - porcelain/ceramic - four or more surfaces	464.00	170.00
D2650	Inlay - resin-based composite - one surface	232.00	85.00
D2651	Inlay - resin-based composite - two surfaces	314.00	115.00
D2652	Inlay - resin-based composite - three or more surfaces	341.00	125.00
D2662	Onlay - resin-based composite - two surfaces	328.00	120.00
D2663	Onlay - resin-based composite - three surfaces	382.00	140.00
D2664	Onlay - resin-based composite - four or more surfaces	396.00	145.00
D2710	Crown - resin-based composite (indirect)	341.00	125.00
D2712	Crown - 3/4 resin-based composite (indirect)	341.00	125.00
D2720	Crown - resin with high noble metal	437.00	160.00
D2721	Crown - resin with predominantly base metal	355.00	130.00
D2722	Crown - resin with noble metal	396.00	145.00
D2740	Crown - porcelain/ceramic substrate	686.00	185.00
D2750	Crown - porcelain fused to high noble metal	614.00	180.00
D2751	Crown - porcelain fused to predominantly base metal	546.00	160.00
D2752	Crown - porcelain fused to noble metal	617.00	170.00
D2780	Crown - 3/4 cast high noble metal	595.00	165.00
D2781	Crown - 3/4 cast predominantly base metal	410.00	150.00
D2782	Crown - 3/4 cast noble metal	423.00	155.00
D2783	Crown - 3/4 porcelain/ceramic	708.00	160.00

D2790	Crown - full cast high noble metal	630.00	170.00
D2791	Crown - full cast predominantly base metal	523.00	145.00
D2792	Crown - full cast noble metal	556.00	160.00
D2794	Crown - titanium	464.00	170.00
D2910	Re-cement or re-bond inlay, onlay, veneer or partial coverage restoration	49.00	49.00
D2915	Re-cement or re-bond indirectly fabricated or prefabricated post and core	49.00	49.00
D2920	Re-cement or re-bond crown	49.00	49.00
D2929	Prefabricated porcelain/ceramic crown - primary tooth	194.00	194.00
D2930	Prefabricated stainless steel crown - primary tooth	156.00	156.00
D2931	Prefabricated stainless steel crown - permanent tooth	165.00	165.00
D2932	Prefabricated resin crown	303.00	111.00
D2933	Prefabricated stainless steel crown with resin window	303.00	111.00
D2934	Prefabricated esthetic coated stainless steel crown - primary tooth	194.00	194.00
D2940	Protective restoration	49.00	49.00
D2941	Interim therapeutic restoration - primary dentition	35.00	35.00
D2950	Core buildup, including any pins when required	68.00	25.00
D2951	Pin retention - per tooth, in addition to restoration	26.00	26.00
D2952	Post and core in addition to crown, indirectly fabricated	209.00	60.00
D2954	Prefabricated post and core in addition to crown	162.00	40.00
D2960	Labial veneer (resin laminate) - chairside	328.00	120.00
D2961	Labial veneer (resin laminate) - laboratory	491.00	180.00
D2962	Labial veneer (porcelain laminate) - laboratory	696.00	255.00
D2980	Crown repair necessitated by restorative material failure	74.00	74.00
D2981	Inlay repair necessitated by restorative material failure	74.00	74.00
D2982	Onlay repair necessitated by restorative material failure	74.00	74.00
D2983	Veneer repair necessitated by restorative material failure	74.00	74.00
D2990	Resin infiltration of incipient smooth surface lesions	12.00	12.00
D3110	Pulp cap - direct (excluding final restoration)	30.00	30.00
D3120	Pulp cap - indirect (excluding final restoration)	30.00	30.00
D3220	Therapeutic pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of medicament	98.00	98.00
D3221	Pulpal debridement, primary and permanent teeth	98.00	98.00
D3222	Partial pulpotomy for apexogenesis - permanent tooth with incomplete root development	98.00	98.00
D3230	Pulpal therapy (resorbable filling) - anterior, primary tooth (excluding final restoration)	126.00	126.00
D3240	Pulpal therapy (resorbable filling) - posterior, primary tooth (excluding final restoration)	137.00	137.00
D3310	Endodontic therapy, anterior tooth (excluding final restoration)	488.00	418.00
D3320	Endodontic therapy, bicuspid premolar tooth (excluding final restoration)	615.00	495.00
D3330	Endodontic therapy, molar tooth (excluding final restoration)	755.00	651.00
D3346	Retreatment of previous root canal therapy - anterior	620.00	555.00
D3347	Retreatment of previous root canal therapy - bicuspid premolar	782.00	632.00

D3348	Retreatment of previous root canal therapy -	880.00	768.00
D3351	Apexification/recalcification - initial visit (apical closure/calcific repair of perforations, root resorption, etc.)	124.00	124.00
D3352	Apexification/recalcification - interim medication replacement (apical closure/calcific repair of perforations, root resorption, pulp space disinfection, etc.)	82.00	82.00
D3353	Apexification/recalcification - final visit (apical closure/calcific repair of perforations, root resorption, pulp space disinfection, etc.)	291.00	291.00
D3355	Pulpal regeneration - initial visit	124.00	124.00
D3356	Pulpal regeneration - interim medication replacement	82.00	82.00
D3357	Pulpal regeneration - completion of treatment	82.00	82.00
D3410	Apicoectomy - anterior	389.00	389.00
D3421	Apicoectomy - bicuspid premolar (first root)	467.00	467.00
D3425	Apicoectomy - molar (first root)	487.00	487.00
D3426	Apicoectomy - (each additional root)	175.00	175.00
D3427	Periradicular surgery without apicoectomy	420.00	420.00
D3428	Bone graft in conjunction with periradicular surgery - per tooth, single site	194.00	194.00
D3429	Bone graft in conjunction with periradicular surgery - each additional contiguous tooth in the same surgical site	145.00	145.00
D3430	Retrograde filling - per root	77.00	77.00
D3432	Guided tissue regeneration, resorbable barrier, per site, in conjunction with periradicular surgery	243.00	243.00
D3450	Root amputation - per root	252.00	252.00
D3920	Hemisection (including any root removal), not including root canal therapy	214.00	214.00
D4210	Gingivectomy or gingivoplasty - four or more contiguous teeth or tooth bounded spaces per quadrant	456.00	167.00
D4211	Gingivectomy or gingivoplasty - one to three contiguous teeth or tooth bounded spaces per quadrant	120.00	44.00
D4212	Gingivectomy or gingivoplasty to allow access for restorative procedure, per tooth	115.00	42.00
D4240	Gingival flap procedure, including root planing - four or more contiguous teeth or tooth bounded spaces per quadrant	530.00	194.00
D4241	Gingival flap procedure, including root planing - one to three contiguous teeth or tooth bounded spaces per quadrant	371.00	136.00
D4249	Clinical crown lengthening - hard tissue	683.00	250.00
D4260	Osseous surgery (including elevation of a full thickness flap and closure) - four or more contiguous teeth or tooth bounded spaces per quadrant	1,016.00	372.00
D4261	Osseous surgery (including elevation of a full thickness flap and closure) - one to three contiguous teeth or tooth bounded spaces per quadrant	713.00	261.00
D4263	Bone replacement graft - retained natural tooth - first site in quadrant	303.00	111.00
D4264	Bone replacement graft - retained natural tooth - each additional site in quadrant	145.00	145.00
D4266	Guided tissue regeneration - resorbable barrier, per site	243.00	243.00
D4267	Guided tissue regeneration - non-resorbable barrier, per site (includes membrane removal)	282.00	282.00
D4270	Pedicle soft tissue graft procedure	456.00	167.00
D4273	Autogenous connective tissue graft procedure (including donor and recipient surgical sites) first tooth, implant, or edentulous tooth position in graft	574.00	574.00
D4274	Mesial/Distal wedge procedure, single tooth (when not performed in conjunction with surgical procedures in the same anatomical area)	145.00	145.00
D4275	Non-autogenous connective tissue graft (including recipient site and donor material) first tooth, implant, or edentulous tooth position in	857.00	314.00
D4276	Combined connective tissue and double pedicle graft, per tooth	876.00	321.00
D4277	Free soft tissue graft procedure (including recipient and donor surgical sites) first tooth, implant, or edentulous tooth position in graft	759.00	278.00
D4278	Free soft tissue graft procedure (including recipient and donor surgical sites) each additional contiguous tooth, implant, or edentulous tooth position in graft	405.00	149.00
D4283	Autogenous connective tissue graft procedure (including donor and recipient surgical sites) – each additional contiguous tooth, implant or edentulous tooth position in same graft site	345.00	345.00

D4285	Non-autogenous connective tissue graft procedure (including recipient surgical site and donor material) – each additional contiguous tooth, implant or edentulous tooth position in same graft site	329.00	329.00
D4341	Periodontal scaling and root planing - four or more teeth per quadrant	126.00	126.00
D4342	Periodontal scaling and root planing - one to three teeth per quadrant	89.00	89.00
D4346	Scaling in presence of generalized moderate or severe gingival inflammation - full mouth, after oral evaluation	58.00	58.00
D4346	Scaling in presence of generalized moderate or severe gingival inflammation - full mouth, after oral evaluation	53.00	53.00
D4355	Full mouth debridement to enable comprehensive evaluation and diagnosis on a subsequent visit	58.00	58.00
D4910	Periodontal maintenance	53.00	53.00
D5110	Complete denture - maxillary	601.00	220.00
D5120	Complete denture - mandibular	601.00	220.00
D5130	Immediate denture - maxillary	628.00	230.00
D5140	Immediate denture - mandibular	628.00	230.00
D5211	Maxillary partial denture - resin base (including any conventional clasps, rests and teeth)	437.00	160.00
D5212	Mandibular partial denture - resin base (including any conventional clasps, rests and teeth)	437.00	160.00
D5213	Maxillary partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	655.00	240.00
D5214	Mandibular partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	655.00	240.00
D5221	Immediate maxillary partial denture – resin base (including any conventional clasps, rests and teeth)	459.00	168.00
D5222	Immediate mandibular partial denture – resin base (including any conventional clasps, rests and teeth)	459.00	168.00
D5223	Immediate maxillary partial denture – cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	688.00	252.00
D5224	Immediate mandibular partial denture – cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	688.00	252.00
D5225	Maxillary partial denture - flexible base (including any clasps, rests and teeth)	655.00	240.00
D5226	Mandibular partial denture - flexible base (including any clasps, rests and teeth)	655.00	240.00
D5281	Removable unilateral partial denture - one piece cast metal (including clasps and teeth)	166.00	166.00
D5410	Adjust complete denture - maxillary	39.00	39.00
D5411	Adjust complete denture - mandibular	39.00	39.00
D5421	Adjust partial denture - maxillary	39.00	39.00
D5422	Adjust partial denture - mandibular	39.00	39.00
D5511	Repair broken complete denture base, mandibular	126.00	126.00
D5512	Repair broken complete denture base, maxillary	126.00	126.00
D5520	Replace missing or broken teeth - complete denture (each tooth)	98.00	98.00
D5611	Repair resin partial denture base, mandibular	88.00	88.00
D5612	Repair resin partial denture base, maxillary	88.00	88.00
D5621	Repair cast partial framework, mandibular	98.00	98.00
D5622	Repair cast partial framework, maxillary	98.00	98.00
D5630	Repair or replace broken clasp - per tooth	77.00	77.00
D5640	Replace broken teeth - per tooth	77.00	77.00
D5650	Add tooth to existing partial denture	98.00	98.00
D5660	Add clasp to existing partial denture - per tooth	137.00	137.00
D5710	Rebase complete maxillary denture	301.00	301.00

D5711	Rebase complete mandibular denture	301.00	301.00
D5720	Rebase maxillary partial denture	282.00	282.00
D5721	Rebase mandibular partial denture	282.00	282.00
D5730	Reline complete maxillary denture (chairside)	145.00	145.00
D5731	Reline complete mandibular denture (chairside)	145.00	145.00
D5740	Reline maxillary partial denture (chairside)	117.00	117.00
D5741	Reline mandibular partial denture (chairside)	117.00	117.00
D5750	Reline complete maxillary denture (laboratory)	252.00	252.00
D5751	Reline complete mandibular denture (laboratory)	252.00	252.00
D5760	Reline maxillary partial denture (laboratory)	214.00	214.00
D5761	Reline mandibular partial denture (laboratory)	214.00	214.00
D5820	Interim partial denture (maxillary)	205.00	75.00
D5821	Interim partial denture (mandibular)	205.00	75.00
D5850	Tissue conditioning, maxillary	77.00	77.00
D5851	Tissue conditioning, mandibular	77.00	77.00
D6010	Surgical placement of implant body: endosteal implant	985.00	225.00
D6011	Second stage implant surgery	385.00	110.00
D6013	Surgical placement of mini implant	788.00	225.00
D6040	Surgical placement: eposteal implant	1,173.00	335.00
D6050	Surgical placement: transosteal implant	1,466.00	335.00
D6055	Connecting bar - implant supported or abutment supported	910.00	260.00
D6056	Prefabricated abutment - includes modification and placement	420.00	96.00
D6057	Custom fabricated abutment - includes placement	579.00	133.00
D6058	Abutment supported porcelain/ceramic crown	810.00	185.00
D6059	Abutment supported porcelain fused to metal crown (high noble metal)	829.00	180.00
D6060	Abutment supported porcelain fused to metal crown (predominantly base metal)	1,143.00	160.00
D6061	Abutment supported porcelain fused to metal crown (noble metal)	659.00	170.00
D6062	Abutment supported cast metal crown (high noble metal)	776.00	170.00
D6063	Abutment supported cast metal crown (predominantly base metal)	508.00	145.00
D6064	Abutment supported cast metal crown (noble metal)	700.00	160.00
D6065	Implant supported porcelain/ceramic crown	875.00	185.00
D6066	Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal)	837.00	180.00
D6067	Implant supported metal crown (titanium, titanium alloy, high noble metal)	837.00	170.00
D6068	Abutment supported retainer for porcelain/ceramic FPD	810.00	185.00
D6069	Abutment supported retainer for porcelain fused to metal FPD (high noble metal)	859.00	180.00
D6070	Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal)	560.00	160.00
D6071	Abutment supported retainer for porcelain fused to metal FPD (noble metal)	659.00	170.00
D6072	Abutment supported retainer for cast metal FPD (high noble metal)	818.00	170.00
D6073	Abutment supported retainer for cast metal FPD (predominantly base metal)	508.00	145.00



D6074	Abutment supported retainer for cast metal FPD (noble metal)	560.00	160.00
D6075	Implant supported retainer for ceramic FPD	648.00	185.00
D6076	Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, or high noble metal)	859.00	180.00
D6077	Implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal)	595.00	170.00
D6090	Repair implant supported prosthesis, by report	252.00	72.00
D6092	Recement or re-bond implant/abutment supported crown	98.00	28.00
D6093	Recement or re-bond implant/abutment supported fixed partial denture	137.00	39.00
D6094	Abutment supported crown (titanium)	818.00	170.00
D6095	Repair implant abutment, by report	252.00	72.00
D6100	Implant removal, by report	322.00	92.00
D6104	Bone graft at time of implant placement	389.00	111.00
D6110	Implant/abutment supported removable denture for edentulous arch - maxillary	1,046.00	231.00
D6111	Implant/abutment supported removable denture for edentulous arch - mandibular	1,046.00	231.00
D6112	Implant/abutment supported removable denture for partially edentulous arch - maxillary	844.00	241.00
D6113	Implant/abutment supported removable denture for partially edentulous arch - mandibular	844.00	241.00
D6114	Implant/abutment supported fixed denture for edentulous arch - maxillary	770.00	220.00
D6115	Implant/abutment supported fixed denture for edentulous arch - mandibular	770.00	220.00
D6116	Implant/abutment supported fixed denture for partially edentulous arch - maxillary	840.00	240.00
D6117	Implant/abutment supported fixed denture for partially edentulous arch - mandibular	840.00	240.00
D6190	Radiographic/surgical implant index, by report	256.00	73.00
D6194	Abutment supported retainer crown for FPD (titanium)	595.00	170.00
D6210	Pontic - cast high noble metal	478.00	175.00
D6211	Pontic - cast predominantly base metal	396.00	145.00
D6212	Pontic - cast noble metal	437.00	160.00
D6214	Pontic - titanium	491.00	180.00
D6240	Pontic - porcelain fused to high noble metal	491.00	180.00
D6241	Pontic - porcelain fused to predominantly base metal	423.00	155.00
D6242	Pontic - porcelain fused to noble metal	464.00	170.00
D6245	Pontic - porcelain/ceramic	505.00	185.00
D6250	Pontic - resin with high noble metal	437.00	160.00
D6251	Pontic - resin with predominantly base metal	382.00	140.00
D6252	Pontic - resin with noble metal	423.00	155.00
D6545	Retainer - cast metal for resin bonded fixed prosthesis	177.00	65.00
D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	177.00	65.00
D6549	Resin retainer - for resin bonded fixed prosthesis	90.00	33.00
D6710	Retainer crown - indirect resin based composite	341.00	125.00
D6720	Retainer crown - resin with high noble metal	437.00	160.00
D6721	Retainer crown - resin with predominantly base metal	396.00	145.00
D6722	Retainer crown - resin with noble metal	423.00	155.00

D6740	Retainer crown - porcelain/ceramic	505.00	185.00
D6750	Retainer crown - porcelain fused to high noble metal	491.00	180.00
D6751	Retainer crown - porcelain fused to predominantly base metal	437.00	160.00
D6752	Retainer crown - porcelain fused to noble metal	464.00	170.00
D6780	Retainer crown - 3/4 cast high noble metal	437.00	160.00
D6781	Retainer crown - 3/4 cast predominantly base metal	369.00	135.00
D6782	Retainer crown - 3/4 cast noble metal	369.00	135.00
D6783	Retainer crown - 3/4 porcelain/ceramic	437.00	160.00
D6790	Retainer crown - full cast high noble metal	464.00	170.00
D6791	Retainer crown - full cast predominantly base metal	396.00	145.00
D6792	Retainer crown - full cast noble metal	437.00	160.00
D6794	Retainer crown - titanium	464.00	170.00
D6930	Re-cement or re-bond fixed partial denture	68.00	68.00
D6980	Fixed partial denture repair necessitated by restorative material failure	126.00	126.00
D7111	Extraction, coronal remnants - deciduous primary tooth	68.00	68.00
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	68.00	68.00
D7210	Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated	137.00	137.00
D7220	Removal of impacted tooth - soft tissue (STI)	186.00	186.00
D7230	Removal of impacted tooth - partially bony (PBI)	243.00	243.00
D7240	Removal of impacted tooth - completely bony (FBI)	301.00	301.00
D7241	Removal of impacted tooth - completely bony, with unusual surgical complications (FBID)	331.00	331.00
D7250	Removal of residual tooth roots (cutting procedure)	145.00	145.00
D7260	Oroantral fistula closure	331.00	331.00
D7280	Exposure of an unerupted tooth	340.00	340.00
D7285	Incisional Biopsy of oral tissue - hard (bone, tooth)	145.00	145.00
D7286	Incisional Biopsy of oral tissue - soft	145.00	145.00
D7288	Brush Biopsy - transepithelial sample collection	145.00	145.00
D7310	Alveoloplasty in conjunction with extractions - four or more teeth or tooth spaces, per quadrant	126.00	126.00
D7311	Alveoloplasty in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	126.00	126.00
D7320	Alveoloplasty not in conjunction with extractions - four or more teeth or tooth spaces, per quadrant	165.00	165.00
D7321	Alveoloplasty not in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	128.00	47.00
D7410	Excision of benign lesion up to 1.25 cm	186.00	186.00
D7411	Excision of benign lesion greater than 1.25 cm	278.00	278.00
D7412	Excision of benign lesion, complicated	306.00	306.00
D7413	Excision of malignant lesion up to 1.25 cm	186.00	186.00
D7414	Excision of malignant lesion greater than 1.25 cm	278.00	278.00
D7415	Excision of malignant lesion, complicated	306.00	306.00
D7440	Excision of malignant tumor - lesion diameter up to 1.25 cm	233.00	233.00
D7441	Excision of malignant tumor - lesion diameter over 1.25 cm	243.00	243.00

D7450	Removal of benign odontogenic cyst or tumor - lesion diameter up to 1.25 cm	224.00	224.00
D7451	Removal of benign odontogenic cyst or tumor - lesion diameter greater than 1.25 cm	233.00	233.00
D7460	Removal of benign nonodontogenic cyst or tumor - lesion diameter up to 1.25 cm	194.00	194.00
D7461	Removal of benign nonodontogenic cyst or tumor - lesion diameter greater than 1.25 cm	418.00	418.00
D7471	Removal of lateral exostosis (maxilla or mandible)	292.00	292.00
D7510	Incision and drainage of abscess - intraoral soft tissue	98.00	98.00
D7511	Incision and drainage of abscess - intraoral soft tissue - complicated (included drainage of multiple fascial spaces)	109.00	109.00
D7520	Incision and drainage of abscess - extraoral soft tissue	117.00	117.00
D7521	Incision and drainage of abscess - extraoral soft tissue - complicated (included drainage of multiple fascial spaces)	128.00	128.00
D7953	Bone replacement graft for ridge preservation - per site	389.00	111.00
D7960	Frenulectomy - also known as frenectomy or frenotomy - separate procedure not incidental to another procedure	224.00	224.00
D7963	Frenuloplasty	224.00	224.00
D7970	Excision of hyperplastic tissue - per arch	186.00	186.00
D7971	Excision of pericoronal gingiva	98.00	98.00
D8010	Limited orthodontic treatment of the primary dentition - <i>Considered under age 19</i>	652.00	163.00
D8020	Limited orthodontic treatment of the transitional dentition - <i>Considered under age 19</i>	880.00	163.00
D8030	Limited orthodontic treatment of the adolescent dentition - <i>Considered under age 19</i>	880.00	163.00
D8040	Limited orthodontic treatment of the adult dentition	652.00	163.00
D8050	Interceptive orthodontic treatment of the primary dentition - <i>Considered under age 19</i>	916.00	229.00
D8060	Interceptive orthodontic treatment of the transitional dentition - <i>Considered under age 19</i>	1,237.00	229.00
D8070	Comprehensive orthodontic treatment of the transitional dentition - <i>Considered under age 19</i>	3,526.00	653.00
D8080	Comprehensive orthodontic treatment of the adolescent dentition - <i>Considered under age 19</i>	3,526.00	653.00
D8090	Comprehensive orthodontic treatment of the adult dentition - <i>Considered under age 19</i>	3,526.00	653.00
D8210	Removable appliance therapy	88.00	22.00
D8660	Pre-orthodontic treatment examination to monitor growth and development - <i>Considered under age 19</i>	340.00	63.00
D8670	Periodic orthodontic treatment visit - <i>Considered under age 19</i>	76.00	14.00
D8680	Orthodontic retention (removal of appliances, construction and placement of retainer(s)) - <i>Considered under age 19</i>	572.00	106.00
D8681	Removable orthodontic retainer adjustment - <i>Considered under age 19</i>	22.00	4.00
D8693	Re-cement or re-bonding of fixed retainers - <i>Considered under age 19</i>	156.00	39.00
D9110	Palliative (emergency) treatment of dental pain - minor procedure	47.00	47.00
D9220	Deep sedation/general anesthesia - first 30 minutes	103.00	103.00
D9221	Deep sedation/general anesthesia - each additional 15 minutes	103.00	103.00
D9222	Deep sedation/general anesthesia – first 15 minutes	103.00	103.00
D9223	Deep sedation/general anesthesia – each subsequent 15 minute increment	138.00	103.00
D9239	Intravenous moderate (conscious) sedation/analgesia- first 15 minutes	103.00	106.00
D9241	Intravenous moderate (conscious) sedation/analgesia - first 30 minutes	93.00	93.00
D9242	Intravenous moderate (conscious) sedation/analgesia - each additional 15 minutes	93.00	93.00
D9243	Intravenous moderate (conscious) sedation/analgesia – each subsequent 15 minute increment	138.00	93.00
D9310	Consultation - diagnostic service provided by dentist or physician other than requesting dentist or physician	58.00	58.00

D9610	Therapeutic parenteral drug, single administration	19.00	19.00
D9612	Therapeutic parenteral drugs, two or more administrations, different medications	30.00	30.00
D9951	Occlusal adjustment - limited	58.00	58.00
D9952	Occlusal adjustment - complete	156.00	156.00

CDT Code	Non Covered Services	Participating Dentist - effective 07/01/18	Non-participating Dentist
D0160	Detailed and extensive oral evaluation - problem focused, by report	0.00	0.00
D0170	Re-evaluation - limited, problem focused (established patient; not post-operative visit)	0.00	0.00
D0171	Re-evaluation - post-operative office visit	0.00	0.00
D0190	Screening of a Patient	0.00	0.00
D0191	Assessment of a Patient	0.00	0.00
D0250	extra-oral – 2D projection radiographic image created using a stationary radiation source, and detector	0.00	0.00
D0251	Extra-oral posterior dental radiographic image	0.00	0.00
D0260	Extraoral - each additional radiographic image	0.00	0.00
D0290	Posterior - anterior or lateral skull and facial bone survey radiographic images	0.00	0.00
D0310	Sialography	0.00	0.00
D0320	Temporomandibular Joint Arthrogram, including injection	0.00	0.00
D0321	Other temporomandibular joint radiographic images, by report	0.00	0.00
D0322	Tomographic survey	0.00	0.00
D0340	2D cephalometric radiographic image acquisition, measurement and analysis	0.00	0.00
D0350	2D Oral/facial images, photographic images obtained intraorally or extraorally	0.00	0.00
D0351	3D photographic image	0.00	0.00
D0364	Cone Beam CT capture and interpretation with limited field of view - less than one whole jaw	0.00	0.00
D0365	Cone Beam CT capture and interpretation with field of view of one full dental arch - mandible	0.00	0.00
D0366	Cone Beam CT capture and interpretation with field of view of one full dental arch - maxilla, with or without cranium	0.00	0.00
D0367	Cone Beam CT capture and interpretation with field of view of both jaws; with or without cranium	0.00	0.00
D0368	Cone Beam CT capture and interpretation for TMJ series including two or more exposures	0.00	0.00

D0369	Maxillofacial MRI capture and interpretation	0.00	0.00
D0370	Maxillofacial ultrasound capture and interpretation	0.00	0.00
D0371	Sialoendoscopy capture and interpretation	0.00	0.00
D0380	Cone Beam CT image capture with limited field of view - less than one whole jaw	0.00	0.00
D0381	Cone Beam CT image capture with field of view of one full dental arch - mandible	0.00	0.00
D0382	Cone Beam CT image capture with field of view of one full dental arch - maxilla, with or without cranium	0.00	0.00
D0383	Cone Beam CT image capture with field of view of both jaws, with or without cranium	0.00	0.00
D0384	Cone Beam CT image capture for TMJ series including two or more exposures	0.00	0.00
D0385	Maxillofacial MRI image capture	0.00	0.00
D0386	Maxillofacial ultrasound image capture	0.00	0.00
D0391	Interpretation of diagnostic image by a practitioner not associated with capture of the image, including report	0.00	0.00
D0393	Treatment simulation using 3D image volume	0.00	0.00
D0394	Digital subtraction of two or more images or image volumes of the same modality	0.00	0.00
D0395	Fusion of two or more 3D image volumes of one or more modalities	0.00	0.00
D0411	HbA1c in-office point of service testing	0.00	0.00
D0414	Laboratory processing of microbial specimen to include culture and sensitivity, preparation and transmission of written report	0.00	0.00
D0415	Collection of microorganisms for culture and sensitivity	0.00	0.00
D0416	Viral Culture	0.00	0.00
D0417	Collection and preparation of saliva sample for laboratory diagnostic testing	0.00	0.00
D0418	Analysis of saliva sample	0.00	0.00
D0421	Genetic test for susceptibility to oral diseases	0.00	0.00
D0422	Collection and preparation of genetic sample material for laboratory analysis and report	0.00	0.00
D0423	Genetic test for susceptibility to diseases – specimen analysis	0.00	0.00
D0425	Caries Susceptibility Tests	0.00	0.00
D0460	Pulp Vitality Tests	0.00	0.00
D0472	Accession of tissue, gross examination, preparation and transmission of written report	0.00	0.00

D0473	Accession of tissue, gross and microscopic examination, preparation and transmission of written report	0.00	0.00
D0474	Accession of tissue, gross and microscopic examination, including assessment of surgical margins for presence of disease, preparation and transmission of written report	0.00	0.00
D0475	Decalcification procedure	0.00	0.00
D0476	Special stains for microorganisms	0.00	0.00
D0477	Special stains, not for microorganisms	0.00	0.00
D0478	Immunohistochemical stains	0.00	0.00
D0479	Tissue in-situ hybridization, including interpretation	0.00	0.00
D0480	Accession of exfoliative cytologic smears, microscopic examination, preparation and transmission of written report	0.00	0.00
D0481	Electron microscopy - diagnostic (description of service following procedure name removed with CDT-15)	0.00	0.00
D0482	Direct immunofluorescence	0.00	0.00
D0483	Indirect immunofluorescence	0.00	0.00
D0484	Consultation on slides prepared elsewhere	0.00	0.00
D0485	Consultation, including preparation of slides from biopsy material supplied by referring source	0.00	0.00
D0486	Laboratory accession of transepithelial cytologic sample, microscopic examination, preparation and transmission of written report	0.00	0.00
D0502	Other oral pathology procedures, by report	0.00	0.00
D0600	Non-ionizing diagnostic procedure capable of quantifying, monitoring, and recording changes in structure of enamel, dentin and cementum	0.00	0.00
D0601	Caries risk assessment and documentation, with a finding of low risk	0.00	0.00
D0602	Caries risk assessment and documentation, with a finding of moderate risk	0.00	0.00
D0603	Caries risk assessment and documentation, with a finding of high risk	0.00	0.00
D0999	Unspecified diagnostic procedure, by report	0.00	0.00
D1310	Nutritional counseling for control of dental disease	0.00	0.00
D1320	Tobacco counseling for the control and prevention of oral disease	0.00	0.00
D1330	Oral hygiene instructions	0.00	0.00
D1353	Sealant repair - per tooth	0.00	0.00
D1354	Interim caries arresting medicament application - per tooth	0.00	0.00
D1999	Unspecified preventive procedure, by report	0.00	0.00

D2390	Resin-based composite crown, anterior	0.00	0.00
D2410	Gold foil - one surface	0.00	0.00
D2420	Gold foil - two surfaces	0.00	0.00
D2430	Gold foil - three surfaces	0.00	0.00
D2799	Provisional crown - further treatment or completion of diagnosis necessary prior to final impression	0.00	0.00
D2921	Reattachment of tooth fragment, incisal edge or cusp	0.00	0.00
D2949	Restorative foundation for an indirect restoration	0.00	0.00
D2953	Each additional indirectly fabricated post - same tooth	0.00	0.00
D2955	Post removal	0.00	0.00
D2957	Each additional prefabricated post - same tooth	0.00	0.00
D2970	Temporary crown (fractured tooth)	0.00	0.00
D2971	Additional procedures to construct new crown under existing partial denture framework	0.00	0.00
D2975	Coping	0.00	0.00
D2999	Unspecified restorative procedure, by report	0.00	0.00
D3331	Treatment of root canal obstruction; non-surgical access	0.00	0.00
D3332	Incomplete endodontic therapy; inoperable, unrestorable or fractured tooth	0.00	0.00
D3333	Internal root repair of perforation defects	0.00	0.00
D3431	Biologic materials to aid in soft and osseous tissue regeneration in conjunction with periradicular surgery	0.00	0.00
D3460	Endodontic endosseous implant	0.00	0.00
D3470	Intentional reimplantation (including necessary splinting)	0.00	0.00
D3910	Surgical procedure for isolation of tooth with rubber dam	0.00	0.00
D3950	Canal preparation and fitting of preformed dowel or post	0.00	0.00
D3999	Unspecified endodontic procedure, by report	0.00	0.00
D4230	Anatomical crown exposure - four or more contiguous or bounded tooth spaces per quadrant	0.00	0.00
D4231	Anatomical crown exposure - one to three teeth per quadrant	0.00	0.00
D4245	Apically positioned flap	0.00	0.00

D4265	Biologic materials to aid in soft and osseous tissue regeneration	0.00	0.00
D4268	Surgical revision procedure, per tooth	0.00	0.00
D4320	Provisional splinting - intracoronal	0.00	0.00
D4321	Provisional splinting - extracoronal	0.00	0.00
D4381	Localized delivery of antimicrobial agents via controlled release vehicle into diseased crevicular tissue, per tooth	0.00	0.00
D4920	Unscheduled dressing change (by other than treating dentist or their staff)	0.00	0.00
D4921	Gingival irrigation - per quadrant	0.00	0.00
D4999	Unspecified periodontal procedure, by report	0.00	0.00
D5670	Replace all teeth and acrylic on cast metal framework (maxillary)	0.00	0.00
D5671	Replace all teeth and acrylic on cast metal framework (mandibular)	0.00	0.00
D5810	Interim complete denture (maxillary)	0.00	0.00
D5811	Interim complete denture (mandibular)	0.00	0.00
D5860	Overdenture - complete (By report)	0.00	0.00
D5861	Overdenture - partial (By report)	0.00	0.00
D5862	Precision attachment, by report	0.00	0.00
D5863	Overdenture - complete maxillary	0.00	0.00
D5864	Overdenture - partial maxillary	0.00	0.00
D5865	Overdenture - complete - mandibular	0.00	0.00
D5866	Overdenture - partial - mandibular	0.00	0.00
D5867	Replacement of replaceable part of semi-precision or precision attachment (male or female component)	0.00	0.00
D5875	Modification of removable prosthesis following implant surgery	0.00	0.00
D5899	Unspecified removable prosthodontic procedure, by report	0.00	0.00
D5911	Facial moulage (sectional)	0.00	0.00
D5912	Facial moulage (complete)	0.00	0.00
D5913	Nasal prosthesis	0.00	0.00
D5914	Auricular prosthesis	0.00	0.00



D5915	Orbital prosthesis	0.00	0.00
D5916	Obturator prosthesis, surgical	0.00	0.00
D5919	Obturator prosthesis, definitive	0.00	0.00
D5922	Obturator prosthesis, modification	0.00	0.00
D5923	Mandibular resection prosthesis with guide flange	0.00	0.00
D5924	Mandibular resection prosthesis without guide flange	0.00	0.00
D5925	Obturator prosthesis, interim	0.00	0.00
D5926	Trismus appliance (not for TMD treatment)	0.00	0.00
D5927	Auricular prosthesis, replacement	0.00	0.00
D5928	Orbital prosthesis, replacement	0.00	0.00
D5929	Facial prosthesis, replacement	0.00	0.00
D5931	Obturator prosthesis, surgical	0.00	0.00
D5932	Obturator prosthesis, definitive	0.00	0.00
D5933	Obturator prosthesis, modification	0.00	0.00
D5934	Mandibular resection prosthesis with guide flange	0.00	0.00
D5935	Mandibular resection prosthesis without guide flange	0.00	0.00
D5936	Obturator prosthesis, interim	0.00	0.00
D5937	Trismus appliance (not for TMD treatment)	0.00	0.00
D5951	Feeding aid	0.00	0.00
D5952	Speech aid prosthesis, pediatric	0.00	0.00
D5953	Speech aid prosthesis, adult	0.00	0.00
D5954	Palatal augmentation prosthesis	0.00	0.00
D5955	Palatal lift prosthesis, definitive	0.00	0.00
D5958	Palatal lift prosthesis, interim	0.00	0.00
D5959	Palatal lift prosthesis, modification	0.00	0.00
D5960	Speech aid prosthesis, modification	0.00	0.00

D5982	Surgical stent	0.00	0.00
D5983	Radiation carrier	0.00	0.00
D5984	Radiation shield	0.00	0.00
D5985	Radiation cone locator	0.00	0.00
D5986	Fluoride gel carrier	0.00	0.00
D5987	Commissure splint	0.00	0.00
D5988	Surgical splint	0.00	0.00
D5991	Vesiculobullous disease medicament carrier	0.00	0.00
D5992	Adjust maxillofacial prosthetic appliance, by report	0.00	0.00
D5993	Maintenance & cleaning of a maxillofacial prosthesis (extra or intraoral) other than required adjustments, by report	0.00	0.00
D5994	Periodontal medicament carrier with peripheral seal - laboratory processed	0.00	0.00
D5999	Unspecified maxillofacial prosthesis, by report	0.00	0.00
D6012	Surgical placement of interim implant body for transitional prosthesis: endosteal implant	0.00	0.00
D6051	Interim abutment	0.00	0.00
D6080	Implant maintenance procedures, when prostheses are removed and reinserted, including cleansing of prostheses and abutments	0.00	0.00
D6081	Scaling and debridement in the presence of inflammation of mucositis of a single implant, including clearing of the implant surfaces, without flap entry and closure	0.00	0.00
D6085	Provisional implant crown	0.00	0.00
D6091	Replacement of semi-precision or precision attachment (male or female component) of implant/abutment supported prosthesis, per attachment	0.00	0.00
D6096	Remove broken implant retaining screw	0.00	0.00
D6101	Debridement of a periimplant defect or defects surrounding a single implant, and surface cleaning of the exposed implant surfaces, including flap entry and closure	0.00	0.00
D6102	Debridement and osseous contouring of a periimplant defect; or defects surrounding a single implant, and includes surface cleaning of the exposed implant surfaces and including flap entry and closure	0.00	0.00
D6103	Bone graft for repair of periimplant defect - does not include flap entry and closure.	0.00	0.00
D6118	Implant/abutment supported interim fixed denture for edentulous arch – mandibular	0.00	0.00
D6119	Implant/abutment supported interim fixed denture for edentulous arch – maxillary	0.00	0.00
D6199	Unspecified implant procedure, by report	0.00	0.00
D6205	Pontic - indirect resin based composite	0.00	0.00

D6253	Provisional pontic - further treatment or completion of diagnosis necessary prior to final impression	0.00	0.00
D6600	Retainer inlay - porcelain/ceramic, two surfaces	0.00	0.00
D6601	Retainer inlay - porcelain/ceramic, three or more surfaces	0.00	0.00
D6602	Retainer inlay - cast high noble metal, two surfaces	0.00	0.00
D6603	Retainer inlay - cast high noble metal, three or more surfaces	0.00	0.00
D6604	Retainer inlay - cast predominantly base metal, two surfaces	0.00	0.00
D6605	Retainer inlay - cast predominantly base metal, three or more surfaces	0.00	0.00
D6606	Retainer inlay - cast noble metal, two surfaces	0.00	0.00
D6607	Retainer inlay - cast noble metal, three or more surfaces	0.00	0.00
D6608	Retainer onlay - porcelain/ceramic, two surfaces	0.00	0.00
D6609	Retainer onlay - porcelain/ceramic, three or more surfaces	0.00	0.00
D6610	Retainer onlay - cast high noble metal, two surfaces	0.00	0.00
D6611	Retainer onlay - cast high noble metal, three or more surfaces	0.00	0.00
D6612	Retainer onlay - cast predominantly base metal, two surfaces	0.00	0.00
D6613	Retainer onlay - cast predominantly base metal, three or more surfaces	0.00	0.00
D6614	Retainer onlay - cast noble metal, two surfaces	0.00	0.00
D6615	Retainer onlay - cast noble metal, three or more surfaces	0.00	0.00
D6624	Retainer inlay - titanium	0.00	0.00
D6634	Retainer onlay - titanium	0.00	0.00
D6793	Provisional retainer crown - further treatment or completion of diagnosis necessary prior to final impression	0.00	0.00
D6920	Connector bar	0.00	0.00
D6940	Stress breaker	0.00	0.00
D6950	Precision attachment	0.00	0.00
D6975	Coping	0.00	0.00
D6985	Pediatric partial denture, fixed	0.00	0.00
D6999	Unspecified fixed prosthodontic procedure, by report	0.00	0.00

D7251	Coronectomy - intentional partial tooth removal	0.00	0.00
D7261	Primary closure of a sinus perforation	0.00	0.00
D7270	Tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth	0.00	0.00
D7272	Tooth transplantation (includes reimplantation from one site to another and splinting and/or stabilization)	0.00	0.00
D7282	Mobilization of erupted or malpositioned tooth to aid eruption	0.00	0.00
D7283	Placement of device to facilitate eruption of impacted tooth	0.00	0.00
D7287	Exfoliative cytological sample collection	0.00	0.00
D7290	Surgical repositioning of teeth	0.00	0.00
D7291	Transseptal fiberotomy/supra crestal fiberotomy, by report	0.00	0.00
D7292	Placement of temporary anchorage device [screw retained plate] requiring flap; includes device removal	0.00	0.00
D7293	Placement of temporary anchorage device requiring flap; includes device removal	0.00	0.00
D7294	Placement of temporary anchorage device without flap; includes device removal	0.00	0.00
D7295	Harvest of bone for use in autogenous grafting procedures	0.00	0.00
D7296	Corticotomy – one to three teeth or tooth spaces, per quadrant	0.00	0.00
D7297	Corticotomy – four or more teeth or tooth spaces, per quadrant	0.00	0.00
D7340	Vestibuloplasty - ridge extension (secondary epithelialization)	0.00	0.00
D7350	Vestibuloplasty - ridge extension (including soft tissue grafts, muscle reattachment, revision of soft tissue attachment and management of hypertrophied and hyperplastic tissue)	0.00	0.00
D7465	Destruction of lesion(s) by physical or chemical method, by report	0.00	0.00
D7472	Removal of torus palatinus	0.00	0.00
D7473	Removal of torus mandibularis	0.00	0.00
D7485	Reduction of osseous tuberosity	0.00	0.00
D7490	Radical resection of maxilla or mandible	0.00	0.00
D7530	Removal of foreign body from mucosa, skin, or subcutaneous alveolar tissue	0.00	0.00
D7540	Removal of reaction producing foreign bodies, musculoskeletal system	0.00	0.00
D7550	Partial ostectomy/sequestrectomy for removal of non-vital bone	0.00	0.00
D7560	Maxillary sinusotomy for removal of tooth fragment or foreign body	0.00	0.00

D7610	Maxilla - open reduction (teeth immobilized, if present)	0.00	0.00
D7620	Maxilla - closed reduction (teeth immobilized, if present)	0.00	0.00
D7630	Mandible - open reduction (teeth immobilized, if present)	0.00	0.00
D7640	Mandible - closed reduction (teeth immobilized, if present)	0.00	0.00
D7650	Malar and/or zygomatic arch - open reduction	0.00	0.00
D7660	Malar and/or zygomatic arch - closed reduction	0.00	0.00
D7670	Alveolus - closed reduction, may include stabilization of teeth	0.00	0.00
D7671	Alveolus - open reduction, may include stabilization of teeth	0.00	0.00
D7680	Facial bones - complicated reduction with fixation and multiple surgical approaches	0.00	0.00
D7710	Maxilla - open reduction	0.00	0.00
D7720	Maxilla - closed reduction	0.00	0.00
D7730	Mandible - open reduction	0.00	0.00
D7740	Mandible - closed reduction	0.00	0.00
D7750	Malar and/or zygomatic arch - open reduction	0.00	0.00
D7760	Malar and/or zygomatic arch - closed reduction	0.00	0.00
D7770	Alveolus - open reduction stabilization of teeth	0.00	0.00
D7771	Alveolus - closed reduction stabilization of teeth	0.00	0.00
D7780	Facial bones - complicated reduction with fixation and multiple surgical approaches	0.00	0.00
D7810	Open reduction of dislocation	0.00	0.00
D7820	Closed reduction of dislocation	0.00	0.00
D7830	Manipulation under anesthesia	0.00	0.00
D7840	Condylectomy	0.00	0.00
D7850	Surgical discectomy, with/without implant	0.00	0.00
D7852	Disc repair	0.00	0.00
D7854	Synovectomy	0.00	0.00
D7856	Myotomy	0.00	0.00

D7858	Joint reconstruction	0.00	0.00
D7860	Arthrotomy	0.00	0.00
D7865	Arthroplasty	0.00	0.00
D7870	Arthrocentesis	0.00	0.00
D7871	Non-arthroscopic lysis and lavage	0.00	0.00
D7872	Arthroscopy - diagnosis, with or without biopsy	0.00	0.00
D7873	Arthroscopy lavage and lysis of adhesions	0.00	0.00
D7874	Arthroscopy: disc repositioning and stabilization	0.00	0.00
D7875	Arthroscopy synovectomy	0.00	0.00
D7876	Arthroscopy : discectomy	0.00	0.00
D7877	Arthroscopy : debridement	0.00	0.00
D7880	Occlusal orthotic device, by report	0.00	0.00
D7881	Occlusal orthotic device adjustment	0.00	0.00
D7899	Unspecified TMD therapy, by report	0.00	0.00
D7910	Suture of recent small wounds up to 5 cm	0.00	0.00
D7911	Complicated suture - up to 5 cm	0.00	0.00
D7912	Complicated suture - greater than 5 cm	0.00	0.00
D7920	Skin graft (identify defect covered, location and type of graft)	0.00	0.00
D7921	Collection and application of autologous blood concentrate product	0.00	0.00
D7940	Osteoplasty (for orthognathic deformities)	0.00	0.00
D7941	Osteotomy - mandibular rami	0.00	0.00
D7943	Osteotomy - mandibular rami with bone graft; includes obtaining the graft	0.00	0.00
D7944	Osteotomy - segmented or subapical	0.00	0.00
D7945	Osteotomy - body of mandible	0.00	0.00
D7946	LeFort I (maxilla - total)	0.00	0.00
D7947	LeFort I (maxilla - segmented)	0.00	0.00

D7948	LeFort II or LeFort III (osteoplasty of facial bone for midface hypoplasia or retrusion)-without bone graft	0.00	0.00
D7949	LeFort II or LeFort III - with bone graft	0.00	0.00
D7950	Osseous, osteoperiosteal, or cartilage graft of the mandible or maxilla - autogenous or nonautogenous, by report	0.00	0.00
D7951	Sinus augmentation with bone or bone substitutes via a lateral open approach	0.00	0.00
D7952	Sinus augmentation via a vertical approach	0.00	0.00
D7955	Repair of maxillofacial soft and/or hard tissue defect	0.00	0.00
D7972	Surgical reduction of fibrous tuberosity	0.00	0.00
D7979	Non – surgical sialolithotomy	0.00	0.00
D7980	Surgical sialolithotomy	0.00	0.00
D7981	Excision of salivary gland, by report	0.00	0.00
D7982	Sialodochoplasty	0.00	0.00
D7983	Closure of salivary fistula	0.00	0.00
D7990	Emergency tracheotomy	0.00	0.00
D7991	Coronoidectomy	0.00	0.00
D7995	Synthetic graft - mandible or facial bones, by report	0.00	0.00
D7996	Implant - mandible for augmentation purposes (excluding alveolar ridge), by report	0.00	0.00
D7997	Appliance removal (not by dentist who placed appliance), includes removal of archbar	0.00	0.00
D7998	Intraoral placement of a fixation device not in conjunction with a fracture	0.00	0.00
D7999	Unspecified oral surgery procedure, by report	0.00	0.00
D8691	Repair of orthodontic appliance	0.00	0.00
D8692	Replacement of lost or broken retainer	0.00	0.00
D8694	Repair of fixed retainers, includes reattachment	0.00	0.00
D8695	Removal of fixed orthodontic appliances for reasons other than completion of treatment	0.00	0.00
D8999	Unspecified orthodontic procedure, by report	0.00	0.00
D9120	Fixed partial denture sectioning	0.00	0.00
D9210	Local anesthesia not in conjunction with operative or surgical procedures	0.00	0.00

D9211	Regional block anesthesia	0.00	0.00
D9212	Trigeminal division block anesthesia	0.00	0.00
D9215	Local anesthesia in conjunction with operative or surgical procedures	0.00	0.00
D9219	Evaluation for deep sedation or general anesthesia	0.00	0.00
D9230	Inhalation of nitrous oxide/analgesia, anxiolysis	0.00	0.00
D9248	Non-intravenous conscious sedation This includes non-iv minimal and moderate sedation.	0.00	0.00
D9311	Consultation with a medical health care professional	0.00	0.00
D9410	House/extended care facility call	0.00	0.00
D9420	Hospital or ambulatory surgical center call	0.00	0.00
D9430	Office visit for observation (during regularly scheduled hours) - no other services performed	0.00	0.00
D9440	Office visit - after regularly scheduled hours	0.00	0.00
D9450	Case presentation, detailed and extensive treatment planning	0.00	0.00
D9630	Other drugs and/or medicaments dispensed in the office for home use by report	0.00	0.00
D9910	Application of desensitizing medicaments	0.00	0.00
D9911	Application of desensitizing resin for cervical and/or root surface, per tooth	0.00	0.00
D9920	Behavior management, by report	0.00	0.00
D9930	Treatment of complications (post-surgical_ - unusual circumstances, by report	0.00	0.00
D9931	Cleaning and inspection of a removable appliance	0.00	0.00
D9932	Cleaning and inspection of a removable complete denture, maxillary This procedure does not include any adjustments	0.00	0.00
D9933	Cleaning and inspection of a removable complete denture, mandibular This procedure does not include any adjustments	0.00	0.00
D9934	Cleaning and inspection of a removable partial denture, maxillary This procedure does not include any adjustments	0.00	0.00
D9935	Cleaning and inspection of a removable partial denture, mandibular This procedure does not include any adjustments	0.00	0.00
D9940	Occlusal guard, by report	0.00	0.00
D9941	Fabrication of athletic mouthguard	0.00	0.00
D9942	Repair and/or reline of an occlusal guard	0.00	0.00
D9943	Occlusal guard adjustment	0.00	0.00



D9950	Occlusal analysis - mounted case	0.00	0.00
D9970	Enamel microabrasion	0.00	0.00
D9971	Odontoplasty 1-2 teeth; includes removal of enamel projections	0.00	0.00
D9972	External bleaching - per arch - performed in office	0.00	0.00
D9973	External bleaching - per tooth	0.00	0.00
D9974	Internal bleaching - per tooth	0.00	0.00
D9975	External bleaching for home application, per arch; includes materials and fabrication of custom trays	0.00	0.00
D9985	Sales tax	0.00	0.00
D9986	Missed appointment	0.00	0.00
D9987	Cancelled appointment	0.00	0.00
D9991	dental case management - addressing appointment compliance barriers	0.00	0.00
D9992	dental case management - care coordination	0.00	0.00
D9993	dental case management - motivational interviewing	0.00	0.00
D9994	dental case management - patient education to improve oral health literacy	0.00	0.00
D9995	Teledentistry – synchronous; real-time encounter	0.00	0.00
D9996	Teledentistry – asynchronous; information stored and forwarded to dentist for subsequent review	0.00	0.00
D9999	Unspecified adjunctive procedure, by report	0.00	0.00