

Gulf Coast Dental Network Fee Schedule

EXHIBIT C

* An allowed amount next to a code does not indicate that procedure is covered by a particular dental plan. To verify coverage and benefits please contact the Third Party Administrator that handles the dental plan. Benefits for each employer group are different.

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CODE	SCHEDULE	DESCRIPTION	NOTES
D0120	\$35.00	periodic oral evaluation - established patient	Revised CDT - 2007 Nomenclature or Descriptor. An evaluation performed on a patient of record to determine any changes in the patient's dental and medical health status since a previous comprehensive or periodic evaluation. This includes an oral cancer
D0140	\$52.00	limited oral evaluation - problem focused	An evaluation limited to a specific oral health problem or complaint. This may require interpretation of information acquired through additional diagnostic procedures. Report additional diagnostic procedures separately. Definitive procedures may be re
D0145	\$48.00	oral evaluation for a patient under three years of age and counseling with primary caregiver	New CDT-2007. Diagnostic and preventive services performed for a child under the age of three, preferably within the first six months of the eruption of the first primary tooth, including recording the oral and physical health history, evaluation of cari
D0150	\$60.00	comprehensive oral evaluation - new or established patient	Revised CDT - 2007 Nomenclature or Descriptor. Used by a general dentist and/or a specialist when evaluating a patient comprehensively. This applies to new patients; established patients who have had a significant change in health conditions or other u
D0160	\$100.00	detailed and extensive oral evaluation - problem focused, by report	A detailed and extensive problem focused evaluation entails extensive diagnostic and cognitive modalities based on the findings of a comprehensive oral evaluation. Integration of more extensive diagnostic modalities to develop a treatment plan for a spec
D0170	\$48.00	re-evaluation - limited, problem focused (established patient; not post-operative visit)	Assessing the status of a previously existing condition. For example: - a traumatic injury where no treatment was rendered but patient needs follow-up monitoring; - evaluation for undiagnosed continuing pain; - soft tissue lesion requiring follow-up
D0180	\$64.00	comprehensive periodontal evaluation - new or established patient	Revised CDT - 2007 Nomenclature or Descriptor. This procedure is indicated for patients showing signs or symptoms of periodontal disease and for patients with risk factors such as smoking or diabetes. It includes evaluation of periodontal conditions, p
D0210	\$94.00	intraoral - complete series (including bitewings)	
D0220	\$21.00	intraoral - periapical first film	
D0230	\$17.00	intraoral - periapical each additional film	
D0240	\$30.00	intraoral - occlusal film	
D0250	\$43.00	extraoral - first film	
D0260	\$36.00	extraoral - each additional film	
D0270	\$21.00	bitewing - single film	
D0272	\$33.00	bitewings - two films	
D0273	\$39.00	bitewings - three films	New CDT-2007.
D0274	\$46.00	bitewings - four films	
D0277	\$70.00	vertical bitewings - 7 to 8 films	This does not constitute a full mouth intraoral radiographic series.
D0290	\$91.00	posterior-anterior or lateral skull and facial bone survey film	
D0310	\$169.00	sialography	
D0320	\$389.00	temporomandibular joint arthrogram, including injection	
D0321	\$149.00	other temporomandibular joint films, by report	
D0322	\$324.00	tomographic survey	
D0330	\$82.00	panoramic film	
D0340	\$94.00	cephalometric film	
D0350	\$50.00	oral/facial photographic images	This includes photographic images, including those obtained by intraoral and extraoral cameras, excluding radiographic images. These photographic images should be a part of the patient's clinical record
D0360	\$308.00	cone beam ct - craniofacial data capture	New CDT-2007. Includes axial, coronal and sagittal data.
D0362	\$145.00	cone beam - two-dimensional image reconstruction using existing data, includes multiple images	New CDT-2007.
D0363	\$164.00	cone beam - three-dimensional image reconstruction using existing data, includes multiple images	New CDT-2007.
D0415	\$109.00	collection of microorganisms for culture and sensitivity	
D0416	\$92.00	viral culture	A diagnostic test to identify viral organisms, most often herpes virus.
D0421	\$74.00	genetic test for susceptibility to oral diseases	Sample collection for the purpose of certified laboratory analysis to detect specific genetic variations associated with increased susceptibility for oral diseases such as severe periodontal disease.
D0425	\$69.00	caries susceptibility tests	Not to be used for carious dentin staining.
D0431	\$45.00	adjunctive pre-diagnostic test that aids in detection of mucosal abnormalities including premalignant and malignant lesions, not to include cytology or biopsy procedures	
D0460	\$41.00	pulp vitality tests	Includes multiple teeth and contra lateral comparison(s), as indicated.
D0470	\$77.00	diagnostic casts	Also known as diagnostic models or study models.
D0472	\$71.00	accession of tissue, gross examination, preparation and transmission of written report	Revised CDT - 2007 Nomenclature or Descriptor. To be used in reporting architecturally intact tissue obtained by invasive means.
D0473	\$94.00	accession of tissue, gross and microscopic examination, preparation and transmission of written report	Revised CDT - 2007 Nomenclature or Descriptor. To be used in reporting architecturally intact tissue obtained by invasive means.

D0474	\$116.00	accession of tissue, gross and microscopic examination, including assessment of surgical margins for presence of disease, preparation and transmission of written report	Revised CDT - 2007 Nomenclature or Descriptor. To be used in reporting architecturally intact tissue obtained by invasive means.
D0475	\$128.00	decalcification procedure	Procedure in which hard tissue is processed in order to allow sectioning and subsequent microscopic examination.
D0476	\$204.00	special stains for microorganisms	Procedure in which additional stains are applied to biopsy or surgical specimen in order to identify microorganisms.
D0477	\$214.00	special stains, not for microorganisms	Procedure in which additional stains are applied to a biopsy or surgical specimen in order to identify such things as melanin, mucin, iron, glycogen, etc.
D0478	\$110.00	immunohistochemical stains	A procedure in which specific antibody based reagents are applied to tissue samples in order to facilitate diagnosis.
D0479	\$149.00	tissue in-situ hybridization, including interpretation	A procedure which allows for the identification of nucleic acids, DNA and RNA, in the tissue sample in order to aid in the diagnosis of microorganisms and tumors.
D0480	\$117.00	accession of exfoliative cytologic smears, microscopic examination, preparation and transmission of written report	Revised CDT - 2007 Nomenclature or Descriptor. To be used in reporting disaggregated, non-transepithelial cell cytology sample via mild scraping of the oral mucosa.
D0481	\$118.00	electron microscopy - diagnostic	An extreme high magnification diagnostic procedure that enables identification of cell components and microorganisms that are otherwise not identifiable under light microscopy.
D0482	\$65.00	direct immunofluorescence	A technique used to identify immunoreactants which are localized to the patient's skin or mucous membranes.
D0483	\$75.00	indirect immunofluorescence	A technique used to identify circulating immunoreactants.
D0484	\$106.00	consultation on slides prepared elsewhere	A service provided in which microscopic slides of a biopsy specimen prepared at another laboratory are evaluated to aid in the diagnosis of a difficult case or to offer a consultative opinion at the patient's request. The findings are delivered by writt
D0485	\$109.00	consultation, including preparation of slides from biopsy material supplied by referring source	A service that requires the consulting pathologist to prepare the slides as well as render a written report. The slides are evaluated to aid in the diagnosis of a difficult case or to offer a consultative opinion at the patient's request.
D0486	\$104.00	accession of brush biopsy sample, microscopic examination, preparation and transmission of written report	New CDT-2007. To be used in reporting transepithelial, disaggregated cell samples by brush biopsy technique.
D0502	\$121.00	other oral pathology procedures, by report	
D0999	By Report	unspecified diagnostic procedure, by report	Used for procedure that is not adequately described by a code. Describe procedure.
D1110	\$67.00	prophylaxis - adult	Removal of plaque, calculus and stains from the tooth structures in the permanent and transitional dentition. It is intended to control local irritational factors.
D1120	\$47.00	prophylaxis - child	Removal of plaque, calculus and stains from the tooth structures in the primary and transitional dentition. It is intended to control local irritational factors.
D1203	\$27.00	topical application of fluoride (prophylaxis not included) - child	Used when reporting prophylaxis and fluoride procedures separately.
D1204	\$27.00	topical application of fluoride (prophylaxis not included) - adult	Used when reporting prophylaxis and fluoride procedures separately.
D1206	\$28.00	topical fluoride varnish; therapeutic application for moderate to high caries risk patients	New CDT-2007. Application of topical fluoride varnish, delivered in a single visit and involving the entire oral cavity. Not to be used for desensitization.
D1310	\$50.00	nutritional counseling for control of dental disease	Counseling on food selection and dietary habits as a part of treatment and control of periodontal disease and caries.
D1320	\$55.00	tobacco counseling for the control and prevention of oral disease	Tobacco prevention and cessation services reduce patient risks of developing tobacco-related oral diseases and conditions and improves prognosis for certain dental therapies.
D1330	\$37.00	oral hygiene instructions	This may include instructions for home care. Examples include tooth brushing technique, flossing, use of special oral hygiene aids.
D1351	\$40.00	sealant - per tooth	Mechanically and/or chemically prepared enamel surface sealed to prevent decay.
D1510	\$234.00	space maintainer - fixed - unilateral	
D1515	\$328.00	space maintainer - fixed - bilateral	
D1520	\$290.00	space maintainer - removable - unilateral	
D1525	\$361.00	space maintainer - removable - bilateral	
D1550	\$60.00	re-cementation of space maintainer	
D1555	\$54.00	removal of fixed space maintainer	New CDT-2007. Procedure delivered by dentist who did not originally place the appliance, or by the practice where the appliance was originally delivered to the patient.
D2140	\$92.00	amalgam - one surface, primary or permanent	
D2150	\$119.00	amalgam - two surfaces, primary or permanent	
D2160	\$142.00	amalgam - three surfaces, primary or permanent	
D2161	\$170.00	amalgam - four or more surfaces, primary or permanent	
D2330	\$112.00	resin-based composite - one surface, anterior	
D2331	\$141.00	resin-based composite - two surfaces, anterior	
D2332	\$173.00	resin-based composite - three surfaces, anterior	
D2335	\$217.00	resin-based composite - four or more surfaces or involving incisal angle (anterior)	Incisal angle to be defined as one of the angles formed by the junction of the incisal and the mesial or distal surface of an anterior tooth.
D2390	\$311.00	resin-based composite crown, anterior	Full resin-based composite coverage of tooth.
D2391	\$127.00	resin-based composite - one surface, posterior	Used to restore a carious lesion into the dentin or a deeply eroded area into the dentin. Not a preventive procedure.
D2392	\$166.00	resin-based composite - two surfaces, posterior	
D2393	\$207.00	resin-based composite - three surfaces, posterior	
D2394	\$239.00	resin-based composite - four or more surfaces, posterior	
D2410	\$388.00	gold foil - one surface	
D2420	\$454.00	gold foil - two surfaces	
D2430	\$534.00	gold foil - three surfaces	
D2510	\$568.00	inlay - metallic - one surface	

D2520	\$633.00	inlay - metallic - two surfaces	
D2530	\$688.00	inlay - metallic - three or more surfaces	
D2542	\$708.00	onlay - metallic-two surfaces	
D2543	\$746.00	onlay - metallic-three surfaces	
D2544	\$771.00	onlay - metallic-four or more surfaces	
D2610	\$638.00	inlay - porcelain/ceramic - one surface	
D2620	\$696.00	inlay - porcelain/ceramic - two surfaces	
D2630	\$746.00	inlay - porcelain/ceramic - three or more surfaces	
D2642	\$764.00	onlay - porcelain/ceramic - two surfaces	
D2643	\$792.00	onlay - porcelain/ceramic - three surfaces	
D2644	\$816.00	onlay - porcelain/ceramic - four or more surfaces	
D2650	\$597.00	inlay - resin-based composite - one surface	
D2651	\$645.00	inlay - resin-based composite - two surfaces	
D2652	\$681.00	inlay - resin-based composite - three or more surfaces	
D2662	\$706.00	onlay - resin-based composite - two surfaces	
D2663	\$730.00	onlay - resin-based composite - three surfaces	
D2664	\$754.00	onlay - resin-based composite - four or more surfaces	
D2710	\$615.00	crown - resin-based composite (indirect)	Unfilled or non-reinforced resin crowns should be reported using D2999.
D2712	\$756.00	crown - _ resin-based composite (indirect)	This code does not include facial veneers.
D2720	\$789.00	crown - resin with high noble metal	
D2721	\$721.00	crown - resin with predominantly base metal	
D2722	\$755.00	crown - resin with noble metal	
D2740	\$841.00	crown - porcelain/ceramic substrate	
D2750	\$821.00	crown - porcelain fused to high noble metal	
D2751	\$749.00	crown - porcelain fused to predominantly base metal	
D2752	\$784.00	crown - porcelain fused to noble metal	
D2780	\$807.00	crown - 3/4 cast high noble metal	
D2781	\$757.00	crown - 3/4 cast predominantly base metal	
D2782	\$784.00	crown - 3/4 cast noble metal	
D2783	\$824.00	crown - 3/4 porcelain/ceramic	This code does not include facial veneers.
D2790	\$811.00	crown - full cast high noble metal	
D2791	\$731.00	crown - full cast predominantly base metal	
D2792	\$777.00	crown - full cast noble metal	
D2794	\$789.00	crown - titanium	
D2799	\$283.00	provisional crown	Crown utilized as an interim restoration of at least six months duration during restorative treatment to allow adequate time for healing or completion of other procedures. This includes, but is not limited to changing vertical dimension, completing peri
D2910	\$80.00	recement inlay, onlay, or partial coverage restoration	
D2915	\$83.00	recement cast or prefabricated post and core	
D2920	\$80.00	recement crown	
D2930	\$199.00	prefabricated stainless steel crown - primary tooth	
D2931	\$237.00	prefabricated stainless steel crown - permanent tooth	
D2932	\$254.00	prefabricated resin crown	
D2933	\$269.00	prefabricated stainless steel crown with resin window	Open-face stainless steel crown with aesthetic resin facing or veneer.
D2934	\$288.00	prefabricated esthetic coated stainless steel crown - primary tooth	Stainless steel primary crown with exterior esthetic coating.
D2940	\$82.00	sedative filling	Temporary restoration intended to relieve pain. Not to be used as a base or liner under a restoration.
D2950	\$199.00	core buildup, including any pins	Refers to building up of anatomical crown when restorative crown will be placed, whether or not pins are used. A material is placed in the tooth preparation for a crown when there is insufficient tooth strength and retention for the crown procedure. Th
D2951	\$49.00	pin retention - per tooth, in addition to restoration	
D2952	\$313.00	post and core in addition to crown, indirectly fabricated	Revised CDT - 2007 Nomenclature or Descriptor. Post and core are custom fabricated as a single unit.
D2953	\$210.00	each additional indirectly fabricated post - same tooth	Revised CDT - 2007 Nomenclature or Descriptor. To be used with D2952.
D2954	\$249.00	prefabricated post and core in addition to crown	Core is built around a prefabricated post. This procedure includes the core material.
D2955	\$215.00	post removal (not in conjunction with endodontic therapy)	For removal of posts (e.g., fractured posts) not to be used in conjunction with endodontic retreatment (D3346, D3347, D3348).
D2957	\$108.00	each additional prefabricated post - same tooth	To be used with D2954.
D2960	\$423.00	labial veneer (resin laminate) - chairside	Refers to labial/facial direct resin bonded veneers.
D2961	\$665.00	labial veneer (resin laminate) - laboratory	Refers to labial/facial indirect resin bonded veneers.
D2962	\$780.00	labial veneer (porcelain laminate) - laboratory	Refers also to facial veneers that extend interproximally and/or cover the incisal edge. Porcelain/ceramic veneers presently include all ceramic and porcelain veneers.
D2970	\$255.00	temporary crown (fractured tooth)	New CDT-2007. Usually a preformed artificial crown, which is fitted over a damaged tooth as an immediate protective device. This is not to be used as temporization during crown fabrication.
D2971	By Report	additional procedures to construct new crown under existing partial denture framework	To be reported in addition to a crown code.

D2975	\$401.00	coping	A thin covering of the remaining portion of a tooth, usually fabricated of metal and devoid of anatomic contour. This is to be used as a definitive restoration.
D2980	\$203.00	crown repair, by report	Includes removal of crown, if necessary. Describe procedure.
D2999	By Report	unspecified restorative procedure, by report	Use for procedure that is not adequately described by a code. Describe procedure.
D3110	\$59.00	pulp cap - direct (excluding final restoration)	Procedure in which the exposed pulp is covered with a dressing or cement that protects the pulp and promotes healing and repair.
D3120	\$59.00	pulp cap - indirect (excluding final restoration)	Revised CDT - 2007 Nomenclature or Descriptor. Procedure in which the nearly exposed pulp is covered with a protective dressing to protect the pulp from additional injury and to promote healing and repair via formation of secondary dentin. This code is
D3220	\$139.00	therapeutic pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinoenamel junction and application of medicament	Pulpotomy is the surgical removal of a portion of the pulp with the aim of maintaining the vitality of the remaining portion by means of an adequate dressing. - To be performed on primary or permanent teeth. - This is not to be construed as the first
D3221	\$153.00	pulpal debridement, primary and permanent teeth	Pulpal debridement for the relief of acute pain prior to conventional root canal therapy. This procedure is not to be used when endodontic treatment is completed on the same day.
D3230	\$189.00	pulpal therapy (resorbable filling) - anterior, primary tooth (excluding final restoration)	Primary incisors and cuspids.
D3240	\$219.00	pulpal therapy (resorbable filling) - posterior, primary tooth (excluding final restoration)	Primary first and second molars.
D3310	\$522.00	anterior (excluding final restoration)	
D3320	\$622.00	bicuspid (excluding final restoration)	
D3330	\$761.00	molar (excluding final restoration)	
D3331	\$313.00	treatment of root canal obstruction; non-surgical access	Revised CDT - 2007 Nomenclature or Descriptor. In lieu of surgery, the formation of a pathway to achieve an apical seal without surgical intervention because of a non-negotiable root canal blocked by foreign bodies, included but not limited to separated
D3332	\$297.00	incomplete endodontic therapy; inoperable, unrestorable or fractured tooth	Considerable time is necessary to determine diagnosis and/or provide initial treatment before the fracture makes the tooth unretainable.
D3333	\$192.00	internal root repair of perforation defects	Non-surgical seal of perforation caused by resorption and/or decay but not iatrogenic by provider filing claim.
D3346	\$598.00	retreatment of previous root canal therapy - anterior	
D3347	\$689.00	retreatment of previous root canal therapy - bicuspid	
D3348	\$831.00	retreatment of previous root canal therapy - molar	
D3351	\$257.00	apexification/recalcification - initial visit (apical closure/calific repair of perforations, root resorption, etc.)	Includes opening tooth, pulpectomy, preparation of canal spaces, first placement of medication and necessary radiographs. (This procedure includes first phase of complete root canal therapy.)
D3352	\$185.00	apexification/recalcification - interim medication replacement (apical closure/calific repair of perforations, root resorption, etc.)	For visits in which the intra-canal medication is replaced with new medication and necessary radiographs. There may be several of these visits.
D3353	\$363.00	apexification/recalcification - final visit (includes completed root canal therapy - apical closure/calific repair of perforations, root resorption, etc.)	Includes removal of intra-canal medication and procedures necessary to place final root canal filling material including necessary radiographs. (This procedure includes last phase of complete root canal therapy.)
D3410	\$482.00	apicoectomy/periradicular surgery - anterior	For surgery on root of anterior tooth. Does not include placement of retrograde filling material.
D3421	\$547.00	apicoectomy/periradicular surgery - bicuspid (first root)	For surgery on one root of a bicuspid. Does not include placement of retrograde filling material. If more than one root is treated, see D3426.
D3425	\$632.00	apicoectomy/periradicular surgery - molar (first root)	For surgery on one root of a molar tooth. Does not include placement of retrograde filling material. If more than one root is treated, see D3426.
D3426	\$249.00	apicoectomy/periradicular surgery (each additional root)	Typically used for bicuspids and molar surgeries when more than one root is treated during the same procedure. This does not include retrograde filling material placement.
D3430	\$189.00	retrograde filling - per root	For placement of retrograde filling material during periradicular surgery procedures. If more than one filling is placed in one root - report as D3999 and describe.
D3450	\$349.00	root amputation - per root	Root resection of a multi-rooted tooth while leaving the crown. If the crown is sectioned, see D3920.
D3460	\$862.00	endodontic endosseous implant	Placement of implant material, which extends from a pulpal space into the bone beyond the end of the root.
D3470	\$597.00	intentional reimplantation (including necessary splinting)	For the intentional removal, inspection and treatment of the root and replacement of a tooth into its own socket. T his does not include necessary retrograde filling material placement.
D3910	\$139.00	surgical procedure for isolation of tooth with rubber dam	
D3920	\$336.00	hemisection (including any root removal), not including root canal therapy	Includes separation of a multi-rooted tooth into separate sections containing the root and the overlying portion of the crown. It may also include the removal of one or more of those sections.
D3950	\$180.00	canal preparation and fitting of preformed dowel or post	Should not be reported in conjunction with D2952, D2953, D2954 or D2957 by the same practitioner.
D3999	By Report	unspecified endodontic procedure, by report	Used for procedure that is not adequately described by a code. Describe procedure.
D4210	\$458.00	gingivectomy or gingivoplasty - four or more contiguous teeth or bounded teeth spaces per quadrant	Revised CDT - 2007 Nomenclature or Descriptor. Involves the excision of the soft tissue wall of the periodontal pocket by either an external or an internal bevel. It is performed to eliminate suprabony pockets after adequate initial preparation, to all
D4211	\$169.00	gingivectomy or gingivoplasty - one to three contiguous teeth or bounded teeth spaces per quadrant	Revised CDT - 2007 Nomenclature or Descriptor. Involves the excision of the soft tissue wall of the periodontal pocket by either an external or an internal bevel. It is performed to eliminate suprabony pockets after adequate initial preparation, to all
D4230	\$433.00	anatomical crown exposure - four or more contiguous teeth per quadrant	New CDT-2007. This procedure is utilized in an otherwise periodontally healthy area to remove enlarged gingival tissue and supporting bone (ostectomy) to provide an anatomically correct gingival relationship.
D4231	\$408.00	anatomical crown exposure - one to three teeth per quadrant	New CDT-2007. This procedure is utilized in an otherwise periodontally healthy area to remove enlarged gingival tissue and supporting bone (ostectomy) to provide an anatomically correct gingival relationship.
D4240	\$542.00	gingival flap procedure, including root planing - four or more contiguous teeth or bounded teeth spaces per quadrant	Revised CDT - 2007 Nomenclature or Descriptor. A soft tissue flap is reflected or resected to allow debridement of the root surface and the removal of granulation tissue. Osseous recontouring is not accomplished in conjunction with this procedure. May
D4241	\$453.00	gingival flap procedure, including root planing - one to three contiguous teeth or bounded teeth spaces per quadrant	Revised CDT - 2007 Nomenclature or Descriptor. A soft tissue flap is reflected or resected to allow debridement of the root surface and the removal of granulation tissue. Osseous recontouring is not accomplished in conjunction with this procedure. May
D4245	\$640.00	apically positioned flap	Procedure is used to preserve keratinized gingiva in conjunction with osseous resection and second stage implant procedure. Procedure may also be used to preserve keratinized/attached gingiva during surgical exposure of labially impacted teeth, and may

D4249	\$547.00	clinical crown lengthening - hard tissue	This procedure is employed to allow restorative procedure or crown with little or no tooth structure exposed to the oral cavity. Crown lengthening requires reflection of a flap and is performed in a healthy periodontal environment, as opposed to osseous
D4260	\$781.00	osseous surgery (including flap entry and closure) - four or more contiguous teeth or bounded teeth spaces per quadrant	Revised CDT - 2007 Nomenclature or Descriptor. This procedure modifies the bony support of the teeth by reshaping the alveolar process to achieve a more physiologic form. This may include the removal of supporting bone (ostectomy) and/or non-supporting
D4261	\$642.00	osseous surgery (including flap entry and closure) - one to three contiguous teeth or bounded teeth spaces per quadrant	Revised CDT - 2007 Nomenclature or Descriptor. This procedure modifies the bony support of the teeth by reshaping the alveolar process to achieve a more physiologic form. This may include the removal of supporting bone (ostectomy) and/or non-supporting
D4263	\$462.00	bone replacement graft - first site in quadrant	Revised CDT - 2007 Nomenclature or Descriptor. This procedure involves the use of osseous autografts, osseous allografts, or non-osseous grafts to stimulate periodontal regeneration when the disease process has led to a deformity of the bone. This proc
D4264	\$348.00	bone replacement graft - each additional site in quadrant	Revised CDT - 2007 Nomenclature or Descriptor. This procedure involves the use of osseous autografts, osseous allografts, or non-osseous grafts to stimulate periodontal regeneration when the disease process has led to a deformity of the bone. This proc
D4265	\$333.00	biologic materials to aid in soft and osseous tissue regeneration	Revised CDT - 2007 Nomenclature or Descriptor. Biologic materials may be used alone or with other regenerative substrates such as bone and barrier membranes, depending upon their formulation and the presentation of the periodontal defect. This procedur
D4266	\$627.00	guided tissue regeneration - resorbable barrier, per site	Revised CDT - 2007 Nomenclature or Descriptor. A membrane is placed over the root surfaces or defect area following surgical exposure and debridement. The mucoperiosteal flaps are then adapted over the membrane and sutured. The membrane is placed to ex
D4267	\$731.00	guided tissue regeneration - nonresorbable barrier, per site (includes membrane removal)	Revised CDT - 2007 Nomenclature or Descriptor. This procedure is used to regenerate lost or injured periodontal tissue by directing differential tissue responses. A membrane is placed over the root surfaces or defect area following surgical exposure an
D4268	\$592.00	surgical revision procedure, per tooth	This procedure is to refine the results of a previously provided surgical procedure. This may require a surgical procedure to modify the irregular contours of hard or soft tissue. A mucoperiosteal flap may be elevated to allow access to reshape alveola
D4270	\$602.00	pedicle soft tissue graft procedure	A pedicle flap of gingiva can be raised from an edentulous ridge, adjacent teeth, or from the existing gingiva on the tooth and moved laterally or coronally to replace alveolar mucosa as marginal tissue. The procedure can be used to cover an exposed roo
D4271	\$646.00	free soft tissue graft procedure (including donor site surgery)	Gingival or masticatory mucosa is grafted to create or augment the gingiva at another site, with or without root coverage. This graft may also be used to eliminate the pull of frena and muscle attachments, to extend the vestibular fornix, and to correct
D4273	\$796.00	subepithelial connective tissue graft procedures, per tooth	This procedure is performed to create or augment gingiva, to obtain root coverage to eliminate sensitivity and to prevent root caries, to eliminate frenum pull, to extend the vestibular fornix, to augment collapsed ridges, to provide an adequate gingival
D4274	\$497.00	distal or proximal wedge procedure (when not performed in conjunction with surgical procedures in the same anatomical area)	This procedure is performed in an edentulous area adjacent to a periodontally involved tooth. Gingival incisions are utilized to allow removal of a tissue wedge to gain access and correct the underlying osseous defect and to permit close flap adaptation.
D4275	\$740.00	soft tissue allograft	Procedure is performed to create or augment the gingiva, with or without root coverage. This may be used to eliminate the pull of the frena and muscle attachments, to extend the vestibular fornix, and correct localized gingival recession. There is no do
D4276	\$845.00	combined connective tissue and double pedicle graft, per tooth	Advanced gingival recession often cannot be corrected with a single procedure. Combined tissue grafting procedures are needed to achieve the desired outcome.
D4320	\$368.00	provisional splinting - intracoronal	This is an interim stabilization of mobile teeth. A variety of methods and appliances may be employed for this purpose. Identify the teeth involved and the nature of the splint.
D4321	\$336.00	provisional splinting - extracoronal	This is an interim stabilization of mobile teeth. A variety of methods and appliances may be employed for this purpose. Identify the teeth involved and the nature of the splint.
D4341	\$189.00	periodontal scaling and root planing - four or more teeth per quadrant	This procedure involves instrumentation of the crown and root surfaces of the teeth to remove plaque and calculus from these surfaces. It is indicated for patients with periodontal disease and is therapeutic, not prophylactic, in nature. Root planing i
D4342	\$118.00	periodontal scaling and root planing - one to three teeth per quadrant	This procedure involves instrumentation of the crown and root surfaces of the teeth to remove plaque and calculus from these surfaces. It is indicated for patients with periodontal disease and is therapeutic, not prophylactic, in nature. Root planing
D4355	\$135.00	full mouth debridement to enable comprehensive evaluation and diagnosis	The gross removal of plaque and calculus that interfere with the ability of the dentist to perform a comprehensive oral evaluation. This preliminary procedure does not preclude the need for additional procedures.
D4381	\$115.00	localized delivery of antimicrobial agents via a controlled release vehicle into diseased crevicular tissue, per tooth, by report	FDA approved subgingival delivery devices containing antimicrobial medication(s) are inserted into periodontal pockets to suppress the pathogenic microbiota. These devices slowly release the pharmacological agents so they can remain at the intended si
D4910	\$100.00	periodontal maintenance	This procedure is instituted following periodontal therapy and continues at varying intervals, determined by the clinical evaluation of the dentist, for the life of the dentition or any implant replacements. It includes removal of the bacterial plaque a
D4920	\$75.00	unscheduled dressing change (by someone other than treating dentist)	
D4999	By Report	unspecified periodontal procedure, by report	Use for procedure that is not adequately described by a code. Describe procedure.
D5110	\$1,194.00	complete denture - maxillary	
D5120	\$1,194.00	complete denture - mandibular	
D5130	\$1,283.00	immediate denture - maxillary	Includes limited follow-up care only; does not include required future rebasing/relining procedure(s) or a complete new denture.
D5140	\$1,286.00	immediate denture - mandibular	Includes limited follow-up care only; does not include required future rebasing/relining procedure(s) or a complete new denture.
D5211	\$862.00	maxillary partial denture - resin base (including any conventional clasps, rests and teeth)	Includes acrylic resin base denture with resin or wrought wire clasps.
D5212	\$870.00	mandibular partial denture - resin base (including any conventional clasps, rests and teeth)	Includes acrylic resin base denture with resin or wrought wire clasps.
D5213	\$1,229.00	maxillary partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	
D5214	\$1,268.00	mandibular partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	
D5225	\$1,087.00	maxillary partial denture - flexible base (including any clasps, rests and teeth)	
D5226	\$1,094.00	mandibular partial denture - flexible base (including any clasps, rests and teeth)	

D5281	\$724.00	removable unilateral partial denture - one piece cast metal (including clasps and teeth)	
D5410	\$65.00	adjust complete denture - maxillary	
D5411	\$65.00	adjust complete denture - mandibular	
D5421	\$65.00	adjust partial denture - maxillary	
D5422	\$65.00	adjust partial denture - mandibular	
D5510	\$149.00	repair broken complete denture base	
D5520	\$129.00	replace missing or broken teeth - complete denture (each tooth)	
D5610	\$149.00	repair resin denture base	
D5620	\$213.00	repair cast framework	
D5630	\$190.00	repair or replace broken clasp	
D5640	\$131.00	replace broken teeth - per tooth	
D5650	\$160.00	add tooth to existing partial denture	
D5660	\$199.00	add clasp to existing partial denture	
D5670	\$512.00	replace all teeth and acrylic on cast metal framework (maxillary)	
D5671	\$497.00	replace all teeth and acrylic on cast metal framework (mandibular)	
D5710	\$428.00	rebase complete maxillary denture	
D5711	\$428.00	rebase complete mandibular denture	
D5720	\$418.00	rebase maxillary partial denture	
D5721	\$418.00	rebase mandibular partial denture	
D5730	\$274.00	reline complete maxillary denture (chairside)	
D5731	\$274.00	reline complete mandibular denture (chairside)	
D5740	\$269.00	reline maxillary partial denture (chairside)	
D5741	\$273.00	reline mandibular partial denture (chairside)	
D5750	\$350.00	reline complete maxillary denture (laboratory)	
D5751	\$354.00	reline complete mandibular denture (laboratory)	
D5760	\$348.00	reline maxillary partial denture (laboratory)	
D5761	\$348.00	reline mandibular partial denture (laboratory)	
D5810	\$597.00	interim complete denture (maxillary)	
D5811	\$597.00	interim complete denture (mandibular)	
D5820	\$494.00	interim partial denture (maxillary)	Includes any necessary clasps and rests.
D5821	\$496.00	interim partial denture (mandibular)	Includes any necessary clasps and rests.
D5850	\$144.00	tissue conditioning, maxillary	Treatment reline using materials designed to heal unhealthy ridges prior to more definitive final restoration.
D5851	\$144.00	tissue conditioning, mandibular	Treatment reline using materials designed to heal unhealthy ridges prior to more definitive final restoration.
D5860	\$1,491.00	overdenture - complete, by report	Describe and document procedures as performed. Other separate procedures may be required concurrent to D5860.
D5861	\$1,452.00	overdenture - partial, by report	Describe and document procedures as performed. Other separate procedures may be required concurrent to D5861.
D5862	\$492.00	precision attachment, by report	Each set of male and female components should be reported as one precision attachment. Describe the type of attachment used.
D5867	\$215.00	replacement of replaceable part of semi-precision or precision attachment (male or female component)	
D5875	\$271.00	modification of removable prosthesis following implant surgery	The modification of existing removable prosthesis is sometimes necessary at the time of implant placement and bone graft surgery and is always necessary at the time of the placement of the healing caps. This code could also be used to report the modifi
D5899	By Report	unspecified removable prosthodontic procedure, by report	Use for a procedure that is not adequately described by a code. Describe procedure.
D5911	By Report	facial moulage (sectional)	A sectional facial moulage impression is a procedure used to record the soft tissue contours of a portion of the face. Occasionally several separate sectional impressions are made, then reassembled to provide a full facial contour cast. The impression
D5912	By Report	facial moulage (complete)	Synonymous terminology: facial impression, face mask impression. A complete facial moulage impression is a procedure used to record the soft tissue contours of the whole face. The impression is utilized to create a facial moulage and generally is not r
D5913	By Report	nasal prosthesis	Synonymous terminology: artificial nose. A removable prosthesis attached to the skin, which artificially restores part or all of the nose. Fabrication of a nasal prosthesis requires creation of an original mold. Additional prostheses usually can be ma
D5914	By Report	auricular prosthesis	Synonymous terminology: artificial ear, ear prosthesis. A removable prosthesis, which artificially restores part or all of the natural ear. Usually, replacement prostheses can be made from the original mold if tissue bed changes have not occurred. Cre
D5915	By Report	orbital prosthesis	A prosthesis, which artificially restores the eye, eyelids, and adjacent hard and soft tissue, lost as a result of trauma or surgery. Fabrication of an orbital prosthesis requires creation of an original mold. Additional prostheses usually can be made
D5916	By Report	ocular prosthesis	Synonymous terminology: artificial eye, glass eye. A prosthesis, which artificially replaces an eye missing as a result of trauma, surgery or congenital absence. The prosthesis does not replace missing eyelids or adjacent skin, mucosa or muscle. Ocula
D5919	By Report	facial prosthesis	Synonymous terminology: prosthetic dressing. A removable prosthesis, which artificially replaces a portion of the face, lost due to surgery, trauma or congenital absence. Flexion of natural tissues may preclude adaptation and movement of the prosthesis
D5922	By Report	nasal septal prosthesis	Synonymous terminology: Septal plug, septal button. Removable prosthesis to occlude (obturate) a hole within the nasal septal wall. Adverse chemical degradation in this moist environment may require frequent replacement. Silicone prostheses are occasi
D5923	By Report	ocular prosthesis, interim	Synonymous terminology: Eye shell, shell, ocular conformer, conformer. A temporary replacement generally made of clear acrylic resin for an eye lost due to surgery or trauma. No attempt is made to re-establish esthetics. Fabrication of an interim ocul
D5924	By Report	cranial prosthesis	Synonymous terminology: Skull plate, cranioplasty prosthesis, cranial implant. A biocompatible, permanently implanted replacement of a portion o the skull bones; an artificial replacement for a portion of the skull bone.

D5925	By Report	facial augmentation implant prosthesis	Synonymous terminology: facial implant. An implantable biocompatible material generally onlaid upon an existing bony area beneath the skin tissue to fill in or collectively raise portions of the overlying facial skin tissues to create acceptable conto
D5926	By Report	nasal prosthesis, replacement	Synonymous terminology: replacement nose. An artificial nose produced from a previously made mold. A replacement prosthesis does not require fabrication of a new mold. Generally, several prostheses can be made from the same mold assuming no changes oc
D5927	By Report	auricular prosthesis, replacement	Synonymous terminology: replacement ear. An artificial ear produced from a previously made mold. A replacement prosthesis does not require fabrication of a new mold. Generally, several prostheses can be made from the same mold assuming no changes occu
D5928	By Report	orbital prosthesis, replacement	A replacement for a previously made orbital prosthesis. A replacement prosthesis does not require fabrication of a new mold. Generally, several prostheses can be made from the same mold assuming no changes occur in the tissue bed due to surgery or age
D5929	By Report	facial prosthesis, replacement	A replacement facial prosthesis made from the original mold. A replacement prosthesis does not require fabrication of a new mold. Generally, several prostheses can be made from the same mold assuming no changes occur in the tissue bed due to further su
D5931	By Report	obturator prosthesis, surgical	Synonymous terminology: Obturator, surgical stayplate, immediate temporary obturator. A temporary prosthesis inserted during or immediately following surgical or traumatic loss of a portion or all of one or both maxillary bones and contiguous alveolar s
D5932	By Report	obturator prosthesis, definitive	Synonymous terminology: obturator. A prosthesis, which artificially replaces part or all of the maxilla and associated teeth, lost due to surgery, trauma or congenital defects. A definitive obturator is made when it is deemed that further tissue change
D5933	By Report	obturator prosthesis, modification	Synonymous terminology: adjustment, denture adjustment, temporary or office reline. Revision or alteration of an existing obturator (surgical, interim, or definitive); possible modifications include relief of the denture base due to tissue compression,
D5934	By Report	mandibular resection prosthesis with guide flange	Synonymous terminology: resection device, resection appliance. A prosthesis which guides the remaining portion of the mandible, left after a partial resection, into a more normal relationship with the maxilla. This allows for some tooth-to-tooth or an
D5935	By Report	mandibular resection prosthesis without guide flange	A prosthesis which helps guide the partially resected mandible to a more normal relation with the maxilla allowing for increased tooth contact. It does not have a flange or ramp, however, to assist in directional closure. It may replace missing teeth a
D5936	By Report	obturator prosthesis, interim	Synonymous terminology: immediate postoperative obturator. A prosthesis which is made following completion of the initial healing after a surgical resection of a portion or all of one or both the maxillae; frequently many or all teeth in the defect area
D5937	\$438.00	trismus appliance (not for TMD treatment)	Synonymous terminology: occlusal device for mandibular trismus, dynamic bite opener. A prosthesis, which assists the patient in increasing their oral aperture width in order to eat as well as maintain oral hygiene. Several versions and designs are poss
D5951	By Report	feeding aid	Synonymous terminology: feeding prosthesis. A prosthesis, which maintains the right and left maxillary segments of an infant cleft palate patient in their proper orientation until surgery is performed to repair the cleft. It closes the oral-nasal cavit
D5952	By Report	speech aid prosthesis, pediatric	Synonymous terminology: nasopharyngeal obturator, speech appliance, obturator, cleft palate appliance, prosthetic speech aid, speech bulb. A temporary or interim prosthesis used to close a defect in the hard and/or soft palate. It may replace tissue los
D5953	By Report	speech aid prosthesis, adult	Synonymous terminology: prosthetic speech appliance, speech aid, speech bulb. A definitive prosthesis, which can improve speech in adult cleft palate patients either by obturating (sealing off) a palatal cleft or fistula, or occasionally by assisting an
D5954	By Report	palatal augmentation prosthesis	Synonymous terminology: superimposed prosthesis, maxillary glossectomy prosthesis, maxillary speech prosthesis, palatal drop prosthesis. A removable prosthesis which alters the hard and/or soft palate's topographical form adjacent to the tongue.
D5955	By Report	palatal lift prosthesis, definitive	A prosthesis which elevates the soft palate superiorly and aids in restoration of soft palate functions which may be lost due to an acquired, congenital or developmental defect. A definitive palatal lift is usually made for patients whose experience wit
D5958	By Report	palatal lift prosthesis, interim	Synonymous terminology: diagnostic palatal lift. A prosthesis which elevates and assists in restoring soft palate function which may be lost due to clefting, surgery, trauma or unknown paralysis. It is intended for interim use to determine its usefulness
D5959	By Report	palatal lift prosthesis, modification	Synonymous terminology: revision of lift, adjustment. Alterations in the adaptation, contour, form or function of an existing palatal lift necessitated due to tissue impingement, lack of function, poor clasp adaptation or the like.
D5960	By Report	speech aid prosthesis, modification	Synonymous terminology: adjustment, repair, revision. Any revision of a pediatric or adult speech aid not necessitating its replacement. Frequently, revisions of the obturating section of any speech aid is required to facilitate enhanced speech intelli
D5982	\$298.00	surgical stent	Synonymous terminology: periodontal stent, skin graft stent, columellar stent. Stents are utilized to apply pressure to soft tissues to facilitate healing and prevent cicatrization or collapse. A surgical stent may be required in surgical and post-surg
D5983	By Report	radiation carrier	Synonymous terminology: radiotherapy prosthesis, carrier prosthesis, radiation applicator, radium carrier, intracavity carrier, intracavity applicator. A device used to administer radiation to confined areas by means of capsules, beads or needles of rad
D5984	By Report	radiation shield	Synonymous terminology: radiation stent, tongue protector, lead shield. An intraoral prosthesis designed to shield adjacent tissues from radiation during orthovoltage treatment of malignant lesions of the head and neck region.
D5985	By Report	radiation cone locator	Synonymous terminology: docking device, cone locator. A prosthesis utilized to direct and reduplicate the path of radiation to an oral tumor during a split course of irradiation.
D5986	\$139.00	fluoride gel carrier	Synonymous terminology: fluoride applicator. A prosthesis, which covers the teeth in either dental arch and is used to apply topical fluoride in close proximity to tooth enamel and dentin for several minutes daily.
D5987	By Report	commissure splint	Synonymous terminology: lip splint. A device placed between the lips, which assists in achieving increased opening between the lips. Use of such devices enhances opening where surgical, chemical or electrical alterations of the lips has resulted in seve
D5988	\$575.00	surgical splint	Synonymous terminology: Gunning splint, modified Gunning splint, labiolingual splint, fenestrated splint, Kingsley splint, cast metal splint. Splints are designed to utilize existing teeth and/or alveolar processes as points of anchorage to assist in st
D5999	By Report	unspecified maxillofacial prosthesis, by report	Used for procedure that is not adequately described by a code. Describe procedure.
D6010	\$1,513.00	surgical placement of implant body: endosteal implant	Includes second stage surgery and placement of healing cap.
D6012	\$1,181.00	surgical placement of interim implant body for transitional prosthesis: endosteal implant	New CDT-2007. Includes removal during later therapy to accommodate the definitive restoration, which may include placement of other implants.
D6040	\$6,453.00	surgical placement: eposteal implant	An eposteal (subperiosteal) framework of a biocompatible material designed and fabricated to fit on the surface of the bone of the mandible or maxilla with per mucosal extensions which provide support and attachment of a prosthesis. This may be a complet
D6050	\$4,334.00	surgical placement: transosteal implant	A transosteal (transosseous) biocompatible device with threaded posts penetrating both the superior and inferior cortical bone plates of the mandibular symphysis and exiting through the per mucosa providing support and attachment for a dental prosthesis.

D6053	\$1,905.00	implant/abutment supported removable denture for completely edentulous arch	
D6054	\$1,890.00	implant/abutment supported removable denture for partially edentulous arch	
D6055	\$1,886.00	dental implant supported connecting bar	A device attached to transmucosal abutments to stabilize and anchor a removable overdenture prosthesis.
D6056	\$515.00	prefabricated abutment - includes placement	A connection to an implant that is a manufactured component usually made of machined high noble metal, titanium, titanium alloy or ceramic. Modification of a prefabricated abutment may be necessary, and is accomplished by altering its shape using dental
D6057	\$696.00	custom abutment - includes placement	A connection to an implant that is a fabricated component, usually by a laboratory, specific for an individual application. A custom abutment is typically fabricated using a casting process and usually is made of noble or high noble metal. A 'UCLA abut
D6058	\$991.00	abutment supported porcelain/ceramic crown	A single crown restoration that is retained, supported and stabilized by an abutment on an implant; may be screw retained or cemented.
D6059	\$991.00	abutment supported porcelain fused to metal crown (high noble metal)	A single metal-ceramic crown restoration that is retained, supported and stabilized by an abutment on an implant; may be screw retained or cemented.
D6060	\$917.00	abutment supported porcelain fused to metal crown (predominantly base metal)	A single metal-ceramic crown restoration that is retained, supported and stabilized by an abutment on an implant; may be screw retained or cemented.
D6061	\$955.00	abutment supported porcelain fused to metal crown (noble metal)	A single metal-ceramic crown restoration that is retained, supported and stabilized by an abutment on an implant; may be screw retained or cemented.
D6062	\$970.00	abutment supported cast metal crown (high noble metal)	A single cast metal crown restoration that is retained, supported and stabilized by an abutment on an implant; may be screw retained or cemented.
D6063	\$910.00	abutment supported cast metal crown (predominantly base metal)	A single cast metal crown restoration that is retained, supported and stabilized by an abutment on an implant; may be screw retained or cemented.
D6064	\$933.00	abutment supported cast metal crown (noble metal)	A single cast metal crown restoration that is retained, supported and stabilized by an abutment on an implant; may be screw retained or cemented.
D6065	\$1,088.00	implant supported porcelain/ceramic crown	A single crown restoration that is retained, supported and stabilized by an implant; may be screw retained or cemented.
D6066	\$1,058.00	implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal)	A single metal-ceramic crown restoration that is retained, supported and stabilized by an implant; may be screw retained or cemented.
D6067	\$1,074.00	implant supported metal crown (titanium, titanium alloy, high noble metal)	A single cast metal crown restoration that is retained, supported and stabilized by an abutment on an implant; may be screw retained or cemented.
D6068	\$985.00	abutment supported retainer for porcelain/ceramic FPD	A ceramic retainer for a fixed partial denture that gains retention, support and stability from an abutment on an implant; may be screw retained or cemented.
D6069	\$990.00	abutment supported retainer for porcelain fused to metal FPD (high noble metal)	A metal-ceramic retainer for a fixed partial denture that gains retention, support and stability from an abutment on an implant; may be screw retained or cemented.
D6070	\$915.00	abutment supported retainer for porcelain fused to metal FPD (predominantly base metal)	A metal-ceramic retainer for a fixed partial denture that gains retention, support and stability from an abutment on an implant; may be screw retained or cemented.
D6071	\$959.00	abutment supported retainer for porcelain fused to metal FPD (noble metal)	A metal-ceramic retainer for a fixed partial denture that gains retention, support and stability from an abutment on an implant; may be screw retained or cemented.
D6072	\$960.00	abutment supported retainer for cast metal FPD (high noble metal)	A cast metal retainer for a fixed partial denture that gains retention, support and stability from an abutment on an implant; may be screw retained or cemented.
D6073	\$923.00	abutment supported retainer for cast metal FPD (predominantly base metal)	A cast metal retainer for a fixed partial denture that gains retention, support and stability from an abutment on an implant; may be screw retained or cemented.
D6074	\$914.00	abutment supported retainer for cast metal FPD (noble metal)	A cast metal retainer for a fixed partial denture that gains retention, support and stability from an abutment on an implant; may be screw retained or cemented.
D6075	\$1,039.00	implant supported retainer for ceramic FPD	A ceramic retainer for a fixed partial denture that gains retention, support and stability from an implant; may be screw retained or cemented.
D6076	\$1,085.00	implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy or high noble metal)	A metal-ceramic retainer for a fixed partial denture that gains retention, support and stability from an implant; may be screw retained or cemented.
D6077	\$1,094.00	implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal)	A cast metal retainer for a fixed partial denture that gains retention, support and stability from an implant; may be screw retained or cemented.
D6078	\$3,043.00	implant/abutment supported fixed denture for completely edentulous arch	A prosthesis that is retained, supported and stabilized by implants or abutments placed on implants but does not have specific relationships between implant positions and replacement teeth; may be screw retained or cemented; commonly referred to as a "hy
D6079	\$2,266.00	implant/abutment supported fixed denture for partially edentulous arch	A prosthesis that is retained, supported and stabilized by implants or abutments placed on implants but does not have specific relationship between implant positions and replacement teeth; may be screw retained or cemented; commonly referred to as a "hy
D6080	\$194.00	implant maintenance procedures, including removal of prosthesis, cleansing of prosthesis and abutments and reinsertion of prosthesis	This procedure includes a prophylaxis to provide active debriding of the implant and examination of all aspects of the implant system, including the occlusion and stability of the superstructure. The patient is also instructed in thorough daily cleansin
D6090	\$537.00	repair implant supported prosthesis, by report	This procedure involves the repair or replacement of any part of the implant supported prosthesis.
D6091	\$414.00	replacement of semi-precision or precision attachment (male or female component) of implant/abutment supported prosthesis, per attachment	New CDT-2007. This procedure applies to the replaceable male or female component of the attachment
D6092	\$110.00	recement implant/abutment supported crown	New CDT-2007.
D6093	\$115.00	recement implant/abutment supported fixed partial denture	New CDT-2007.
D6094	\$696.00	abutment supported crown - (titanium)	A single restoration that is retained, supported and stabilized by an abutment on an implant. May be cast or milled and is screw retained or cemented.
D6095	\$549.00	repair implant abutment, by report	This procedure involves the repair or replacement of any part of the implant abutment.
D6100	\$572.00	implant removal, by report	This procedure involves the surgical removal of an implant. Describe procedure.

D6190	By Report	radiographic/surgical implant index, by report	An appliance, designed to relate osteotomy or fixture position to existing anatomic structures, to be utilized during radiographic exposure for treatment planning and/or during osteotomy creation for fixture installation.
D6194	\$931.00	abutment supported retainer crown for FPD - (titanium)	A retainer for a fixed partial denture that gains retention, support and stability from an abutment on an implant. May be cast or milled and is screw retained or cemented.
D6199	By Report	unspecified implant procedure, by report	Use for procedure that is not adequately described by a code. Describe procedure.
D6205	\$746.00	pontic - indirect resin based composite	Not to be used as a temporary or provisional prosthesis.
D6210	\$797.00	pontic - cast high noble metal	
D6211	\$741.00	pontic - cast predominantly base metal	
D6212	\$771.00	pontic - cast noble metal	
D6214	\$787.00	pontic - titanium	
D6240	\$818.00	pontic - porcelain fused to high noble metal	
D6241	\$755.00	pontic - porcelain fused to predominantly base metal	
D6242	\$786.00	pontic - porcelain fused to noble metal	
D6245	\$821.00	pontic - porcelain/ceramic	
D6250	\$793.00	pontic - resin with high noble metal	
D6251	\$746.00	pontic - resin with predominantly base metal	
D6252	\$766.00	pontic - resin with noble metal	
D6253	\$535.00	provisional pontic	Pontic utilized as an interim of at least six months duration during restorative treatment to allow adequate time for healing or completion of other procedures. This is not to be used as a temporary pontic for routine prosthetic fixed partial dentures.
D6545	\$528.00	retainer - cast metal for resin bonded fixed prosthesis	
D6548	\$706.00	retainer - porcelain/ceramic for resin bonded fixed prosthesis	
D6600	\$757.00	inlay - porcelain/ceramic, two surfaces	
D6601	\$821.00	inlay - porcelain/ceramic, three or more surfaces	
D6602	\$771.00	inlay - cast high noble metal, two surfaces	
D6603	\$831.00	inlay - cast high noble metal, three or more surfaces	
D6604	\$736.00	inlay - cast predominantly base metal, two surfaces	
D6605	\$794.00	inlay - cast predominantly base metal, three or more surfaces	
D6606	\$763.00	inlay - cast noble metal, two surfaces	
D6607	\$821.00	inlay - cast noble metal, three or more surfaces	
D6608	\$816.00	onlay - porcelain/ceramic, two surfaces	
D6609	\$890.00	onlay - porcelain/ceramic, three or more surfaces	
D6610	\$844.00	onlay - cast high noble metal, two surfaces	
D6611	\$890.00	onlay - cast high noble metal, three or more surfaces	
D6612	\$794.00	onlay - cast predominantly base metal, two surfaces	
D6613	\$877.00	onlay - cast predominantly base metal, three or more surfaces	
D6614	\$828.00	onlay - cast noble metal, two surfaces	
D6615	\$891.00	onlay - cast noble metal, three or more surfaces	
D6624	\$804.00	inlay - titanium	
D6634	\$855.00	onlay - titanium	
D6710	\$805.00	crown - indirect resin based composite	Not to be used as a temporary or provisional prosthesis.
D6720	\$796.00	crown - resin with high noble metal	
D6721	\$750.00	crown - resin with predominantly base metal	
D6722	\$780.00	crown - resin with noble metal	
D6740	\$845.00	crown - porcelain/ceramic	
D6750	\$821.00	crown - porcelain fused to high noble metal	
D6751	\$751.00	crown - porcelain fused to predominantly base metal	
D6752	\$790.00	crown - porcelain fused to noble metal	
D6780	\$796.00	crown - 3/4 cast high noble metal	
D6781	\$761.00	crown - 3/4 cast predominantly base metal	
D6782	\$796.00	crown - 3/4 cast noble metal	
D6783	\$826.00	crown - 3/4 porcelain/ceramic	
D6790	\$801.00	crown - full cast high noble metal	
D6791	\$742.00	crown - full cast predominantly base metal	
D6792	\$776.00	crown - full cast noble metal	
D6793	\$335.00	provisional retainer crown	Retainer crown utilized as an interim of at least six months duration during restorative treatment to allow adequate time for healing or completion of other procedures. This is not to be used as a temporary retainer crown for routine prosthetic fixed pa
D6794	\$671.00	crown - titanium	
D6920	\$736.00	connector bar	A device attached to fixed partial denture retainer or coping which serves to stabilize and anchor a removable overdenture prosthesis.
D6930	\$119.00	recement fixed partial denture	
D6940	\$298.00	stress breaker	A non-rigid connector.
D6950	\$468.00	precision attachment	Report attachment separately from crown; a male and female pair constitutes one precision attachment. Describe type of attachment used.
D6970	\$319.00	post and core in addition to fixed partial denture retainer, indirectly fabricated	Revised CDT - 2007 Nomenclature or Descriptor. Post and core are custom fabricated as a single unit.

D6972	\$249.00	prefabricated post and core in addition to fixed partial denture retainer	
D6973	\$199.00	core build up for retainer, including any pins	
D6975	\$513.00	coping - metal	To be used as a definitive restoration when coping is an integral part of a fixed prosthesis.
D6976	\$203.00	each additional indirectly fabricated post - same tooth	Revised CDT - 2007 Nomenclature or Descriptor. To be used with D6970.
D6977	\$120.00	each additional prefabricated post - same tooth	To be used with D6972
D6980	\$277.00	fixed partial denture repair, by report	
D6985	\$711.00	pediatric partial denture, fixed	This prosthesis is used primarily for aesthetic purposes.
D6999	By Report	unspecified fixed prosthodontic procedure, by report	Used for procedure that is not adequately described by a code. Describe procedure.
D7111	\$94.00	extraction, coronal remnants - deciduous tooth	Removal of soft tissue-retained coronal remnants.
D7140	\$114.00	extraction, erupted tooth or exposed root (elevation and/or forceps removal)	Includes routine removal of tooth structure, minor smoothing of socket bone, and closure, as necessary.
		surgical removal of erupted tooth requiring elevation of mucoperiosteal flap and	
D7210	\$199.00	removal of bone and/or section of tooth	Includes cutting of gingiva and bone, removal of tooth structure, minor smoothing of socket bone and closure.
D7220	\$230.00	removal of impacted tooth - soft tissue	Occlusal surface of tooth covered by soft tissue; requires mucoperiosteal flap elevation.
D7230	\$293.00	removal of impacted tooth - partially bony	Part of crown covered by bone; requires mucoperiosteal flap elevation and bone removal.
D7240	\$358.00	removal of impacted tooth - completely bony	Most or all of crown covered by bone; requires mucoperiosteal flap elevation and bone removal.
D7241	\$424.00	removal of impacted tooth - completely bony, with unusual surgical complications	Most or all of crown covered by bone; unusually difficult or complicated due to factors such as nerve dissection required, separate closure of maxillary sinus required or aberrant tooth position.
D7250	\$221.00	surgical removal of residual tooth roots (cutting procedure)	Includes cutting of soft tissue and bone, removal of tooth structure, and closure.
D7260	\$517.00	oroantral fistula closure	Excision of fistulous tract between maxillary sinus and oral cavity and closure by advancement flap.
			Subsequent to surgical removal of tooth, exposure of sinus requiring repair, or immediate closure of oroantral or oronasal communication in absence of fistulous tract.
D7261	\$524.00	primary closure of a sinus perforation	
D7270	\$393.00	tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth	Includes splinting and/or stabilization.
D7272	\$497.00	tooth transplantation (includes reimplantation from one site to another and splinting and/or stabilization)	
D7280	\$348.00	surgical access of an unerupted tooth	An incision is made and the tissue is reflected and bone removed as necessary to expose the crown of an impacted tooth not intended to be extracted.
D7282	\$378.00	mobilization of erupted or malpositioned tooth to aid eruption	To move/luxate teeth to eliminate ankyolosis; not in conjunction with an extraction.
D7283	\$384.00	placement of device to facilitate eruption of impacted tooth	Placement of an orthodontic bracket, band or other device on an unerupted tooth, after its exposure, to aid in its eruption. Report the surgical exposure separately using D7280.
D7285	\$274.00	biopsy of oral tissue - hard (bone, tooth)	For removal of specimen only. This code involves biopsy of osseous lesions and is not used for apicoectomy/periradicular surgery.
			For surgical removal of an architecturally intact specimen only. This code is not used at the same time as codes for apicoectomy/periradicular curettage.
D7286	\$219.00	biopsy of oral tissue - soft	
D7287	\$99.00	exfoliative cytological sample collection	For collection of non-transepithelial cytology sample via mild scraping of the oral mucosa.
D7288	\$115.00	brush biopsy - transepithelial sample collection	For collection of oral disaggregated transepithelial cells via rotational brushing of the oral mucosa.
D7290	\$343.00	surgical repositioning of teeth	Grafting procedure(s) is/are additional
D7291	\$216.00	transseptal fibrotomy/supra crestal fibrotomy, by report	The supraosseous connective tissue attachment is surgically severed around the involved teeth. Where there are adjacent teeth, the transseptal fibrotomy of a single tooth will involve a minimum of three teeth. Since the incisions are within the gingiv
D7292	\$1,007.00	surgical placement: temporary anchorage device [screw retained plate] requiring surgical flap	New CDT-2007. Insertion of a device for temporary skeletal anchorage when a surgical flap is required. Includes device removal.
D7293	\$959.00	surgical placement: temporary anchorage device requiring surgical flap	New CDT-2007. Insertion of a device for temporary skeletal anchorage when a surgical flap is required. Includes device removal.
D7294	\$757.00	surgical placement: temporary anchorage device without surgical flap	New CDT-2007. Insertion of a device for temporary skeletal anchorage when a surgical flap is not required. Includes device removal.
D7310	\$209.00	alveoplasty in conjunction with extractions - four or more teeth or tooth spaces, per quadrant	Revised CDT - 2007 Nomenclature or Descriptor. Usually in preparation for a prosthesis.
D7311	\$225.00	alveoplasty in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	The alveoplasty is distinct (separate procedure) from extractions and/or surgical extractions.
D7320	\$301.00	alveoplasty not in conjunction with extractions -four or more teeth or tooth spaces, per quadrant	Revised CDT - 2007 Nomenclature or Descriptor. No extractions performed in an edentulous area. See D7310 if teeth are being extracted concurrently with the alveoplasty.
D7321	\$316.00	alveoplasty not in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	
D7340	\$675.00	vestibuloplasty - ridge extension (secondary epithelialization)	
		vestibuloplasty - ridge extension (including soft tissue grafts, muscle reattachment, revision of soft tissue attachment and management of hypertrophied and hyperplastic tissue)	
D7350	\$1,345.00		
D7410	\$283.00	excision of benign lesion up to 1.25 cm	
D7411	\$432.00	excision of benign lesion greater than 1.25 cm	
D7412	\$542.00	excision of benign lesion, complicated	Requires extensive undermining with advancement or rotational flap closure
D7413	\$478.00	excision of malignant lesion up to 1.25 cm	
D7414	\$696.00	excision of malignant lesion greater than 1.25 cm	
D7415	\$791.00	excision of malignant lesion, complicated	Requires extensive undermining with advancement or rotational flap closure
D7440	\$378.00	excision of malignant tumor - lesion diameter up to 1.25 cm	
D7441	\$656.00	excision of malignant tumor - lesion diameter greater than 1.25 cm	

D7450	\$358.00	removal of benign odontogenic cyst or tumor - lesion diameter up to 1.25 cm	
D7451	\$448.00	removal of benign odontogenic cyst or tumor - lesion diameter greater than 1.25 cm	
D7460	\$362.00	removal of benign nonodontogenic cyst or tumor - lesion diameter up to 1.25 cm	
D7461	\$480.00	removal of benign nonodontogenic cyst or tumor - lesion diameter greater than 1.25 cm	
D7465	\$269.00	destruction of lesion(s) by physical or chemical method, by report	Examples include using cryo, laser or electro surgery.
D7471	\$448.00	removal of lateral exostosis (maxilla or mandible)	
D7472	\$537.00	removal of torus palatinus	
D7473	\$522.00	removal of torus mandibularis	
D7485	\$479.00	surgical reduction of osseous tuberosity	
D7490	\$6,184.00	radical resection of maxilla or mandible	Partial resection of maxilla or mandible; removal of lesion and defect with margin of normal appearing bone. Reconstruction and bone grafts should be reported separately.
D7510	\$164.00	incision and drainage of abscess - intraoral soft tissue	Involves incision through mucosa, including periodontal origins.
D7511	\$220.00	incision and drainage of abscess - intraoral soft tissue - complicated (includes drainage of multiple fascial spaces)	Incision is made intraorally and dissection is extended into adjacent fascial space(s) to provide adequate drainage of abscess/cellulitis.
D7520	\$274.00	incision and drainage of abscess - extraoral soft tissue	Involves incision through skin.
D7521	\$354.00	incision and drainage of abscess - extraoral soft tissue - complicated (includes drainage of multiple fascial spaces)	Incision is made extraorally and dissection is extended into adjacent fascial space(s) to provide adequate drainage of abscess/cellulitis.
D7530	\$251.00	removal of foreign body from mucosa, skin, or subcutaneous alveolar tissue	
D7540	\$449.00	removal of reaction producing foreign bodies, musculoskeletal system	May include, but is not limited to, removal of splinters, pieces of wire, etc., from muscle and/or bone.
D7550	\$348.00	partial ostectomy/sequestrectomy for removal of non-vital bone	Removal of loose or sloughed-off dead bone caused by infection or reduced blood supply.
D7560	\$750.00	maxillary sinusotomy for removal of tooth fragment or foreign body	
D7610	\$3,114.00	maxilla - open reduction (teeth immobilized, if present)	Teeth may be wired, banded or splinted together to prevent movement. Surgical incision required for interosseous fixation.
D7620	\$2,387.00	maxilla - closed reduction (teeth immobilized, if present)	No incision required to reduce fracture. See D7610 if interosseous fixation is applied.
D7630	\$3,122.00	mandible - open reduction (teeth immobilized, if present)	Teeth may be wired, banded or splinted together to prevent movement. Surgical incision required to reduce fracture.
D7640	\$2,325.00	mandible - closed reduction (teeth immobilized, if present)	No incision required to reduce fracture. See D7630 if interosseous fixation is applied.
D7650	\$2,877.00	malar and/or zygomatic arch - open reduction	
D7660	\$2,366.00	malar and/or zygomatic arch - closed reduction	
D7670	\$920.00	alveolus closed reduction may include stabilization of teeth	Teeth may be wired, banded or splinted together to prevent movement.
D7671	\$483.00	alveolus, open reduction may include stabilization of teeth	Teeth may be wired, banded or splinted together to prevent movement.
D7680	\$4,410.00	facial bones - complicated reduction with fixation and multiple surgical approaches	Facial bones include upper and lower jaw, cheek, and bones around eyes, nose, and ears.
D7710	\$3,298.00	maxilla open reduction	Surgical incision required to reduce fracture.
D7720	\$2,250.00	maxilla - closed reduction	
D7730	\$3,300.00	mandible - open reduction	Surgical incision required to reduce fracture.
D7740	\$2,487.00	mandible - closed reduction	
D7750	\$2,984.00	malar and/or zygomatic arch - open reduction	Surgical incision required to reduce fracture.
D7760	\$3,044.00	malar and/or zygomatic arch - closed reduction	
D7770	\$1,827.00	alveolus - open reduction stabilization of teeth	Fractured bone(s) are exposed to mouth or outside the face. Surgical incision required to reduce fracture.
D7771	\$893.00	alveolus, closed reduction stabilization of teeth	Fractured bone(s) are exposed to mouth or outside the face.
D7780	\$5,179.00	facial bones - complicated reduction with fixation and multiple surgical approaches	Surgical incision required to reduce fracture. Facial bones include upper and lower jaw, cheek, and bones around eyes, nose, and ears.
D7810	\$2,929.00	open reduction of dislocation	Access to TMJ via surgical opening.
D7820	\$378.00	closed reduction of dislocation	Joint manipulated into place; no surgical exposure.
D7830	\$453.00	manipulation under anesthesia	Usually done under general anesthesia or intravenous sedation.
D7840	\$3,938.00	condylectomy	Surgical removal of all or portion of the mandibular condyle (separate procedure).
D7850	\$3,994.00	surgical discectomy, with/without implant	Excision of the intra-articular disc of a joint.
D7852	\$4,254.00	disc repair	Repositioning and/or sculpting of disc; repair of perforated posterior attachment.
D7854	\$4,248.00	synovectomy	Excision of a portion or all of the synovial membrane of a joint.
D7856	\$2,574.00	myotomy	Cutting of muscle for therapeutic purposes (separate procedure).
D7858	By Report	joint reconstruction	Reconstruction of osseous components including or excluding soft tissues of the joint with autogenous, homologous, or alloplastic materials.
D7860	By Report	arthrotomy	Cutting into joint (separate procedure).
D7865	By Report	arthroplasty	Reduction of osseous components of the joint to create a pseudoarthrosis or eliminate an irregular remodeling pattern (osteophytes).
D7870	\$206.00	arthrocentesis	Withdrawal of fluid from a joint space by aspiration.
D7871	By Report	non-arthroscopic lysis and lavage	Inflow and outflow catheters are placed into the joint space. The joint is lavaged and manipulated as indicated in an effort to release minor adhesions and synovial vacuum phenomenon as well as to remove inflammation products from the joint space.
D7872	By Report	arthroscopy - diagnosis, with or without biopsy	
D7873	By Report	arthroscopy - surgical: lavage and lysis of adhesions	Removal of adhesions using the arthroscope and lavage of the joint cavities.
D7874	By Report	arthroscopy - surgical: disc repositioning and stabilization	Repositioning and stabilization of disc using arthroscopic techniques.
D7875	By Report	arthroscopy - surgical: synovectomy	Removal of inflamed and hyperplastic synovium (partial/complete) via an arthroscopic technique.

D7876	By Report	arthroscopy - surgical: discectomy	Removal of disc and remodeled posterior attachment via the arthroscope.
D7877	By Report	arthroscopy - surgical: debridement	Removal of pathologic hard and/or soft tissue using the arthroscope.
D7880	\$642.00	occlusal orthotic device, by report	Presently includes splints provided for treatment of temporomandibular joint dysfunction.
D7899	By Report	unspecified TMD therapy, by report	Used for procedure that is not adequately described by a code. Describe procedure.
D7910	\$209.00	suture of recent small wounds up to 5 cm	
D7911	\$325.00	complicated suture - up to 5 cm	
D7912	\$448.00	complicated suture - greater than 5 cm	
D7920	\$1,739.00	skin graft (identify defect covered, location and type of graft)	
D7940	\$2,483.00	osteoplasty - for orthognathic deformities	Reconstruction of jaws for correction of congenital, developmental or acquired traumatic or surgical deformity.
D7941	\$6,810.00	osteotomy - mandibular rami	
D7943	\$6,034.00	osteotomy - mandibular rami with bone graft; includes obtaining the graft	
D7944	\$5,200.00	osteotomy - segmented or subapical	Revised CDT - 2007 Nomenclature or Descriptor. Report by range of tooth numbers within segment.
D7945	\$5,343.00	osteotomy - body of mandible	Surgical section of lower jaw. This includes the surgical exposure, bone cut, fixation, routine wound closure and normal post-operative follow-up care.
D7946	\$6,331.00	LeFort I (maxilla - total)	Surgical section of the upper jaw. This includes the surgical exposure, bone cuts, downfracture, repositioning, fixation, routine wound closure and normal post-operative follow-up care.
D7947	\$6,302.00	LeFort I (maxilla - segmented)	When reporting a surgically assisted palatal expansion without downfracture, this code would entail a reduced service and should be "by report."
D7948	\$7,441.00	LeFort II or LeFort III (osteoplasty of facial bones for midface hypoplasia or retrusion)-without bone graft	Surgical section of upper jaw. This includes the surgical exposure, bone cuts, downfracture, segmentation of maxilla, repositioning, fixation, routine wound closure and normal post-operative follow-up care.
D7949	\$8,551.00	LeFort II or LeFort III - with bone graft	Includes obtaining autografts.
D7950	\$1,858.00	osseous, osteoperiosteal, or cartilage graft of the mandible or maxilla - autogenous or nonautogenous, by report	Revised CDT - 2007 Nomenclature or Descriptor. This code may be used for ridge augmentation or reconstruction to increase height, width and/or volume or residual alveolar ridge. It includes obtaining autograft and/or allograft material. Placement of a
D7951	\$1,773.00	sinus augmentation with bone or bone substitutes	New CDT-2007. The augmentation of the sinus cavity to increase alveolar height for reconstruction of edentulous portions of the maxilla. This includes obtaining the bone or bone substitutes. Placement of a barrier membrane, if used, should be reported
D7953	\$725.00	bone replacement graft for ridge preservation - per site	Revised CDT - 2007 Nomenclature or Descriptor. Osseous autograft, allograft or non-osseous graft is placed in an extraction site at the time of the extraction to preserve ridge integrity (e.g., clinically indicated in preparation for implant reconstruct
D7955	\$1,345.00	repair of maxillofacial soft and/or hard tissue defect	Revised CDT - 2007 Nomenclature or Descriptor. Reconstruction of surgical, traumatic, or congenital defects of the facial bones, including the mandible, may utilize autograft, allograft, or alloplastic materials in conjunction with soft tissue procedure
D7960	\$323.00	frenulectomy (frenectomy or frenotomy) - separate procedure	The frenum may be excised when the tongue has limited mobility; for large diastemas between teeth; or when the frenum interferes with a prosthetic appliance; or when it is the etiology of periodontal tissue disease.
D7963	\$353.00	frenuloplasty	Excision of frenum with accompanying excision or repositioning of aberrant muscle and z-plasty or other local flap closure.
D7970	\$356.00	excision of hyperplastic tissue - per arch	
D7971	\$172.00	excision of pericoronal gingiva	Surgical removal of inflammatory or hypertrophied tissues surrounding partially erupted/impacted teeth.
D7972	\$488.00	surgical reduction of fibrous tuberosity	
D7980	\$449.00	sialolithotomy	Surgical procedure by which a stone within a salivary gland or its duct is removed, either intraorally or extraorally.
D7981	By Report	excision of salivary gland, by report	
D7982	\$1,130.00	sialodochoplasty	Surgical procedure for the repair of a defect and/or restoration of a portion of a salivary gland duct.
D7983	\$731.00	closure of salivary fistula	Surgical closure of an opening between a salivary duct and/or gland and the cutaneous surface, or an opening into the oral cavity through other than the normal anatomic pathway.
D7990	\$890.00	emergency tracheotomy	Surgical formation of a tracheal opening usually below the cricoid cartilage to allow for respiratory exchange.
D7991	\$2,863.00	coronoidectomy	Surgical removal of the coronoid process of the mandible.
D7995	By Report	synthetic graft - mandible or facial bones, by report	Includes allogenic material.
D7996	By Report	implant-mandible for augmentation purposes (excluding alveolar ridge), by report	
D7997	\$198.00	appliance removal (not by dentist who placed appliance), includes removal of archbar	
D7998	\$1,109.00	intraoral placement of a fixation device not in conjunction with a fracture	New CDT-2007. The placement of intermaxillary fixation appliance for documented medically accepted treatments not in association with fractures
D7999	By Report	unspecified oral surgery procedure, by report	Used for procedure that is not adequately described by a code. Describe procedure.
D8010	\$1,336.00	limited orthodontic treatment of the primary dentition	
D8020	\$1,452.00	limited orthodontic treatment of the transitional dentition	
D8030	\$1,742.00	limited orthodontic treatment of the adolescent dentition	
D8040	\$1,718.00	limited orthodontic treatment of the adult dentition	
D8050	\$1,667.00	interceptive orthodontic treatment of the primary dentition	
D8060	\$1,854.00	interceptive orthodontic treatment of the transitional dentition	
D8070	\$4,180.00	comprehensive orthodontic treatment of the transitional dentition	
D8080	\$4,277.00	comprehensive orthodontic treatment of the adolescent dentition	
D8090	\$4,476.00	comprehensive orthodontic treatment of the adult dentition	
D8210	\$622.00	removable appliance therapy	Removable indicates patient can remove; includes appliances for thumb sucking and tongue thrusting.
D8220	\$711.00	fixed appliance therapy	Fixed indicates patient cannot remove appliance; includes appliances for thumb sucking and tongue thrusting.
D8660	\$207.00	pre-orthodontic treatment visit	

D8670	\$155.00	periodic orthodontic treatment visit (as part of contract)	
D8680	\$412.00	orthodontic retention (removal of appliances, construction and placement of retainer(s))	
D8690	\$193.00	orthodontic treatment (alternative billing to a contract fee)	Services provided by dentist other than original treating dentist. A method of payment between the provider and responsible party for services that reflect an open-ended fee arrangement.
D8691	\$156.00	repair of orthodontic appliance	Does not include bracket and standard fixed ortho appliances. It does include functional appliances and palatal expanders.
D8692	By Report	replacement of lost or broken retainer	
D8693	\$147.00	rebonding or recementing; and/or repair, as required, of fixed retainers	New CDT-2007.
D8999	By Report	unspecified orthodontic procedure, by report	Used for procedure that is not adequately described by a code. Describe procedure.
D9110	\$88.00	palliative (emergency) treatment of dental pain - minor procedure	This is typically reported on a "per visit" basis for emergency treatment of dental pain.
D9120	\$140.00	fixed partial denture sectioning	New CDT-2007. Separation of one or more connections between abutments and/or pontics when some portion of a fixed prosthesis is to remain intact and serviceable following sectioning and extraction or other treatment. Includes all recontouring and polish
D9210	\$50.00	local anesthesia not in conjunction with operative or surgical procedures	
D9211	\$71.00	regional block anesthesia	
D9212	\$198.00	trigeminal division block anesthesia	
D9215	\$44.00	local anesthesia	
D9220	\$275.00	deep sedation/general anesthesia - first 30 minutes	Anesthesia time begins when the doctor administering the anesthetic agent initiates the appropriate anesthesia and non-invasive monitoring protocol and remains in continuous attendance of the patient. Anesthesia services are considered completed when th
D9221	\$118.00	deep sedation/general anesthesia - each additional 15 minutes	Anesthesia time begins when the doctor administering the anesthetic agent initiates the appropriate anesthesia and non-invasive monitoring protocol and remains in continuous attendance of the patient. Anesthesia services are considered completed when th
D9230	\$49.00	analgesia, anxiolysis, inhalation of nitrous oxide	
D9241	\$282.00	intravenous conscious sedation/analgesia - first 30 minutes	Anesthesia time begins when the doctor administering the anesthetic agent initiates the appropriate anesthesia and non-invasive monitoring protocol and remains in continuous attendance of the patient. Anesthesia services are considered completed when th
D9242	\$106.00	intravenous conscious sedation/analgesia - each additional 15 minutes	Anesthesia time begins when the doctor administering the anesthetic agent initiates the appropriate anesthesia and non-invasive monitoring protocol and remains in continuous attendance of the patient. Anesthesia services are considered completed when th
D9248	\$199.00	non-intravenous conscious sedation	A medically controlled state of depressed consciousness while maintaining the patient's airway, protective reflexes and the ability to respond to stimulation or verbal commands. It includes non-intravenous administration of sedative and/or analgesic age
D9310	\$85.00	consultation - diagnostic service provided by dentist or physician other than requesting dentist or physician	Revised CDT - 2007 Nomenclature or Descriptor. A patient encounter with a practitioner whose opinion or advice regarding evaluation and/or management of a specific problem; may be requested by another practitioner or appropriate source. The consultatio
D9410	\$149.00	house/extended care facility call	Includes visits to nursing homes, long-term care facilities, hospice sites, institutions, etc. Report in addition to reporting appropriate code numbers for actual services performed.
D9420	\$173.00	hospital call	May be reported when providing treatment in hospital or ambulatory surgical center, in addition to reporting appropriate code numbers for actual services performed.
D9430	\$52.00	office visit for observation (during regularly scheduled hours) - no other services performed	
D9440	\$115.00	office visit - after regularly scheduled hours	
D9450	\$89.00	case presentation, detailed and extensive treatment planning	Established patient. Not performed on same day as evaluation.
D9610	\$70.00	therapeutic parenteral drug, single administration	Revised CDT - 2007 Nomenclature or Descriptor. Includes single administration of antibiotics, steroids, anti-inflammatory drugs, or other therapeutic medications. This code should not be used to report administration of sedative, anesthetic or reversal
D9612	\$84.00	therapeutic parenteral drugs, two or more administrations, different medications	New CDT-2007. Includes multiple administrations of antibiotics, steroids, anti-inflammatory drugs or other therapeutic medications. This code should not be used to report administration of sedatives, anesthetic or reversal agents. This code should be re
D9630	\$25.00	other drugs and/or medicaments, by report	Includes, but is not limited to oral antibiotics, oral analgesics, and topical fluoride dispensed in the office for home use; does not include writing prescriptions.
D9910	\$43.00	application of desensitizing medicament	Includes in-office treatment for root sensitivity. Typically reported on a "per visit" basis for application of topical fluoride. This code is not to be used for bases, liners or adhesives used under restorations.
D9911	\$54.00	application of desensitizing resin for cervical and/or root surface, per tooth	Typically reported on a "per tooth" basis for application of adhesive resins. This code is not to be used for bases, liners, or adhesives used under restorations.
D9920	\$89.00	behavior management, by report	May be reported in addition to treatment provided. Should be reported in 15-minute increments.
D9930	\$97.00	treatment of complications (post-surgical) - unusual circumstances, by report	For example, treatment of a dry socket following extraction or removal of bony sequestrum.
D9940	\$426.00	occlusal guard, by report	Removable dental appliances, which are designed to minimize the effects of bruxism (grinding) and other occlusal factors.
D9941	\$162.00	fabrication of athletic mouthguard	
D9942	\$161.00	repair and/or reline of occlusal guard	
D9950	\$233.00	occlusion analysis - mounted case	Includes, but is not limited to, facebow, interocclusal records tracings, and diagnostic wax-up; for diagnostic casts, see D0470.
D9951	\$119.00	occlusal adjustment - limited	Revised CDT - 2007 Nomenclature or Descriptor. May also be known as equilibration; reshaping the occlusal surfaces of teeth to create harmonious contact relationships between the maxillary and mandibular teeth. Presently includes discing/odontoplasty/e
D9952	\$484.00	occlusal adjustment - complete	Occlusal adjustment may require several appointments of varying length, and sedation may be necessary to attain adequate relaxation of the musculature. Study casts mounted on an articulating instrument may be utilized for analysis of occlusal disharmony
D9970	\$149.00	enamel microabrasion	The removal of discolored surface enamel defects resulting from altered mineralization or decalcification of the superficial enamel layer. Submit per treatment visit.
D9971	\$109.00	odontoplasty 1 - 2 teeth; includes removal of enamel projections	
D9972	\$209.00	external bleaching - per arch	
D9973	\$169.00	external bleaching - per tooth	

D9974	\$202.00	internal bleaching - per tooth	
D9999	By Report	unspecified adjunctive procedure, by report	Used for procedure that is not adequately described by a code. Describe procedure.