

Covered and Non-Covered Dental Services

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		Under age 21	Age 21 and over, non-pregnant adults	Pregnant adults		
D0120	periodic oral eval-established patient	Yes	Yes	Yes		Line 53-Preventive dental svcs.GLN 17
D0140	limited oral eval-problem focus	Yes	Yes	Yes		Line 54-Dental conditions (e.g. infection, pain trauma)
D0145	oral evaluation, pt < 3yrs	Yes	No	No		Line 53-Preventive dental svcs..GLN 17
D0150	comprehensive oral eval-new or established	Yes	Yes	Yes		Line 53-Preventive dental svcs..GLN 17
D0160	extensive oral eval-problem focus	Yes	Yes	Yes		Line 54-Dental conditions (e.g. infection, pain trauma)
D0170	re-eval limited, problem focus	Yes	Yes	Yes		Line 54-Dental conditions (e.g. infection, pain trauma)
D0171	re-eval post operative office visit	No	No	No		Excluded File (travel vaccines etc.)
D0180	comp periodic eval-new or established	Yes	Yes	Yes		Line 53-Preventive dental svcs..GLN 17
D0190	screening of a patient	No	No	No		Excluded File (travel vaccines etc.)
D0191	assessment of a patient	Yes	Yes	Yes		Line 53-Preventive dental svcs.Line 3 Prevention services with evidence of effectiveness .GLN 17-bundled
D0210	intraoral-complete series	Yes	Yes	Yes		Diagnostic procedure
D0220	intraoral-periapical first radiographic image	Yes	Yes	Yes		Diagnostic procedure
D0230	introral-periapical each addtl	Yes	Yes	Yes		Diagnostic procedure
D0240	intraoral-occlusal	Yes	Yes	Yes		Diagnostic procedure

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D0250	extraoral-2D projection radiographic image created using a stationary radiatin source, and detector	Yes	Yes	Yes		Diagnostic procedure
D0251	extra-oral posterior dental radiographic image	Yes	Yes	Yes		Diagnostic procedure
D0260	extraoral-each addtl	No	No	No		Diagnostic procedure
D0270	bitewing-single	Yes	Yes	Yes		Diagnostic procedure
D0272	bitewing-two radiographic images	Yes	Yes	Yes		Diagnostic procedure
D0273	bitewing-three radiographic images	Yes	Yes	Yes		Diagnostic procedure
D0274	bitewing-four radiographic images	Yes	Yes	Yes		Diagnostic procedure
D0277	vertical bitewing 7-8	Yes	Yes	Yes		Diagnostic procedure
D0290	posterior-anterior or skull & facial radiographic image	Yes	Yes	Yes		Diagnostic procedure
D0310	sialography	No	No	No	L	Diagnostic procedure
D0320	TMJ arthrogram	No	No	No		Diagnostic procedure
D0321	other TMJ radiographic images	Yes	Yes	Yes		Diagnostic procedure
D0322	tomographic survey	Yes	Yes	Yes	BR	Diagnostic procedure
D0330	panoramic radiographic image	Yes	Yes	Yes		Diagnostic procedure
D0340	2D cephalometric radiographic image - acquisition, measurement and analysis	No	No	No		Line 618: Dental conditions (e.g., malocclusion)
D0350	2D oral/facial photographic image	No	No	No		Line 618: Dental conditions (e.g., malocclusion)
D0351	3D photographic image	No	No	No		Excluded File (travel vaccines etc.)
D0364	cone beam, less than one whole jaw	Yes	No	No		Line 256,Deformities of the head, GLN 169

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D0365	cone beam, mandible	Yes	No	No		Line 256,Deformities of the head, GLN 169
D0366	cone beam, maxilla	Yes	No	No		Line 256,Deformities of the head, GLN 169
D0367	cone beam, both jaws	Yes	No	No		Line 256,Deformities of the head, GLN 169
D0368	cone beam for TMJ series	No	No	No		Excluded File (travel vaccines etc.)
D0369	maxillofacial MRI	No	No	No		Excluded File (travel vaccines etc.)
D0370	maxillofacial ultrasound	No	No	No		Excluded File (travel vaccines etc.)
D0371	sialoendoscopy	No	No	No		Excluded File (travel vaccines etc.)
D0380	cone beam image only, less than one whole jaw	No	No	No		Excluded File (travel vaccines etc.)
D0381	cone beam image only, mandible	No	No	No		Excluded File (travel vaccines etc.)
D0382	cone beam image only, maxilla	No	No	No		Excluded File (travel vaccines etc.)
D0383	cone beam image only,both jaws	No	No	No		Excluded File (travel vaccines etc.)
D0384	cone beam image only, for TMJ series	No	No	No		Excluded File (travel vaccines etc.)
D0385	maxillofacial MRI image only	No	No	No		Excluded File (travel vaccines etc.)
D0386	maxillofacial ultrasound image only	No	No	No		Excluded File (travel vaccines etc.)
D0391	interpretation of image by other practitioner	No	No	No		Excluded File (travel vaccines etc.)
D0393	treatment simulation using 3D image volume	No	No	No		Line 619-Dental conditions (e.g.missing teeth)
D0394	digital subtraction of two or more images or image volumes	No	No	No		Line 619-Dental conditions (e.g.missing teeth)
D0395	fusion of two or more 3D image volumes	No	No	No		Line 619-Dental conditions (e.g.missing teeth)
D0411	HbA1c in office point of service	Yes	Yes	Yes	Bill on CMS 1500	Diagnostic dental procedure

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D0412	blood glucose level test - in office using a glucose meter	No	No	No		Diagnostic-Not in scope procedure
D0414	Laboratory processing of microbial specimen to include culture and sensitivity studies, preparation and transmission of written report	No	No	No	L	Diagnostic procedure
D0415	collection for culture and sensitivity	Yes	Yes	Yes	BR	Diagnostic procedure
D0416	viral culture	No	No	No		Excluded File (travel vaccines etc.)
D0417	collection and prep of saliva sample	No	No	No		Excluded File (travel vaccines etc.)
D0418	analysis of saliva sample	No	No	No		Excluded File (travel vaccines etc.)
D0419	assessment of salivary flow by measurement	No	No	No		Excluded File (travel vaccines etc.)
D0421	Genetic test for susceptibility to oral diseases	No	No	No		Excluded File (travel vaccines etc.)
D0422	collection and preparation of genetic sample	No	No	No		Line 662: Conditions for which certain interventions are unproven, have no clinically important benefit or have harms that outweigh benefits
D0423	genetic test for susceptibility to diseases – specimen analysis	No	No	No		Line 662: Conditions for which certain interventions are unproven, have no clinically important benefit or have harms that outweigh benefits
D0425	caries susceptibility tests	No	No	No		Excluded File (travel vaccines etc.)
D0431	adjunctive pre-diagnostic test	No	No	No		Excluded File (travel vaccines etc.)
D0460	pulp vitality	No	No	No		Excluded File (travel vaccines etc.)
D0470	diagnostic casts	No	No	No		Excluded File (travel vaccines etc.)
D0472	accession of tissue	No	No	No		Diagnostic procedure
D0473	accession of tissue	No	No	No		Diagnostic procedure

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D0474	accession of tissue	No	No	No		Diagnostic procedure
D0475	decalcification proc	No	No	No		Excluded File (travel vaccines etc.)
D0476	special stains for microorganism	No	No	No		Excluded File (travel vaccines etc.)
D0477	special stains not for microorganism	No	No	No		Excluded File (travel vaccines etc.)
D0478	immunohistochemical stains	No	No	No		Excluded File (travel vaccines etc.)
D0479	tissue in-situ hybridization	No	No	No		Excluded File (travel vaccines etc.)
D0480	accession of exfoliative cytologic smears	No	No	No		Diagnostic proc.
D0481	electron microscopy	No	No	No		Excluded File (travel vaccines etc.)
D0482	direct immunofluorescence	No	No	No		Excluded File (travel vaccines etc.)
D0483	indirect immunofluorescence	No	No	No		Excluded File (travel vaccines etc.)
D0484	consult on slides prepared elsewhere	No	No	No		Excluded File (travel vaccines etc.)
D0485	consultation	No	No	No		Excluded File (travel vaccines etc.)
D0486	accession of brush biopsy	No	No	No		Diagnostic proc.
D0502	other oral path proc	No	No	No		Diagnostic proc.
D0600	Other oral pathology procedures, by report	No	No	No	BR	Excluded File (travel vaccines etc.)
D0601	caries risk assessment and documentation, low risk	No	No	No		Line 53--dental svcs.,GLN 17, bundled
D0602	caries risk assessment and documentation, moderate risk	No	No	No		Line 53--dental svcs.,GLN 17, bundled
D0603	caries risk assessment and documentation, high risk	No	No	No		Line 53--dental svcs.,GLN 17, bundled
D0999	unspecified diagnostic proc	No	No	No		Excluded File (travel vaccines etc.)
D1110	prophylaxis-adult	No	Yes	Yes		Line 53-Preventive dental svcs.,GLN 17
D1120	prophylaxis-child	Yes	No	No		Line 53-Preventive dental svcs.,GLN 17

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D1206	topical fluoride varnish	Yes	Yes	Yes		Line 53 Preventive dental svcs. Line 3 Prevention services with evidence of effectiveness - GLN 17
D1208	topical application of fluoride	Yes	Yes	Yes		Line 53 Preventive dental svcs GLN 17
D1310	nutritional counseling	No	No	No		Line 53-Preventive dental svcs..GLN 17, bundled
D1320	tobacco counseling	Yes	Yes	Yes		Line 5-Multisector intervention- tobacco dependence, GLN 4
D1330	oral hygiene instructions	No	No	No		Line 53-Preventive dental svcs. GLN17, bundled
D1351	sealant	Yes	No	No		Line 53-Preventive dental svcs. GLN17
D1352	preventive resin restoration, mod to high risk - permanent tooth	No	No	No		Excluded File (travel vaccines etc.)
D1353	sealant repair - per tooth	No	No	No		Excluded File (travel vaccines etc.)
D1354	interim caries arresting medicament application- per tooth	Yes	Yes	Yes		Line 343 -Dental Conditions (e.g. caries, fractured tooth), GLN 91, 123
D1510	space maintainer-fixed unilateral	Yes	No	No		Line 53-Preventive dental svcs. .GLN 17
D1516	space maintainer - fixed-bilateral, maxillary	Yes	No	No		Line 53-Preventive dental svcs.GLN 17.
D1517	space maintainer - fixed-bilateral -,mandibular	Yes	No	No		Line 53-Preventive dental svcs.GLN 17.
D1520	space maintainer-removable unilateral	Yes	No	No		Line 53-Preventive dental svcs.GLN 17.
D1526	space maintainer - removalbel, bilateral, maxillary	Yes	No	No		Line 53-Preventive dental svcs.GLN 17.
D1527	space maintainer - removalbel, bilateral, mandibular	Yes	No	No		Line 53-Preventive dental svcs.GLN 17.
D1550-deleted 2020	re-cement or re-bond space maintainer	No	No	No		Line 53-Preventive dental svcs..GLN 17

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D1551	Re-cement or re-bond bilateral space maintainer – maxillary	Yes	No	No		Line 53-Preventive dental svcs..GLN 17
D1552	Re-cement or re-bond bilateral space maintainer – mandibular	Yes	No	No		Line 53-Preventive dental svcs..GLN 17
D1553	Re-cement or re-bond unilateral space maintainer – per quadrant	Yes	No	No		Line 53-Preventive dental svcs..GLN 17
D1555-deleted 2020	removal fixed space maintainer	No	No	No		Line 53-Preventive dental svcs..GLN 17
D1556	Removal of fixed unilateral space maintainer – per quadrant	Yes	No	No		Line 53-Preventive dental svcs..GLN 17
D1557	Removal of fixed bilateral space maintainer – maxillary	Yes	No	No		Line 53-Preventive dental svcs..GLN 17
D1558	Removal of fixed bilateral space maintainer – mandibular	Yes	No	No		Line 53-Preventive dental svcs..GLN 17
D1575	Distal shoe space maintainer-fixed unilateral	Yes	No	No		Line 53-Preventive dental svcs..GLN 17
D1999	unspecified preventive procedure	No	No	No		Excluded File (travel vaccines etc.)
D2140	amalgam-1 surface prim or perm	Yes	Yes	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123
D2150	amalgam-2 surface prim or perm	Yes	Yes	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91, 123
D2160	amalgam-3 surface prim or perm	Yes	Yes	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123
D2161	amalgam-4 or more surface prim or perm	Yes	Yes	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123

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D2330	resin based composite- 1 anterior	Yes	Yes	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123
D2331	resin based composite- 2 anterior	Yes	Yes	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123
D2332	resin based composite- 3 anterior	Yes	Yes	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123
D2335	resin based composite- 4 or > anterior	Yes	Yes	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123
D2390	resin based composite-crown anterior	Yes	No	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123
D2391	resin based composite- 1 posterior	Yes	Yes	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123
D2392	resin based composite- 2 posterior	Yes	Yes	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123
D2393	resin based composite- 3 posterior	Yes	Yes	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123
D2394	resin based composite- 4 or > posterior	Yes	Yes	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123
D2410	gold foil- 1 surface	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2420	gold foil- 2 surface	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2430	gold foil- 3 surface	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)

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D2510	inlay metallic- 1 surface	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2520	inlay metallic- 2 surface	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2530	inlay metallic- 3 or more surface	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2542	onlay metallic- 2 surface	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2543	onlay metallic- 3 surface	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2544	onlay metallic- 4 or more surface	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2610	inlay porcelain/ceramic- 1 surface	No	No	No		Line 645- Dental conditions where treatment is chosen primarily for aesthetic considerations
D2620	inlay porcelain/ceramic- 2 surface	No	No	No		Line 645- Dental conditions where treatment is chosen primarily for aesthetic considerations
D2630	inlay porcelain/ceramic- 3 or more surface	No	No	No		Line 645- Dental conditions where treatment is chosen primarily for aesthetic considerations
D2642	onlay porcelain/ceramic- 2 surface	No	No	No		Line 645- Dental conditions where treatment is chosen primarily for aesthetic considerations

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		Under age 21	Age 21 and over, non-pregnant adults	Pregnant adults		
D2643	onlay porcelain/ceramic-3 surface	No	No	No		Line 645- Dental conditions where treatment is chosen primarily for aesthetic considerations
D2644	onlay porcelain/ceramic- 4 or more surface	No	No	No		Line 645- Dental conditions where treatment is chosen primarily for aesthetic considerations
D2650	inlay resin-based composite- 1 surface	No	No	No		Line 645- Dental conditions where treatment is chosen primarily for aesthetic considerations
D2651	inlay resin-based composite- 2 surface	No	No	No		Line 645-Dental conditions (e.g. caries, fractured tooth)
D2652	inlay resin-based composite- 3 or > surface	No	No	No		Line 645- Dental conditions where treatment is chosen primarily for aesthetic considerations
D2662	onlay resin-based composite- 2 surface	No	No	No		Line 645- Dental conditions where treatment is chosen primarily for aesthetic considerations
D2663	onlay resin-based composite- 3 surface	No	No	No		Line 645- Dental conditions where treatment is chosen primarily for aesthetic considerations
D2664	onlay resin-based composite- 4 or > surface	No	No	No		Line 645- Dental conditions where treatment is chosen primarily for aesthetic considerations
D2710	crown resin based composite	Yes	No	Yes		Line 468: Dental conditions (e.g., caries, fractured tooth)

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D2712	crown 3/4 resin based composite	Yes	No	Yes		Line 468- Dental conditions (e.g., caries, fractured tooth)
D2720	crown resin with high noble metal	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2721	crown resin with predominantly base metal	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2722	crown resin with noble metal	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2740	crown porcelain/ceramic	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2750	crown porcelain fused to high noble metal	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2751	crown porcelain fused to predom base metal	Yes	No	Yes		Line 468- Dental conditions (e.g., caries, fractured tooth)
D2752	crown porcelain fused to noble metal	Yes	No	Yes		Line 468- Dental conditions (e.g., caries, fractured tooth)
D2753	Crown - porcelain fused to titanium or titanium alloy	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2780	crown 3/4 cast high noble metal	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2781	crown 3/4 cast predominantly base metal	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2782	crown 3/4 cast noble metal	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)

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D2783	crown 3/4 porcelain/ceramic	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2790	crown full cast high noble metal	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2791	crown full cast predominantly base metal	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2792	crown full cast noble metal	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2794-delete as of 2020	crown titanium	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2799	provisional crown	No	No	No		646: Dental conditions where treatment results in marginal improvement
D2910	re-cement or re-bond inlay, onlay, veneer or part coverage restoration	Yes	Yes	Yes		Line 267: Dental conditions (time sensitive events)
D2915	re-cement or re-bond indirectly fabricated or prefabricated post and core	Yes	Yes	Yes		Line 267: Dental conditions (time sensitive events)
D2920	re-cement or re-bond crown	Yes	Yes	Yes		Line 267: Dental conditions (time sensitive events)
D2921	reattachment of tooth fragment	Yes	Yes	Yes		Line 267: Dental conditions (time sensitive events)
D2929	prefab porcelain/ceramic crown, primary	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2930	crown prefabricated stainless steel prim	Yes	Yes	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123

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D2931	crown prefabricated stainless steel perm	Yes	Yes	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123
D2932	crown prefabricated resin	Yes	No	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123
D2933	crown prefab stainless steel w resin window	Yes	No	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123
D2934	crown prefab esthetic coated stainless steel prim	No	No	No		Line 645-Dental conditions where treatment is chosen primarily for aesthetic considerations
D2940	protective restoration	Yes	Yes	Yes		Line 267---Dental conditions (e.g. caries, fractured tooth)
D2941	interim therapeutic restoration - primary dentition	Yes	Yes	Yes		Line 343-Dental conditions (e.g. caries, fractured tooth), GLN 91,123
D2949	restorative foundation for indirect restoration	No	No	No		Line 591-Dental conditions (e.g. caries, fractured tooth)
D2950	core buildup	Yes	No	Yes		Line 343: Dental conditions (e.g., caries, fractured tooth),GLN 91,123 Line 267: Dental conditions (time sensitive events)
D2951	pin retention	Yes	Yes	Yes		Line 343-Dental conditions (e.g., caries, fractured tooth),GLN 91,123
D2952	post & core in addt to crown, indirectly fabricated	No	No	No		Line 591-Dental conditions (e.g., caries, fractured tooth)
D2953	post-each addtl indirectly fabricated	No	No	No		Line 591-Dental conditions (e.g., caries, fractured tooth)

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D2954	prefabricated post & core	Yes	No	Yes		Line 343-Dental conditions (e.g., caries, fractured tooth).GLN 91,123
D2955	post removal	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D2957	prefabricated post -each addtl	Yes	No	Yes		Line 343: Dental conditions (e.g., caries, fractured tooth).GLN 91,123
D2960	labial veneer, resin laminate - chairside	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D2961	labial veneer, resin laminate - laboratory	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D2962	labial veneer, porcelain laminate - laboratory	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D2970	Temporary crown (fractured tooth)	No	No	No		Line 267: Dental conditions (time sensitive events)-CMS closed code in 2015
D2971	construct new crown under existing partial	No	No	No		Line 591-Dental conditions (e.g., caries, fractured tooth)
D2975	coping	No	No	No		Excluded File (travel vaccines etc.)
D2980	crown repair	Yes	Yes	Yes		Line 343-Dental conditions (e.g., caries, fractured tooth),GLN 91,123

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D2981	inlay repair	No	No	No		Line 591-Dental conditions (e.g., caries, fractured tooth)
D2982	onlay repair	No	No	No		Line 591-Dental conditions (e.g., caries, fractured tooth)
D2983	veneer repair	No	No	No		Line 645- Dental conditions where treatment is chosen primarily for aesthetic considerations
D2990	resin infiltration of smooth surface lesions	No	No	No		Line 646- Dental conditions where treatment results in marginal improvement
D2999	unspecified restorative proc	No	No	No		Ancillary procedure
D3110	pulp cap direct	No	No	No		Line 54: Dental conditions (e.g., infection, pain, trauma)
D3120	pulp cap indirect	No	No	No		Line 267 Dental conditions (time sensitive events)
D3220	therapeutic pulpotomy	Yes	Yes	Yes		Line 267 Dental conditions (time sensitive events)
D3221	pulpal debridement	Yes	Yes	Yes		Line 54 Dental conditions (e.g., infection, pain, trauma)
D3222	partial pulpotomy for apexogenesis	Yes	Yes	Yes		Line 267: Dental conditions (time sensitive events)
D3230	pulpal therapy - anterior, primary	Yes	No	No		Line 267: Dental conditions (time sensitive events)
D3240	pulpal therapy - posterior, primary	Yes	No	No		Line 267: Dental conditions (time sensitive events)

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D3310	anterior	Yes	Yes	Yes		Line 384: Dental conditions (e.g., pulpal pathology, permanent anterior tooth)
D3320	bicuspid	Yes	Yes	Yes		Line 411: Dental conditions (e.g., pulpal pathology, permanent bicuspid/premolar tooth)
D3330	molar	Yes	No	Yes 1st molar		Line 443: Dental conditions (e.g., pulpal pathology, permanent molar tooth)
D3331	root canal obstruction, non surgical	Yes	Yes	Yes		Line 457: Dental conditions (e.g., pulpal pathology, permanent anterior tooth) Line 507: Dental conditions (e.g., pulpal pathology, permanent bicuspid/premolar tooth) Line 537: Dental conditions (e.g., pulpal pathology, permanent molar tooth)
D3332	incomplete endodontic therapy	Yes	Yes	Yes	BR	Line 384: Dental conditions (e.g., pulpal pathology, permanent anterior tooth) Line 411: Dental conditions (e.g., pulpal pathology, permanent bicuspid/premolar tooth) Line 443: Dental conditions (e.g., pulpal pathology, permanent molar tooth)

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D3333	internal root repair of perforation defects	Yes	Yes	Yes	BR	Line 457: Dental conditions (e.g., pulpal pathology, permanent anterior tooth) Line 507: Dental conditions (e.g., pulpal pathology, permanent bicuspid/premolar tooth) Line 537: Dental conditions (e.g., pulpal pathology, permanent molar tooth)
D3346	previous root canal therapy-anterior	Yes	Yes	Yes	BR	Line 457: Dental conditions (e.g., pulpal pathology, permanent anterior tooth)
D3347	previous root canal therapy-bicuspid	No	No	No		Line 507: Dental conditions (e.g., pulpal pathology, permanent bicuspid/premolar tooth)
D3348	previous root canal therapy-molar	No	No	No		Line 537: Dental conditions (e.g., pulpal pathology, permanent molar tooth)
D3351	apexification/recalcification-initial visit	Yes	No	Yes		Line 267: Dental conditions (time sensitive events)
D3352	apexification/recalcification-interim medication replacement	Yes	No	Yes		Line 267: Dental conditions (time sensitive events)
D3353	apexification/recalcification-final visit	Yes	No	Yes	BR	Line 267: Dental conditions (time sensitive events)
D3355	pulpal regeneration-initial visit	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement

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D3356	pulpal regeneration-interim medication replacement	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D3357	pulpal regeneration-completion of treatment	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D3410	apicoectomy-anterior	Yes	Yes	Yes		Line 457: Dental conditions (e.g., pulpal pathology, permanent anterior tooth)
D3421	apicoectomy-bicuspid	No	No	No		Line 507: Dental conditions (e.g., pulpal pathology, permanent bicuspid/premolar tooth)
D3425	apicoectomy-molar	No	No	No		Line 537: Dental conditions (e.g., pulpal pathology, permanent molar tooth)
D3426	apicoectomy/periradicular surgery-each addtl root	No	No	No		Line 505: Dental conditions (e.g., pulpal pathology, permanent bicuspid/premolar tooth) Line 535: Dental conditions (e.g., pulpal pathology, permanent molar tooth)
D3427	periradicular surgery without apicoectomy	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D3428	bone graft in conjunction with periradicular surgery	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement

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D3429	each additional contiguous tooth	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D3430	retrograde filling	Yes	Yes	Yes	BR	Line 457: Dental conditions (e.g., pulpal pathology, permanent anterior tooth) Line 507: Dental conditions (e.g., pulpal pathology, permanent bicuspid/premolar tooth) Line 537: Dental conditions (e.g., pulpal pathology, permanent molar tooth)
D3431	biologic materials to aid in soft and osseous tissue regeneration	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D3432	guided tissue regeneration	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D3450	root amputation	No	No	No		Line 507: Dental conditions (e.g., pulpal pathology, permanent bicuspid/premolar tooth) Line 537: Dental conditions (e.g., pulpal pathology, permanent molar tooth)

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D3460	endodontic endosseous implant	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D3470	reimplantation	No	No	No		Line 645: Dental conditions where treatment results in marginal improvement
D3910	surgical proc for isolation of tooth w rubber dam	No	No	No		Ancillary
D3920	hemisection	No	No	No		Line 645: Dental conditions where treatment results in marginal improvement
D3950	canal prep	No	No	No		Line 645: Dental conditions where treatment results in marginal improvement
D3999	unspecified endodontic proc	No	No	No		Ancillary
D4210	gingivectomy/gingivoplasty- 4 or more teeth	Yes	Yes	Yes		Line 218: Dental conditions (e.g., periodontal disease)-GLN 53
D4211	gingivectomy/gingivoplasty- 1 to 3 teeth	Yes	Yes	Yes		Line 218: Dental conditions (e.g., periodontal disease)-GLN 53
D4212	gingivectomy/gingivoplasty- per tooth	No	No	No		Line 218: Dental conditions (e.g., periodontal disease)-GLN 53, bundled
D4230	anatomical crown exposure- 4 or > teeth	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations

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D4231	anatomical crown exposure- 1 to 3 teeth	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D4240	gingival flap proc- 4 or more teeth	No	No	No		Line 492:Dental conditions (e.g., periodontal disease)
D4241	gingival flap proc- 1 to 3 teeth	No	No	No		Line 492:Dental conditions (e.g., periodontal disease)
D4245	apically positioned flap	No	No	No		Line 492:Dental conditions (e.g., periodontal disease)
D4249	clinical crown lengthening	No	No	No		591: Dental conditions (e.g., caries, fractured tooth)
D4260	osseous surgery- 4 or more teeth	No	No	No		Line 492:Dental conditions (e.g., periodontal disease)
D4261	osseous surgery- 1 to 3 teeth	No	No	No		Line 492:Dental conditions (e.g., periodontal disease)
D4263	bone replacement graft- first site	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D4264	bone replacement graft- each addtl site	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D4265	biologic materials	No	No	No		Excluded File (travel vaccines etc.)
D4266	tissue regeneration, resorbable barrier	No	No	No		Excluded File (travel vaccines etc.)
D4267	tissue regeneration, nonresorbable barrier	No	No	No		Excluded File (travel vaccines etc.)

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D4268	surgical revision	No	No	No		Line 492:Dental conditions (e.g., periodontal disease)
D4270	pedicle soft tissue graft	No	No	No		Line 492:Dental conditions (e.g., periodontal disease)
D4273	autogenous connective tissue graft procedure (including donor and recipient surgical sites) - first tooth, implant or edentulous tooth position in the same graft site	No	No	No		Line 492:Dental conditions (e.g., periodontal disease)
D4274	distal or proximal wedge	No	No	No		Line 492:Dental conditions (e.g., periodontal disease)
D4275	non-autogenous connective tissue graft procedure (including recipient surgical site and donor material) - first tooth, implant or edentulous tooth position in same graft site	No	No	No		Line 492: Dental conditions (e.g., periodontal disease, Excluded File (travel vaccines etc.))
D4276	combined connective tissue & pedicle graft	No	No	No		Line 492:Dental conditions (e.g., periodontal disease,Excluded File (travel vaccines etc.))
D4277	free soft tissue graft procedure (including recipient and donor surgical sites), first tooth, implant, or edentulous tooth position in graft	No	No	No		Line 492:Dental conditions (e.g., periodontal disease)
D4278	free soft tissue graft procedure (including recipient and donor surgical sites), each additional contiguous tooth, implant, or edentulous tooth position in same graft site.	No	No	No		Line 492:Dental conditions (e.g., periodontal disease)

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D4283	autogenous connective tissue graft procedure (including donor and recipient surgical sites) - each additional contiguous tooth, implant or edentulous tooth position in the same graft site	No	No	No		Line 492:Dental conditions (e.g., periodontal disease)
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	No	No	No		Line 492:Dental conditions (e.g., periodontal disease)
D4320	provisional splinting- intracoronal	No	No	No		492: Dental conditions (e.g., periodontal disease), bundled
D4321	provisional splinting- extracoronal	No	No	No		492: Dental conditions (e.g., periodontal disease), bundled
D4341	periodontal scaling- 4 or more teeth- single implants may be covered by counting the implant as an add'l tooth.	Yes	Yes	Yes		Line 218: Dental conditions (e.g., periodontal disease), GLN 53
D4342	periodontal scaling- 1 to 3 teeth-single implants may be covered by counting the implant as an add'l tooth.	Yes	Yes	Yes		Line 218:Dental conditions (e.g., periodontal disease)-GLN 53
D4346	scaling in presence of generalized moderate to severe inflammation -full mouth after oral eval.	Yes	Yes	Yes		Line 53: Preventive dental services, GLN 17

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D4355	full mouth debridement	Yes	Yes	Yes		Line 53: Preventive dental services, GLN 17
D4381	localized delivery of antimicrobial agents	No	No	No		492: Dental conditions (e.g., periodontal disease)
D4910	periodontal maintenance	Yes	Yes	Yes		218: Dental conditions (e.g., periodontal disease)
D4920	unscheduled dressing change	Yes	Yes	Yes	BR	267: Dental conditions (time sensitive events)
D4921	gingival irrigation-per quadrant	No	No	No		Excluded File (travel vaccines etc.)
D4999	unspecified periodontal proc	No	No	No		Ancillary
D5110	complete denture-maxillary	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5120	complete denture-mandibular	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5130	immediate denture-maxillary	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5140	immediate denture-mandibular	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5211	partial denture-maxillary-resin	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5212	partial denture-mandibular-resin	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117

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D5213	partial denture-maxillary-cast metal	No	No	No		591: Dental conditions (e.g., caries, fractured tooth)
D5214	partial denture-mandibular-cast metal	No	No	No		Line 591:Dental conditions (e.g., caries, fractured tooth)
D5221	immediate maxillary partial denture - resin base (including any conventional clasps, rests and teeth)	Yes	Yes	Yes		Line 453: Dental conditions (e.g., missing teeth, prosthesis failure)
D5222	immediate mandibular partial denture - resin base (including any conventional clasps, rests and teeth)	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5223	immediate maxillary partial denture - cast metal framework with resin denture bases (including any conventional clasps, rest and teeth)	No	No	No		Line 591:Dental conditions (e.g., caries, fractured tooth)
D5224	immediate mandibular partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	No	No	No		Line 591:Dental conditions (e.g., caries, fractured tooth)
D5225	partial denture-maxillary-flexible base	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D5226	partial denture-mandibular-flexible base	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement

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D5282	removable unilateral partial denture - one piece cast metal (incl. clasp and teeth) maxillary- replaces D5281	No	No	No		Line 591:Dental conditions (e.g., caries, fractured tooth)
D5283	removable unilateral partial denture - one piece cast metal (incl. clasp and teeth) mandibular- replaces D5281	No	No	No		Line 591:Dental conditions (e.g., caries, fractured tooth)
D5284	Removable unilateral partial denture – one piece flexible base (including clasps and teeth)- per quadrant	No	No	No		Line 591:Dental conditions (e.g., caries, fractured tooth)
D5286	Removable unilateral partial denture – one piece resin (including clasps and teeth) - per quadrant	No	No	No		Line 591:Dental conditions (e.g., caries, fractured tooth)
D5410	adjust complete denture-maxillary	Yes	Yes	Yes		267: Dental conditions (time sensitive events)
D5411	adjust complete denture-mandibular	Yes	Yes	Yes		Line 267: Dental conditions (time sensitive events)
D5421	adjust partial denture-maxillary	Yes	Yes	Yes		Line 267: Dental conditions (time sensitive events)
D5422	adjust partial denture-mandibular	Yes	Yes	Yes		Line 267: Dental conditions (time sensitive events)
D5511	repair broken complete denture base, mandibular	Yes	Yes	Yes		Line 453: Dental conditions (e.g., missing teeth, prosthesis failure))
D5512	repair broken complete denture base, maxillary	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5520	replace missing or broken teeth-complete denture(each tooth)	Yes	Yes	Yes		Line 453: Dental conditions (e.g., missing teeth, prosthesis failure)

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D5611	repair resin partial denture base, mandibular	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5612	repair resin partial denture base, maxillary	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5621	repair cast partial framework, mandibular	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5622	repair cast partial framework, maxillary.	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5630	repair/replace broken clasp - per tooth	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5640	replace broken tooth	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5650	add tooth to existing partial denture	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5660	add clasp to existing partial denture - per tooth	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5670	replace all teeth-maxillary	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5671	replace all teeth-mandibular	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5710	rebase complete denture-maxillary	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5711	rebase complete denture-mandibular	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117

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D5720	rebase partial denture-maxillary	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5721	rebase partial denture-mandibular	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5730	reline complete denture-maxillary	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5731	reline complete denture-mandibular	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5740	reline partial denture-maxillary	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5741	reline partial denture-mandibular	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5750	reline complete denture-maxillary-lab	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5751	reline complete denture-mandibular-lab	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5760	reline partial denture-maxillary-lab	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5761	reline partial denture-mandibular-lab	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5810	interim complete denture-maxillary	No	No	No		Line 591:Dental conditions (e.g., caries, fractured tooth)
D5811	interim complete denture-mandibular	No	No	No		Line 591:Dental conditions (e.g., caries, fractured tooth)

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D5820	interim partial denture-maxillary	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5821	interim partial denture-mandibular	Yes	Yes	Yes		Line 453:Dental conditions (e.g., missing teeth, prosthesis failure), GLN 117
D5850	tissue conditioning-maxillary	Yes	Yes	Yes		Line 267:Dental conditions (time sensitive events)
D5851	tissue conditioning-mandibular	Yes	Yes	Yes		Line 267:Dental conditions (time sensitive events)
D5862	precision attachment	No	No	No		Line 601: Dental conditions (e.g., caries, fractured tooth)
D5863	overdenture-complete maxillary	No	No	No		Line 601:Dental conditions (e.g., caries, fractured tooth)
D5864	overdenture-partial maxillary	No	No	No		Line 601: Dental conditions (e.g., missing teeth)
D5865	overdenture-complete mandibular	No	No	No		Line 601: Dental conditions (e.g., missing teeth)
D5866	overdenture-partial mandibular	No	No	No		Line 601: Dental conditions (e.g., missing teeth)
D5867	replace semi-precision or precision attachment	No	No	No		Line 591:Dental conditions (e.g., caries, fractured tooth)
D5875	modification of removable prosthesis	No	No	No		Line 591:Dental conditions (e.g., caries, fractured tooth)
D5876	add metal substructure to acrylic full denture (per arch)	Yes	Yes	Yes		Line 453: Dental Conditions (e.g., Missing teeth, Prosthesis failure)
D5899	unspecified removable prosthodontic proc	No	No	No		Ancillary

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D5911	facial moulage-sectional	No	No	No	L	Ancillary
D5912	facial moulage-complete	No	No	No	L	Ancillary
D5913	nasal prosthesis	No	No	No	L	Ancillary
D5914	auricular prosthesis	No	No	No	L	Line 602: Congenital anomalies of the ear without impairment of hearing; unilateral anomalies of the ear
D5915	orbital prosthesis	No	No	No	L	Line 256: Deformities of head GLN 169,Line 482: Enophthalmos
D5916	ocular prosthesis	No	No	No	L	Ancillary
D5919	facial prosthesis	No	No	No	L	Line 256: Deformities of head, GLN 169
D5922	nasal septal prosthesis	No	No	No	L	Ancillary
D5923	ocular prosthesis-interim	No	No	No	L	Ancillary
D5924	cranial prosthesis	No	No	No	L	Line 256: Deformities of head, GLN 169
D5925	facial augmentation	No	No	No	L	Line 256: Deformities of hea, GLN, 169
D5926	nasal prosthesis-replacement	No	No	No	L	Ancillary
D5927	auricular prosthesis-replacement	No	No	No	L	Line 602: Congenital anomalies of the ear without impairment of hearing; unilateral anomalies of the ear
D5928	orbital prosthesis-replacement	No	No	No	L	Line 256: Deformities of head, GLN 169 482: Enophthalmos
D5929	facial prosthesis-replacement	No	No	No	L	Line 256: Deformities of head, 169
D5931	obturator prosthesis-surgical	No	No	No	L	Line 256: Deformities of head, GLN 169
D5932	obturator prosthesis-definitive	No	No	No	L	Line 300: Cleft palate and/or cleft lip
D5933	obturator prosthesis-modification	No	No	No	L	256: Deformities of head Line, GLN 169 300: Cleft palate and/or cleft lip

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D5934	mandibular resection prosthesis w guide flange	No	No	No	L	200: Cancer of bones
D5935	mandibular resection prosthesis w/o guide flange	No	No	No	L	Line 200: Cancer of bones
D5936	obturator prosthesis-interim	No	No	No	L	Ancillary
D5937	trismus appliance	No	No	No	L	Line 71: Neurological dysfunction in breathing, eating, swallowing, bowel, or bladder control caused by chronic conditions; attention to ostomies
D5951	feeding aid	No	No	No	L	Ancillary
D5952	speech aid prosthesis-pediatric	No	No	No	L	Ancillary
D5953	speech aid prosthesis-adult	No	No	No	L	Ancillary
D5954	palatal augmentation prosthesis	No	No	No	L	Line 300: Cleft palate and/or cleft lip
D5955	palatal lift prosthesis-definitive	No	No	No	L	Line 300: Cleft palate and/or cleft lip
D5958	palatal lift prosthesis-interim	No	No	No	L	Line 300: Cleft palate and/or cleft lip
D5959	palatal lift prosthesis-modification	No	No	No	L	Line 300: Cleft palate and/or cleft lip
D5960	speech aid prosthesis-modification	No	No	No	L	Line 300: Cleft palate and/or cleft lip
D5982	surgical stent	No	No	No	L	Line 492: Dental conditions (e.g., periodontal disease), bundled
D5983	radiation carrier	No	No	No	L	Line 287: Cancer of oral cavity, pharynx, nose and larynx
D5984	radiation shield	No	No	No	L	Line 200: Cancer of bones Line 210: Cancer of thyroid Line 287: Cancer of oral cavity, pharynx, nose and larynx
D5985	radiation cone locator	No	No	No	L	Line 287: Cancer of oral cavity, pharynx, nose and larynx

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		Under age 21	Age 21 and over, non-pregnant adults	Pregnant adults		
D5986	fluoride gel carrier	Yes	Yes	Yes		Line 53: Preventive dental services, GLN 17
D5987	comissure splint	No	No	No	L	Line 300: Cleft palate and/or cleft lip
D5988	surgical splint	No	No	No	L	Line 228: Fracture of face bones; injury to optic and other cranial nerves, bundled
D5991	topical medicament carrier	No	No	No	L	Ancillary
D5992	adjust maxillofacial prosthetic appliance	No	No	No	L	Line 71: Neurological dysfunction in breathing, eating, swallowing, bowel, or bladder control caused by chronic conditions; attention to ostomies Line 200: Cancer of bones Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 484: Enophthalmos Line 602: Congenital anomalies of the ear without impairment of hearing; unilateral anomalies of the ear

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D5993	maintenance/cleaning of maxillofacial prosthesis	No	No	No	L	71: Neurological dysfunction in breathing, eating, swallowing, bowel, or bladder control caused by chronic conditions; attention to ostomies 200: Cancer of bones 256: Deformities of head, GLN 169 300: Cleft palate and/or cleft lip 484: Enophthalmos 602: Congenital anomalies of the ear without impairment of hearing; unilateral anomalies of the ear
D5994	periodontal medicament carrier	No	No	No	L	Line 646: Dental conditions where treatment results in marginal improvement
D5999	unspecified maxillofacial prosthesis	No	No	No	L	Ancillary
D6010	surgical placement of implant body-endosteal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6011	second stage implant surgery	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6012	surgical placement of interim implant body for transitional prosthesis-endosteal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6013	surgical placement of mini implant	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6040	surgical placement-eposteal implant	No	No	No		Line 619: Dental conditions (e.g., missing teeth)

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D6050	surgical placement-transosteal implant	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6051	interim abutment	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6052	smi-precision attachment abutment	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6055	dental implant supported connecting bar	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6056	prefabricated abutment	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6057	custom fabricated abutment	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6058	abutment supported porcelain/ceramic crown	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6059	abutment supported porcelain fused to metal crown-high noble metal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6060	abutment supported porcelain fused to metal crown-predominantly base metal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6061	abutment supported porcelain fused to metal crown-noble metal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6062	abutment supported cast metal crown-high noble metal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6063	abutment supported cast metal crown-predominantly base metal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)

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D6064	abutment supported cast metal crown-noble metal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6065	implant supported porcelain/ceramic crown	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6066	implant supported porcelain fused to metal crown	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6067	implant supported metal crown	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6068	abutment supported retainer-porcelain/ceramic FPD	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6069	abutment supported retainer-porcelain fused to metal FPD, high noble metal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6070	abutment supported retainer-porcelain fused to metal FPD, predom base metal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6071	abutment supported retainer-porcelain fused to metal FPD, noble metal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6072	abutment supported retainer-cast metal FPD, high noble metal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6073	abutment supported retainer-cast metal FPD, predom base metal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6074	abutment supported retainer-cast metal FPD, noble metal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6075	Implant supported retainer-ceramic FPD	No	No	No		Line 619: Dental conditions (e.g., missing teeth)

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D6076	Implant supported retainer-porcelain fused to metal FPD	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6077	Implant supported retainer-cast metal FPD	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6080	implant maintenance	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6081	scaling and debridement in the presence of inflammation or mucositis of a single implant, including cleaning of the implant surfaces, without flap entry and closure.	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6082	Implant supported crown - porcelain fused to predominantly base alloys	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6083	Implant supported crown - porcelain fused to noble alloys	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6084	Implant supported crown - porcelain fused to titanium or titanium alloy	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6086	Implant supported crown - predominantly base alloys	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6087	Implant supported crown - noble alloys	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6088	Implant supported crown - titanium/titanium alloys	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6090	repair implant abutment	No	No	No		Line 619: Dental conditions (e.g., missing teeth)

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D6091	replace semi/precision attachment	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6092	re cement implant/abutment supported crown	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6093	re cement implant/abutment supported fixed partial	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6094	abutment supported crown	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6095	repair implant abutment	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6097	Abutment supported crown - porcelain fused to titanium or titanium alloys	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6098	Implant supported retainer for metal FPD - porcelain fused to predominantly base alloys	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6096	remove broken implant retainer screw, with severe caries infection	Yes	Yes	Yes		Line 344: Dental conditions (e.g., severe caries, infection) GLN 34, 48
D6099	Implant supported retainer for metal FPD - porcelain fused to noble alloys	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6100	Implant removal	No	No	No		Line 619: Dental conditions (e.g., missing teeth) Line 344: Dental conditions (e.g., severe caries, infection) GLN 34, 48
D6101	debridement of periimplant defect	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6102	debridement and osseous contouring of periimplant defect	No	No	No		Line 619: Dental conditions (e.g., missing teeth)

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D6103	bone graft for repair of periimplant defect	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6104	bone graft at time of implant placement	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6110	implant /abutment supported removable denture for edentulous arch – maxillary	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6111	implant /abutment supported removable denture for edentulous arch – mandibular	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6112	implant /abutment supported removable denture for partially edentulous arch – maxillary	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6113	implant /abutment supported removable denture for partially edentulous arch – mandibular	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6114	implant /abutment supported fixed denture for edentulous arch – maxillary	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6115	implant /abutment supported fixed denture for edentulous arch – mandibular	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6116	implant /abutment supported fixed denture for partially edentulous arch – maxillary	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6117	implant /abutment supported fixed denture for partially edentulous arch – mandibular	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6118	Implant/abutment supported interim fixed denture for edentulous arch - mandibular	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6119	Implant/abutment supported interim fixed denture for edentulous arch - maxillary	No	No	No		Line 619: Dental conditions (e.g., missing teeth)

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D6120	Implant supported retainer - porcelain fused to titanium or titanium alloy	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6121	Implant supported retainer for metal FPD - predominantly base alloys	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6122	Implant supported retainer for metal FPD - noble alloys	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6123	Implant supported retainer for metal FPD- titanium or titanium alloy	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6190	radiographic/surgical implant index	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6194	abutment supported retainer crown for FPD	No	No	No		Line 616: Dental conditions (e.g., missing teeth)
D6199	unspecified implant proc	No	No	No		Ancillary
D6205	pontic-indirect resin based	No	No	No		591: Dental conditions (e.g., caries, fractured tooth)
D6210	pontic-cast high noble metal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6211	pontic-cast predom base metal	No	No	No		Line 601: Dental conditions (e.g., missing teeth)
D6212	pontic-cast noble metal	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6214	pontic-titanium	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6240	pontic-porcelain fused to high noble metal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)

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D6241	pontic-porcelain fused to predom base metal	No	No	No		Line 601: Dental conditions (e.g., missing teeth)
D6242	pontic-porcelain fused to noble metal	No	No	No		Line 601: Dental conditions (e.g., missing teeth)
D6243	Pontic - porcelain fused to titanium or titanium alloys	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6245	pontic-porcelain/ceramic	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6250	pontic-resin w/ high noble metal	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6251	pontic-resin w/ predom base metal	No	No	No		Line 601: Dental conditions (e.g., missing teeth)
D6252	pontic-resin w/ noble metal	No	No	No		Line 601: Dental conditions (e.g., missing teeth)
D6253	provisional pontic	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6545	retainer-cast metal, resin bonded fixed pros	No	No	No		Line 601: Dental conditions (e.g., missing teeth)
D6548	retainer-porcelain/ceramic, resin bonded fixed pros	No	No	No		645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D6549	resin retainer - for resin bonded fixed prosthesis	No	No	No		Line 601: Dental conditions (e.g., missing teeth)

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D6600	inlay-porcelain/ceramic 2 surface	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D6601	inlay-porcelain/ceramic 3 or > surface	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D6602	inlay-cast high noble 2 surface	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6603	inlay-cast high noble 3 or > surface	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6604	inlay-cast predom base 2 surface	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6605	inlay-cast predom base 3 or > surface	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6606	inlay-cast noble 2 surface	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6607	inlay-cast noble 3 or > surface	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6608	onlay-porcelain/ceramic 2 surface	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D6609	onlay-porcelain/ceramic 3 or > surface	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations

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D6610	onlay-cast high noble 2 surface	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6611	onlay-cast high noble 3 or > surface	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6612	onlay-cast predom base 2 surface	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6613	onlay-cast predom base 3 or > surface	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6614	onlay-cast noble 2 surface	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6615	onlay-cast noble 3 or > surface	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6624	inlay-titanium	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6634	onlay-titanium	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6710	crown-indirect resin based	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6720	crown-resin w/ high noble metal	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D6721	crown-resin w/ predom base metal	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations

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D6722	crown-resin w/ noble metal	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D6740	crown-porcelain/ceramic	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D6750	crown--porcelain fused to high noble metal	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D6751	crown--porcelain fused to predom base metal	No	No	No		Line 601: Dental conditions (e.g., missing teeth)
D6752	crown-porcelain fused to noble metal	No	No	No		Line 601: Dental conditions (e.g., missing teeth)
D6753	Retainer crown - porcelain fused to titanium or titanium alloys	No	No	No		Line 619: Dental conditions (e.g., missing teeth)
D6780	crown-3/4 cast high noble metal	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6781	crown-3/4 cast predom base metal	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6782	crown-3/4 cast noble metal	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6783	crown-3/4 porcelain/ceramic	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6784	Retainer crown ¾ - titanium and titanium alloys	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)

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D6790	crown-full cast high noble metal	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6791	crown-full cast predom base metal	No	No	No		Line 591: Dental conditions (e.g., missing teeth)
D6792	crown-full cast noble metal	No	No	No		Line 601: Dental conditions (e.g., missing teeth)
D6793	provisional retainer crown	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6794	crown-titanium	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6920	connector bar	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6930	re-cement or re-bond fixed partial denture	Yes	Yes	Yes		Line 267: Dental conditions (time sensitive events)
D6940	stress breaker	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6950	precision attachment	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)
D6980	fixed partial denture repair	Yes	Yes	Yes		Line 345: Dental conditions (e.g., caries, fractured tooth), GLN 91, 123
D6985	pediatric partial denture, fixed	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D6999	unspecified fixed prosthodontics proc	No	No	No		Ancillary

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D7111	extraction-coronal remnants, deciduous tooth	Yes	Yes	Yes		Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 267: Dental conditions (time sensitive events)
D7140	extraction-erupted tooth or exposed root	Yes	Yes	Yes		Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 54: Dental conditions (e.g., infection, pain, trauma)
D7210	surgical removal-erupted tooth	Yes	Yes	Yes		Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 54: Dental conditions (e.g., infection, pain, trauma) Line 344: Dental conditions (e.g., severe caries, infection) GLN 34, 48
D7220	removal impacted tooth-soft tissue-	Yes	Yes	Yes		Line 256: Deformities of head, GLN 169 Line 344: Dental conditions (e.g., severe caries, infection) GLN 34, 48
D7230	removal impacted tooth-partially bony	Yes	Yes	Yes		256: Deformities of head, GLN 169 344: Dental conditions (e.g., severe caries, infection)GLN 34, 48

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D7240	removal impacted tooth-completely bony	Yes	Yes	Yes		Line 256: Deformities of head, GLN 169 Line 344: Dental conditions (e.g., severe caries, infection) GLN 34, 48
D7241	remove impacted tooth-completely bony w/ complicationssee	Yes	Yes	Yes	BR	Line 344: Dental conditions (e.g., severe caries, infection) GLN 34, 48
D7250	surgical removal of residual roots	Yes	Yes	Yes		Line 300: Cleft palate and/or cleft lip Line 344: Dental conditions (e.g., severe caries, infection)
D7251	coronectomy - intentional partial tooth removal	Yes	Yes	Yes	BR	Line 344: Dental conditions (e.g., severe caries, infection) GLN 34, 48
D7260	oroantral fistula closure	Yes	Yes	Yes	BR	Line 300: Cleft palate and/or cleft lip Line 576: Deviated nasal septum, acquired deformity of nose, other diseases of upper respiratory tract Line 54: Dental conditions (e.g., infection, pain, trauma)
D7261	primary closure of sinus perforation	Yes	Yes	Yes	BR	Line 54: Dental conditions (e.g., infection, pain, trauma)
D7270	tooth reimplantation	Yes	Yes	Yes		Line 54: Dental conditions (e.g., infection, pain, trauma)
D7272	tooth transplantation	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement

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D7280	surgical access unerupted tooth	Yes	No	No		Line 256: Deformities of head, GLN 169 Line 618: Dental conditions (e.g., malocclusion)
D7282	mobilization erupted/malpositioned tooth	No	No	No		Line 618: Dental conditions (e.g., malocclusion)
D7283	place device to facilitate eruption of impacted tooth	Yes	No	No		Line 256: Deformities of head, GLN 169 Line 618: Dental conditions (e.g., malocclusion)
D7285	incisional biopsy of oral tissue-hard	Yes	Yes	Yes	L/BR	Diagnostic procedures
D7286	incisional biopsy of oral tissue-soft	Yes	Yes	Yes		Diagnostic procedures
D7287	exfoliative cytological sample collection	Yes	Yes	Yes	L/BR	Diagnostic procedures
D7288	brush biopsy	Yes	Yes	Yes	L/BR	Diagnostic procedures
D7290	surgical repositioning of teeth	No	No	No		Line 618: Dental conditions (e.g., malocclusion)
D7291	transseptal fiberotomy/supra crestal fiberotomy	No	No	No		Line 618: Dental conditions (e.g., malocclusion)
D7292	screw retained plate	No	No	No		Line 618: Dental conditions (e.g., malocclusion)
D7293	temp anchorage device w flap	No	No	No		Line 618: Dental conditions (e.g., malocclusion)
D7294	temp anchorage device w/o flap	No	No	No		Line 618: Dental conditions (e.g., malocclusion)
D7295	harvest of bone for use in autogenous graft proc	No	No	No		Excluded File (travel vaccines etc.)

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D7296	corticotomy-one to three teeth	No	No	No		Line 618: Dental conditions (e.g., malocclusion)
D7297	corticotomy-four or more teeth	No	No	No		Line 618: Dental conditions (e.g., malocclusion)
D7310	alveoloplasty in conjunction with extraction-4 or > teeth	No	No	No		Line 344: Dental conditions (e.g., severe caries, infection) GLN 34, 48, bundled
D7311	alveoloplasty in conjunction with extraction-1 to 3 teeth	No	No	No		Line 344: Dental conditions (e.g., severe caries, infection) GLN 34, 48, bundled
D7320	alveoloplasty not in conjunction w extraction-4 or > teeth	Yes	No	Yes		Line 344: Dental conditions (e.g., severe caries, infection) GLN 34
D7321	alveoloplasty not in conjunction w extraction-1 to 3 teeth	Yes	No	Yes		Line 344: Dental conditions (e.g., severe caries, infection)GLN 34, 48
D7340	vestibuloplasty ridge extension	Yes	Yes	Yes	L/BR	Line 300: Cleft palate and/or cleft lip Line 585: Atrophy of edentulous alveolar ridge
D7350	vestibuloplasty ridge extension w/ graft	Yes	Yes	Yes	L/BR	Line 300: Cleft palate and/or cleft lip Line 585: Atrophy of edentulous alveolar ridge
D7410	excision of benign lesion-<=1.25 cm	No	No	No		Ancillary
D7411	excision of benign lesion->1.25 cm	No	No	No		Excluded File (travel vaccines etc.)
D7412	excision of benign lesion, complicated	No	No	No		Excluded File (travel vaccines etc.)
D7413	excision of malignant lesion-<=1.25 cm	No	No	No		Excluded File (travel vaccines etc.)

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D7414	excision of malignant lesion->1.25 cm	No	No	No		Excluded File (travel vaccines etc.)
D7415	excision of malignant lesion, complicated	No	No	No		Excluded File (travel vaccines etc.)
D7440	excision malig tumor-<=1.25 cm	No	No	No	L	Line 200: Cancer of bones Line 287: Cancer of oral cavity, pharynx, nose and larynx
D7441	excision malig tumor->1.25 cm	No	No	No	L	Line 200: Cancer of bones Line 287: Cancer of oral cavity, pharynx, nose and larynx
D7450	remove benign odontogenic cyst-<=1.25cm	Yes	Yes	Yes	L/BR	Line 627: Benign neoplasms of skin and other soft tissues Line 344: Dental conditions (e.g., severe caries, infection), GLN 34, 48
D7451	remove benign odontogenic cyst->1.25cm	Yes	Yes	Yes	L/BR	Line 627: Benign neoplasms of skin and other soft tissues Line 344: Dental conditions (e.g., severe caries, infection) GLN 34, 48
D7460	remove benign nonodontogenic cyst-<=1.25cm	No	No	No		Line 597: Inconsequential cysts of oral soft tissues Line 625: Benign neoplasms of skin and other soft tissues

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D7461	remove benign nonodontogen cyst->1.25cm	No	No	No		Line 597: Inconsequential cysts of oral soft tissues
D7465	Destruction of lesion - physical or chemical method	Yes	Yes	Yes	L/BR	Line 344: Dental conditions (e.g., severe caries, infection) GLN 34, 48
D7471	remove lateral exostosis	Yes	Yes	Yes	L	Line 344: Dental conditions (e.g., severe caries, infection) GLN 34, 48
D7472	remove torus palatinus	Yes	Yes	Yes		Line 453: Dental conditions (e.g., missing teeth, prosthesis failure) GLN 117
D7473	remove torus mandibularis	Yes	Yes	Yes		Line 453: Dental conditions (e.g., missing teeth, prosthesis failure) GLN 117
D7485	surgical reduction osseous tuberosity	No	No	No		Excluded File (travel vaccines etc.)
D7490	radical resection maxilla or mandible	No	No	No	L	Ancillary
D7510	incision/drain abscess intra	Yes	Yes	Yes		Line 54: Dental conditions (e.g., infection, pain, trauma)
D7511	incision/drain abscess intra, complicated	No	No	No		Ancillary
D7520	incision/drain abscess extra	Yes	Yes	Yes		Line 54: Dental conditions (e.g., infection, pain, trauma)
D7521	incision/drain abscess extra, complicated	No	No	No		Ancillary
D7530	remove foreign body skin/alveolar tissue	Yes	Yes	Yes		Line 54: Dental conditions (e.g., infection, pain, trauma)
D7540	remove reaction producing foreign body	Yes	Yes	Yes	BR	Line 344: Dental conditions (e.g., severe caries, infection) GLN 34, 48

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D7550	partial ostectomy/sequestrectomy non vital bone	No	No	No	L	Line 344: Dental conditions (e.g., severe caries, infection) GLN 34, 48
D7560	maxillary sinusotomy	No	No	No	L	Line 54: Dental conditions (e.g., infection, pain, trauma)
D7610	simple fracture-maxilla open reduction	No	No	No	L	Ancillary
D7620	simple fracture-maxilla closed reduction	No	No	No	L	Ancillary
D7630	simple fracture-mandible open reduction	No	No	No	L	Ancillary
D7640	simple fracture-mandible closed reduction	No	No	No	L	Ancillary
D7650	simple fracture-malar/zygomatic open reduction	No	No	No	L	Ancillary
D7660	simple fracture-malar/zygomatic closed reduction	No	No	No	L	Ancillary
D7670	simple fracture-alveolus closed reduction	No	No	No	L	Line 54: Dental conditions (e.g., infection, pain, trauma)
D7671	simple fracture-alveolus open reduction	No	No	No	L	Excluded File (travel vaccines etc.)
D7680	simple fracture-facial bones-complicated reduction	No	No	No	L	Ancillary
D7710	compound fracture-maxilla open reduction	No	No	No	L	Ancillary
D7720	compound fracture-maxilla closed reduction	No	No	No	L	Ancillary
D7730	compound fracture-mandible open reduction	No	No	No	L	Ancillary
D7740	compound fracture-mandible closed reduction	No	No	No	L	Ancillary
D7750	compound fracture-malar/zygomatic open reduction	No	No	No	L	Ancillary

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		Under age 21	Age 21 and over, non-pregnant adults	Pregnant adults		
D7760	compound fracture-malar/zygomatic closed reduction	No	No	No	L	Ancillary
D7770	compound fracture-alveolus closed reduction	Yes	Yes	Yes	L/BR	Line 54: Dental conditions (e.g., infection, pain, trauma)
D7771	compound fracture-alveolus open reduction	No	No	No	L	Excluded File (travel vaccines etc.)
D7780	compound fracture-facial bones-complicated reduction	No	No	No	L	Ancillary
D7810	TMJ open reduction of dislocation	No	No	No	L	Line 359: Deformity/closed dislocation of joint and recurrent joint dislocations
D7820	TMJ closed reduction of dislocation	No	No	No	L	Line 359: Deformity/closed dislocation of joint and recurrent joint dislocations
D7830	TMJ manipulation under anesthesia	No	No	No	L	Line 359: Deformity/closed dislocation of joint and recurrent joint dislocations
D7840	condylectomy	No	No	No	L	Ancillary
D7850	surgical discectomy	No	No	No	L	Ancillary
D7852	disc repair	No	No	No	L	Line 643: Tmj disorders

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D7854	synovectomy	No	No	No	L	Line 643: Tmj disorders
D7856	myotomy	No	No	No	L	Line 643: Tmj disorders
D7858	joint reconstruction	No	No	No	L	Line 643: Tmj disorders
D7860	arthrotomy	No	No	No	L	Line 643: Tmj disorders
D7865	arthroplasty	No	No	No	L	Line 643: Tmj disorders
D7870	arthrocentesis	No	No	No	L	Line 643: Tmj disorders
D7871	non-artroscopic lysis and lavage	No	No	No	L	Line 643: Tmj disorders
D7872	arthroscopy-diagnosis	No	No	No	L	Line 643: Tmj disorders
D7873	arthroscopy-surgical, lavage & lysis of adhesions	No	No	No	L	Line 643: Tmj disorders
D7874	arthroscopy-surgical, disc reposition	No	No	No	L	Line 643: Tmj disorders
D7875	arthroscopy-surgical, synovectomy	No	No	No	L	Line 643: Tmj disorders
D7876	arthroscopy-surgical, discetomy	No	No	No	L	Line 643: Tmj disorders

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D7877	arthroscopy-surgical, debridement	No	No	No	L	Line 643: Tmj disorders
D7880	occlusal orthotic device	No	No	No	L	Line 549: Tmj disorders
D7881	occlusal orthotic device adjustment	No	No	No	L	Line 549: Tmj disorders
D7899	unspecified TMD therapy	No	No	No	L	Line 643: Tmj disorders
D7910	suture small wound <=5cm	Yes	Yes	Yes		Line 54: Dental conditions (e.g., infection, pain, trauma)
D7911	suture complicated <= 5cm	Yes	Yes	Yes		Line 54: Dental conditions (e.g., infection, pain, trauma)
D7912	suture complicated > 5 cm	Yes	Yes	Yes	L	Line 207: Deep open wound, with or without tendon or nerve involvement Line 300: Cleft palate and/or cleft lip
D7920	skin graft	No	No	No	L	Line 207: Deep open wound, with or without tendon or nerve involvement Line 287: Cancer of oral cavity, pharynx, nose and larynx 379: Chronic ulcer of skin

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D7921	collection/application of autologous blood concentrate	No	No	No		Excluded File (travel vaccines etc.)
D7922	Placement of intra-socket biological dressing to aid in hemostasis or clot stabilization, per site	No	No	No		Excluded File (travel vaccines etc.)
D7940	osteoplasty-orthognathic deformities	No	No	No	L	Line 256: Deformities of head, GLN 169 Line 617: Anomalies of relationship of jaw to cranial base, major anomalies of jaw size, other specified and unspecified dentofacial anomalies
D7941	osteotomy-mandibular rami	No	No	No	L	Line 256: Deformities of head, GLN 169 Line 617: Anomalies of relationship of jaw to cranial base, major anomalies of jaw size, other specified and unspecified dentofacial anomalies
D7943	osteotomy-mandibular rami w/bone graft	No	No	No	L	Line 256: Deformities of head, GLN 169 Line 617: Anomalies of relationship of jaw to cranial base, major anomalies of jaw size, other specified and unspecified dentofacial anomalies

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D7944	osteotomy-segmented or subapical	No	No	No	L	Line 256: Deformities of head, GLN 169 Line 617: Anomalies of relationship of jaw to cranial base, major anomalies of jaw size, other specified and unspecified dentofacial anomalies
D7945	osteotomy-body of mandible	No	No	No	L	Line 256: Deformities of head, GLN 169 Line 617: Anomalies of relationship of jaw to cranial base, major anomalies of jaw size, other specified and unspecified dentofacial anomalies
D7946	left I-maxilla total	No	No	No	L	Line 256: Deformities of head, GLN 169 Line 614: Anomalies of relationship of jaw to cranial base, major anomalies of jaw size, other specified and unspecified dentofacial anomalies
D7947	left I-maxilla segmented	No	No	No	L	Line 256: Deformities of head, GLN 169 Line 617: Anomalies of relationship of jaw to cranial base, major anomalies of jaw size, other specified and unspecified dentofacial anomalies

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D7948	left II or III w/o bone graft	No	No	No	L	256: Deformities of head Line 617: Anomalies of relationship of jaw to cranial base, major anomalies of jaw size, other specified and unspecified dentofacial anomalies
D7949	left II or III w/bone graft	No	No	No		Line 256: Deformities of head, GLN 169 Line 617: Anomalies of relationship of jaw to cranial base, major anomalies of jaw size, other specified and unspecified dentofacial anomalies
D7950	osseous, osteoperiosteal, or cartilage graft-autogenous or non-autogenous	No	No	No	L	Line 256: Deformities of head, GLN 169 Line 646: Dental conditions where treatment results in marginal improvement
D7951	sinus augmentation w bone/bone substitutes via lateral open approach	No	No	No	L	Line 256: Deformities of head, GLN 169 Line 619: Dental conditions (e.g., missing teeth)
D7952	sinus augmentation via vertical approach	No	No	No	L	Line 256: Deformities of head, GLN 169 Line 619: Dental conditions (e.g., missing teeth)

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D7953	bone replacement graft	No	No	No	L	Line 256: Deformities of head, GLN 169 Line 641: Tmj disorders
D7955	repair maxillofacial tissue defect	No	No	No	L	Line 256: Deformities of head, GLN 169 Line 641: Tmj disorders
D7960	frenulectomy	Yes	No	No		Line 344: Dental conditions (e.g., severe caries, infection), GLN 34, 48 Line 18: Feeding problems in newborns
D7963	frenuloplasty	Yes	No	No		Line 344: Dental conditions (e.g., severe caries, infection) GLN 34, 48
D7970	excision hyperplastic tissue	Yes	Yes	Yes		Line 453: Dental conditions (e.g., missing teeth, prosthesis failure)
D7971	excision pericoronal gingiva	Yes	No	Yes		Line 344: Dental conditions (e.g., severe caries, infection) GLN 34, 48
D7972	surgical reduction fibrous tuberosity	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D7979	Non-surgical sialolithotomy	No	No	No		Line 500: Sialolithiasis, mucocele, disturbance of salivary secretion, other and unspecified diseases of salivary glands

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D7980	sialolithotomy	No	No	No		Line 500: Sialolithiasis, mucocele, disturbance of salivary secretion, other and unspecified diseases of salivary glands
D7981	excision of salivary gland	Yes	Yes	Yes	L/BR	Line 287: Cancer of oral cavity, pharynx, nose and larynx Line 323: Sialoadenitis, abscess, fistula of salivary glands Line 500: Sialolithiasis, mucocele, disturbance of salivary secretion, other and unspecified diseases of salivary glands Line 627: Benign neoplasms of skin and other soft tissues
D7982	sialodochoplasty	Yes	Yes	Yes	L/BR	Line 323: Sialoadenitis, abscess, fistula of salivary glands Line 500: Sialolithiasis, mucocele, disturbance of salivary secretion, other and unspecified diseases of salivary glands

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D7983	closure of salivary fistula	Yes	Yes	Yes	L/BR	Line 323: Sialoadenitis, abscess, fistula of salivary glands
D7990	emergency tracheotomy	Yes	Yes	Yes	BR	Ancillary procedures
D7991	coronoidectomy	No	No	No		Line 643: Tmj disorders
D7995	synthetic graft	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D7996	implant-mandible for augmentation	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D7997	appliance removal	Yes	Yes	Yes		Line 54: Dental conditions (e.g., infection, pain, trauma)
D7998	intraoral placement of fixation device	No	No	No		Line 645: Dental conditions where treatment results in marginal improvement
D7999	unspecified oral surgery proc	No	No	No		Ancillary

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D8010	limited orthodontic primary dentition	Yes	No	No	BR	Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)
D8020	limited orthodontic transitional dentition	Yes	No	No	BR	Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)
D8030	limited orthodontic adolescent dentition	Yes	No	No	BR	Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)

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D8040	limited orthodontic adult dentition	Yes	No	No	BR	Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)
D8050	interceptive orthodontic primary dentition	Yes	No	No	BR	Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)
D8060	interceptive orthodontic transitional dentition	Yes	No	No	BR	Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)
D8070	comprehensive orthodontic transitional dentition	Yes	No	No	BR	Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)

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D8080	comprehensive orthodontic adolescent dentition	Yes	No	No	BR	Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)
D8090	comprehensive orthodontic adult dentition	Yes	No	No	BR	Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)
D8210	removable appliance therapy	Yes	No	No	BR	Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)

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D8220	fixed appliance therapy	Yes	No	No	BR	42: Cleft palate with airway obstruction 256: Deformities of head, GLN 169 300: Cleft palate and/or cleft lip 618: Dental conditions (e.g., malocclusion)
D8660	pre-orthodontic visit	Yes	No	No	BR	Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)
D8670	periodic orthodontic visit	Yes	No	No	BR	Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)

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		Under age 21	Age 21 and over, non-pregnant adults	Pregnant adults		
D8680	orthodontic retention	Yes	No	No	BR	Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip 618: Dental conditions (e.g., malocclusion)
D8681	removable orthodontic retainer adjustment	Yes	No	No	BR	Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)
D8690	orthodontic treatment-alternative billing	Yes	No	No	BR	Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)

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D8691-delete as of 2020	repair orthodontic appliance	No	No	No		Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)
D8692-delete as of 2020	replacement lost/broken retainer	No	No	No		Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)
D8693-delete as of 2020	rebond or recement of fixed retainer	No	No	No		Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip 618: Dental conditions (e.g., malocclusion)

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D8694-delete as of 2020	repair of fixed retainer, includes reattachment	No	No	No		Line 42: Cleft palate with airway obstruction Line 256: Deformities of head, GLN 169 Line 300: Cleft palate and/or cleft lip 618: Dental conditions (e.g., malocclusion)
D8695	Removal of fixed orthodontic appliances for reasons other than completion of treatment	Yes	No	No	BR	Line 267: Dental conditions (time sensitive events)
D8696	repair orthodontic appliance-maxillary	Yes	No	No	BR	Line 42:Cleft Palate with Airway Obstruction GLN: 36, 64 Line 256: Deformities of Head, GLN 6, 64, 169 Line 618: Dental conditions (e.g., malocclusion)
D8697	Repair of orthodontic appliance – mandibular	Yes	No	No	BR	Line 42:Cleft Palate with Airway Obstruction GLN: 36, 64 Line 256: Deformities of Head, GLN 6, 64, 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)

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D8702	Repair of fixed retainer, includes reattachment – mandibular	Yes	No	No	BR	Line 42:Cleft Palate with Airway Obstruction GLN: 36, 64 Line 256: Deformities of Head, GLN 6, 64, 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)
D8703	Replacement of lost or broken retainer – maxillary	Yes	No	No	BR	Line 42:Cleft Palate with Airway Obstruction GLN: 36, 64 Line 256: Deformities of Head, GLN 6, 64, 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)
D8704	Replacement of lost or broken retainer – mandibular	Yes	No	No	BR	Line 42:Cleft Palate with Airway Obstruction GLN: 36, 64 Line 256: Deformities of Head, GLN 6, 64, 169 Line 300: Cleft palate and/or cleft lip Line 618: Dental conditions (e.g., malocclusion)
D8999	unspecified orthodontics proc	No	No	No		Excluded File (travel vaccines etc.)
D9110	palliative treatment dental pain	Yes	Yes	Yes	BR	Line 54: Dental conditions (e.g., infection, pain, trauma)

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D9120	fix partial denture sectioning	Yes	Yes	Yes	BR	Line 267: Dental conditions (time sensitive events)
D9130	temporomandibular joint dysfunction -non- invasive physical therapies	No	No	No		Line 549: TMJ disorder
D9210	local anesthesia	No	No	No		Excluded File (travel vaccines etc.), bundled
D9211	regional block anesthesia	Yes	Yes	Yes	L/BR	Ancillary
D9212	trigeminal block anesthesia	Yes	Yes	Yes	L	Ancillary
D9215	local anesthesia	No	No	No		Excluded File (travel vaccines etc.), bundled
D9219	evaluation for deep sedation or general anesthesia	No	No	No		Excluded File (travel vaccines etc.)
D9220	Deep sedation/general anesthesia-first 30 minutes	Yes	Yes	Yes		Ancillary
D9221	Deep sedation/general anesthesia-each additional 15 minutes	Yes	Yes	Yes		Ancillary
D9222	deep sedation/general anesthesia- first 15 minutes	Yes	Yes	Yes		Ancillary
D9223	deep sedation/general anesthesia - each 15 minute increment	Yes	Yes	Yes		Ancillary
D9230	analgesia, anxiolysis, nitrous oxide	Yes	Yes	Yes		Ancillary
D9239	intravenous moderate (conscious) sedation/ analgesia-first fifteen minutes	Yes	Yes	Yes		Ancillary

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D9243	intravenous moderate (conscious) sedation/analgesia - each subsequent 15 minute increment	Yes	Yes	Yes		Ancillary
D9248	non-IV conscious sedation	Yes	No	No		Ancillary
D9310	consultation	Yes	Yes	Yes		Ancillary
D9311	Consultation with a medical healthcare professional	No	No	No		Ancillary
D9410	house/LTC facility call	Yes	Yes	Yes		Line 54: Dental conditions (e.g., infection, pain, trauma)
D9420	hospital call	Yes	Yes	Yes		Line 54: Dental conditions (e.g., infection, pain, trauma)
D9430	office visit for observation	No	No	No		Ancillary
D9440	office after reg hrs	Yes	Yes	Yes		Line 54: Dental conditions (e.g., infection, pain, trauma)
D9450	case presentation	No	No	No		Excluded File (travel vaccines etc.)
D9610	therapeutic parenteral drug-single admin	Yes	Yes	Yes		Line 54: Dental conditions (e.g., infection, pain, trauma)
D9612	therapeutic parenteral drug-2 or > admin	Yes	Yes	Yes	BR	Line 54: Dental conditions (e.g., infection, pain, trauma)
D9613	infiltration of sustained release therapeutic drug-singl or multiple sites	No	No	No		Excluded file
D9630	other drugs or meds	Yes	Yes	Yes		Ancillary

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D9910	application of desensitizing med	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D9911	application of desensitizing resin	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D9920	behavior management	Yes	Yes	Yes	BR	Line 53: Preventive dental services, GLN 17
D9930	treatment of complications-unusal circ	Yes	Yes	Yes	BR	344:Dental Conditions (e.g. severe caries infection)
D9931	Cleaning and inspection of a removable appliance	No	No	No		Excluded File (travel vaccines etc.)
D9932	cleaning and inspection of removable complete denture, maxillary	No	No	No		Line 662: Conditions for which certain interventions are unproven, have no clinically important benefit or have harms that outweigh benefits
D9933	cleaning and inspection of removable complete denture, mandibular	No	No	No		Line 662: Conditions for which certain interventions are unproven, have no clinically important benefit or have harms that outweigh benefits
D9934	cleaning and inspection of removable partial denture, maxillary	No	No	No		Line 662: Conditions for which certain interventions are unproven, have no clinically important benefit or have harms that outweigh benefits

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D9935	cleaning and inspection of removable partial denture, mandibular	No	No	No		Line 662: Conditions for which certain interventions are unproven, have no clinically important benefit or have harms that outweigh benefits
D9936	Missed Appointment	No	No	No		Excluded File (travel vaccines etc.)
D9941	fabrication of athletic mouthguard	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D9942	repair/reline occlusal guard	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D9943	occlusal guard adjustment	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D9944	occlusal guard - hard appliance, full arch	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D9945	occlusal guard - soft appliance, full arch	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D9946	occlusal guard - soft appliance, partial arch	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D9950	occlusion analysis	No	No	No		Line 591: Dental conditions (e.g., caries, fractured tooth)

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D9951	occlusal adjustment-limited	No	No	No		267: Dental conditions (time sensitive events)
D9952	occlusal adjustment-complete	No	No	No		Line 646: Dental conditions where treatment results in marginal improvement
D9961	duplicate/copy patient's records	No	No	No		Excluded File (travel vaccines etc.)
D9970	enamel microabrasion	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D9971	odontoplasty	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D9972	external bleaching-per arch-performed in office	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D9973	external bleaching-per tooth	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D9974	internal bleaching-per tooth	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D9975	external bleaching for home application, per arch	No	No	No		Line 645: Dental conditions where treatment is chosen primarily for aesthetic considerations
D9985	sales tax	No	No	No		Excluded File (travel vaccines etc.)

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D9987	Cancelled appointment	No	No	No		Excluded File (travel vaccines etc.)
D9991	dental case management-addressing appointment compliance barriers	No	No	No		Ancillary
D9992	dental case management - care coordination	No	No	No		Ancillary
D9993	dental case management -motivational interviewing	No	No	No		Ancillary
D9994	dental case management -patient education to improve oral health literacy	No	No	No		Ancillary
D9995	Teledentistry-synchronous-real time encounter	Yes	Yes	Yes		Line 54-Dental conditions (e.g., infection, pain, trauma)
D9996	Teledentistry-synchronous-r, information stored and forwarded to dentist for subsequent review	Yes	Yes	Yes		Line 54-Dental conditions (e.g., infection, pain, trauma)
D9997	Dental case management for those with special HC needs	Yes	Yes	Yes		Ancillary
D9999	unspecified adjunctive proc	No	No	No		Ancillary
Use CPT codes	Vaccines	Yes	Yes	Yes	L-Bill on a CMS 1500	