

Section 10 - CDT 22 Tables

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Section 10 - CDT 22 Tables

Effective May 1, 2022, Current Dental Terminology 2022 (CDT 22) was implemented which created changes to the Federally Required Adult Dental Services (FRADS), Pregnancy, Omnibus Budget Reconciliation Act (OBRA) member emergency, and Member Cap procedures.

Table 1: Federally Required Adult Dental Services (FRADS)

The following procedure codes are reimbursable procedures for Medi-Cal members 21 years of age and older.

Please note: The procedure codes marked with an asterisk (*) are only payable for Medi-Cal members age 21 and older who are not otherwise exempt when the procedure is appropriately rendered in conjunction with another FRADS.

Table 1: Federally Required Adult Dental Services (FRADS)

CDT 22 Code	CDT 22 Code Description
D0220	Intraoral - periapical first radiographic image
D0230	Intraoral - periapical each additional radiographic image
D0250*	Extra-oral - 2D projection radiographic image created using a stationary radiation source, and detector
D0310*	Sialography
D0320*	Temporomandibular joint arthrogram, including injection
D0322*	Tomographic survey
D0330	Panoramic radiographic image
D0502	Other oral pathology procedures, by report
D0999	Unspecified diagnostic procedure, by report
D2910	Recement inlay or re-bond, onlay, veneer or partial coverage restoration
D2920	Recement or re-bond crown
D2940	Protective restoration
D5911	Facial moulage (sectional)
D5912	Facial moulage (complete)
D5913	Nasal prosthesis

Table 1: Federally Required Adult Dental Services (FRADS)

CDT 22 Code	CDT 22 Code Description
D5914	Auricular prosthesis
D5915	Orbital prosthesis
D5916	Ocular prosthesis
D5919	Facial prosthesis
D5922	Nasal septal prosthesis
D5923	Ocular prosthesis, interim
D5924	Cranial prosthesis
D5925	Facial augmentation implant prosthesis
D5926	Nasal prosthesis, replacement
D5927	Auricular prosthesis, replacement
D5928	Orbital prosthesis, replacement
D5929	Facial prosthesis, replacement
D5931	Obturator prosthesis, surgical
D5932	Obturator prosthesis, definitive
D5933	Obturator prosthesis, modification
D5934	Mandibular resection prosthesis with guide flange
D5935	Mandibular resection prosthesis without guide flange
D5936	Obturator prosthesis, interim
D5937	Trismus appliance (not for TMD treatment)

Table 1: Federally Required Adult Dental Services (FRADS)

CDT 22 Code	CDT 22 Code Description
D5953	Speech aid prosthesis, adult
D5954	Palatal augmentation prosthesis
D5955	Palatal lift prosthesis, definitive
D5958	Palatal lift prosthesis, interim
D5959	Palatal lift prosthesis, modification
D5960	Speech aid prosthesis, modification
D5982	Surgical stent
D5983	Radiation carrier
D5984	Radiation shield
D5985	Radiation cone locator
D5986	Fluoride gel carrier
D5987	Commissure splint
D5988	Surgical splint
D5999	Unspecified maxillofacial prosthesis, by report
D6092	Recement or Re-bond implant/abutment supported crown
D6093	Recement or Re-bond implant/abutment supported fixed partial denture
D6100	Implant removal, by report
D6930	Re-cement or Re-Bond fixed partial denture
D6999	Unspecified fixed prosthodontic procedure, by report
D7111	Extraction, coronal remnants – primary tooth
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)

Table 1: Federally Required Adult Dental Services (FRADS)

CDT 22 Code	CDT 22 Code Description
D7210	Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated
D7220	Removal of impacted tooth - soft tissue
D7230	Removal of impacted tooth - partially bony
D7240	Removal of impacted tooth - completely bony
D7241	Removal of impacted tooth - completely bony, with unusual surgical complications
D7250	Removal of residual tooth roots (cutting procedure)
D7260	Oroantral fistula closure
D7261	Primary closure of a sinus perforation
D7270	Tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth
D7285	Incisional Biopsy of oral tissue - hard (bone, tooth)
D7286	Incisional Biopsy of oral tissue – soft
D7410	Excision of benign lesion up to 1.25 cm
D7411	Excision of benign lesion greater than 1.25 cm
D7412	Excision of benign lesion, complicated
D7413	Excision of malignant lesion up to 1.25 cm
D7414	Excision of malignant lesion greater than 1.25 cm
D7415	Excision of malignant lesion, complicated

Table 1: Federally Required Adult Dental Services (FRADS)

CDT 22 Code	CDT 22 Code Description
D7440	Excision of malignant tumor - lesion diameter up to 1.25 cm
D7441	Excision of malignant tumor - lesion diameter greater than 1.25 cm
D7450	Removal of benign odontogenic cyst or tumor - lesion diameter up to 1.25cm
D7451	Removal of benign odontogenic cyst or tumor - lesion diameter greater than 1.25 cm
D7460	Removal of benign nonodontogenic cyst or tumor - lesion diameter up to 1.25 cm
D7461	Removal of benign nonodontogenic cyst or tumor - lesion diameter greater than 1.25 cm
D7465	Destruction of lesion(s) by physical or chemical method, by report
D7490	Radical resection of mandible with bone graft
D7510	Incision and drainage of abscess - intraoral soft tissue
D7511	Incision and drainage of abscess – intraoral soft tissue-complicated (includes drainage of multiple fascial spaces)
D7520	Incision and drainage of abscess - extraoral soft tissue
D7521	Incision and drainage of abscess – extraoral soft tissue-complicated (includes drainage of multiple fascial spaces)
D7530	Removal of foreign body from mucosa, skin, or subcutaneous alveolar tissue

Table 1: Federally Required Adult Dental Services (FRADS)

CDT 22 Code	CDT 22 Code Description
D7540	Removal of reaction producing foreign bodies, musculoskeletal system
D7550	Partial ostectomy/sequestrectomy for removal of non-vital bone
D7560	Maxillary sinusotomy for removal of tooth fragment or foreign body
D7610	Maxilla - open reduction (teeth immobilized, if present)
D7620	Maxilla - closed reduction (teeth immobilized, if present)
D7630	Mandible - open reduction (teeth immobilized, if present)
D7640	Mandible - closed reduction (teeth immobilized, if present)
D7650	Malar and/or zygomatic arch - open reduction
D7660	Malar and/or zygomatic arch - closed reduction
D7670	Alveolus - closed reduction, may include stabilization of teeth
D7671	Alveolus - open reduction, may include stabilization of teeth
D7680	Facial bones - complicated reduction with fixation and multiple surgical approaches
D7710	Maxilla - open reduction
D7720	Maxilla - closed reduction
D7730	Mandible - open reduction
D7740	Mandible - closed reduction
D7750	Malar and/or zygomatic arch - open reduction
D7760	Malar and/or zygomatic arch - closed reduction
D7770	Alveolus - open reduction stabilization of teeth

Table 1: Federally Required Adult Dental Services (FRADS)

CDT 22 Code	CDT 22 Code Description
D7771	Alveolus, closed reduction stabilization of teeth
D7780	Facial bones - complicated reduction with fixation and multiple surgical approaches
D7810	Open reduction of dislocation
D7820	Closed reduction of dislocation
D7830	Manipulation under anesthesia
D7840	Condylectomy
D7850	Surgical discectomy, with/without implant
D7852	Disc repair
D7854	Synovectomy
D7856	Myotomy
D7858	Joint reconstruction
D7860	Arthrotomy
D7865	Arthroplasty
D7870	Arthrocentesis
D7872	Arthroscopy - diagnosis, with or without biopsy
D7873	Arthroscopy -lavage and lysis of adhesions
D7874	Arthroscopy - disc repositioning and stabilization
D7875	Arthroscopy - synovectomy
D7876	Arthroscopy - debridement
D7877	Arthroscopy - debridement
D7910	Suture of recent small wounds up to 5 cm
D7911	Complicated suture - up to 5 cm
D7912	Complicated suture - greater than 5 cm
D7920	Skin graft (identify defect covered, location and type of graft)
D7940	Osteoplasty - for orthognathic deformities

Table 1: Federally Required Adult Dental Services (FRADS)

CDT 22 Code	CDT 22 Code Description
D7941	Osteotomy - mandibular rami
D7943	Osteotomy - mandibular rami with bone graft; includes obtaining the graft
D7944	Osteotomy – segmented or subapical
D7945	Osteotomy - body of mandible
D7946	LeFort I (maxilla - total)
D7947	LeFort I (maxilla - segmented)
D7948	LeFort II or LeFort III (osteoplasty of facial bones for midface hypoplasia or retrusion) - without bone graft
D7949	LeFort II or LeFort III - with bone graft
D7950	Osseous, osteoperiosteal, or cartilage graft of the mandible or maxilla – autogenous or nonautogenous, by report
D7951	Sinus augmentation with bone or bone substitutes via a lateral open approach
D7955	Repair of maxillofacial soft and/or hard tissue defect
D7971	Excision of pericoronal gingiva
D7979	Non-surgical Sialolithotomy *Effective May 16, 2020
D7980	Surgical Sialolithotomy
D7981	Excision of salivary gland, by report
D7982	Sialodochoplasty
D7983	Closure of salivary fistula
D7990	Emergency tracheotomy
D7991	Coronoidectomy
D7995	Synthetic graft - mandible or facial bones, by report

Table 1: Federally Required Adult Dental Services (FRADS)

CDT 22 Code	CDT 22 Code Description
D7997	Appliance removal (not by dentist who placed appliance), includes removal of archbar
D7999	Unspecified oral surgery procedure, by report
D9110	Palliative (emergency) treatment of dental pain - minor procedure
D9210	Local anesthesia not in conjunction with operative or surgical procedures
D9222	Deep Sedation/General Anesthesia - First 15 Minutes *Effective March 14, 2020
D9223	Deep Sedation/General Anesthesia - Each subsequent 15 minute increment *Effective March 14, 2020
D9230	Inhalation of nitrous oxide/anxiolysis, analgesia
D9239	Intravenous Moderate (Conscious) Sedation/Analgesia - First 15 Minutes *Effective March 14, 2020

Table 1: Federally Required Adult Dental Services (FRADS)

CDT 22 Code	CDT 22 Code Description
D9243	Intravenous Moderate (Conscious) Sedation/Analgesia - Each subsequent 15 minute increment *Effective March 14, 2020
D9248	Non-intravenous conscious sedation
D9410	House/extended care facility call
D9420	Hospital or ambulatory surgical center call
D9430	Office visit for observation (during regularly scheduled hours) - no other services performed
D9440	Office visit - after regularly scheduled hours
D9610	Therapeutic parenteral drug, single administration
D9910	Application of desensitizing medicament
D9930	Treatment of complications (post - surgical) - unusual circumstances, by report
D9999	Unspecified adjunctive procedure, by report

Table 3: Restored Adult Dental Services (RADS)

Effective May 1, 2014, some adult dental benefits have been restored in accordance with [Assembly Bill 82 \(AB 82\)](#).

Table 3: Restored Adult Dental Services (RADS)

CDT 22 Code	CDT 22 Code Description
D0150	Comprehensive oral evaluation - new or established patient
D0210	Intraoral - complete series of radiographic images
D0220	Intraoral - periapical first radiographic image
D0230	Intraoral - periapical each additional radiographic image
D0270	Bitewing - single radiographic image
D0272	Bitewings - two radiographic images
D0274	Bitewings - four radiographic images
D0330	Panoramic radiographic image
D0350	2D Oral/Facial photographic images obtained intra-orally or extra orally
D1110	Prophylaxis - adult
D1206	Topical application of fluoride varnish
D1208	Topical application of fluoride - excluding varnish
D2140	Amalgam - One Surface, Primary or Permanent
D2150	Amalgam - Two Surfaces, Primary or Permanent
D2160	Amalgam - Three Surfaces, Primary or Permanent
D2161	Amalgam - Four or More Surfaces, Primary or Permanent
D2330	resin-based Composite - One Surface, Anterior

Table 3: Restored Adult Dental Services (RADS)

CDT 22 Code	CDT 22 Code Description
D2331	Resin-based Composite - Two Surfaces, Anterior
D2332	resin-based Composite - Three Surfaces, Anterior
D2335	Resin-based Composite - Four Or More Surfaces Or Involving Incisal Angle (Anterior)
D2390	Resin-based Composite Crown, Anterior
D2391	Resin-based Composite - One Surface, Posterior
D2392	Resin-based Composite - Two Surfaces, Posterior
D2393	Resin-based Composite - Three Surfaces, Posterior
D2394	Resin-based Composite - Four Or More Surfaces, Posterior
D2931	Prefabricated Stainless Steel Crown - Permanent Tooth
D2932	Prefabricated Resin Crown
D2933	Prefabricated Stainless Steel Crown With Resin Window
D2952	Post And Core In Addition To Crown, Indirectly Fabricated
D2954	Prefabricated Post And Core In Addition To Crown
D3310	Endodontic Therapy, Anterior Tooth (Excluding Final Restoration)
D3346	Retreatment Of Previous Root Canal Therapy - Anterior
D5110	Complete Denture – Maxillary
D5120	Complete Denture – Mandibular

**Table 3: Restored Adult Dental Services
(RADS)**

CDT 22 Code	CDT 22 Code Description
D5130	Immediate Denture – Maxillary
D5140	Immediate Denture – Mandibular
D5410	Adjust Complete Denture - Maxillary
D5411	Adjust Complete Denture – Mandibular
D5511	Repair broken complete denture base, mandibular *Effective March 14, 2020
D5512	Repair broken complete denture base, maxillary *Effective March 14, 2020
D5520	Replace Missing Or Broken Teeth – Complete Denture (Each Tooth)
D5611	Repair resin partial denture base, mandibular *Effective March 14, 2020
D5612	Repair resin partial denture base, maxillary *Effective March 14, 2020
D5730	Reline Complete Maxillary Denture (direct)
D5731	Reline Complete Mandibular Denture (direct)
D5750	Reline Complete Maxillary Denture (indirect)
D5751	Reline Complete Mandibular Denture (indirect)
D5850	Tissue Conditioning, Maxillary
D5851	Tissue Conditioning, Mandibular
D5863	Overdenture – complete maxillary *Effective March 14, 2020
D5865	Overdenture – complete mandibular *Effective March 14, 2020

Table 4: Omnibus Budget Reconciliation Act (OBRA) Emergency Services Only

Those who qualify for Medi-Cal benefits as OBRA members have limited benefits are only eligible for emergency dental services.

An emergency dental condition is a dental condition manifesting itself by acute symptoms of sufficient severity including severe pain, which in the absence of immediate dental attention could reasonably be expected to result in any of the following:

- placing the patient’s health in serious jeopardy,
- serious impairment to bodily functions,
- serious dysfunction of any bodily organ or part.

The emergency must be certified in accordance with California Code of Regulations, Title 22, Section 51056.

Please note that TARs are not allowed and may not be submitted for these members. If a TAR is submitted for any of the procedures described below, it will be denied.

The following are identified as emergency dental procedures for OBRA members:

Table 4: Omnibus Budget Reconciliation Act (OBRA) Emergency Services Only

CDT 22 Code	CDT 22 Code Description
D0220	Intraoral - periapical first radiographic image
D0230	Intraoral - periapical each additional radiographic image
D0250	Extra-oral - 2D projection radiographic image created using a stationary radiation source, and detector
D0330	Panoramic radiographic image
D0502	Other oral pathology procedures, by report
D0999	Unspecified diagnostic procedure, by report
D2920	Recement or re-bond crown
D2940	Protective restoration
D2941	Interim therapeutic restoration- primary dentition *Effective March 14, 2020
D3220	Therapeutic pulpotomy (excluding final restoration) -

Table 4: Omnibus Budget Reconciliation Act (OBRA) Emergency Services Only

CDT 22 Code	CDT 22 Code Description
	removal of pulp coronal to the dentinocemental junction and application of medicament
D3221	Pulpal debridement, primary and permanent teeth
D6092	Recement or Re-bond implant/abutment supported crown
D6093	Recement or Re-bond implant/abutment supported fixed partial denture
D6930	Recement fixed partial denture
D7111	Extraction, coronal remnants - primary tooth
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)
D7210	Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and

Table 4: Omnibus Budget Reconciliation Act (OBRA) Emergency Services Only

CDT 22 Code	CDT 22 Code Description
	including elevation of mucoperiosteal flap if indicated
D7220	Removal of impacted tooth - soft tissue
D7230	Removal of impacted tooth - partially bony
D7240	Removal of impacted tooth - completely bony
D7241	Removal of impacted tooth - completely bony, with unusual surgical complications
D7250	Removal of residual tooth roots (cutting procedure)
D7260	Oroantral fistula closure
D7261	Primary closure of a sinus perforation
D7270	Tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth
D7285	Biopsy of oral tissue - hard (bone, tooth)
D7286	Biopsy of oral tissue - soft
D7410	Excision of benign lesion up to 1.25 cm
D7411	Excision of benign lesion greater than 1.25 cm
D7412	Excision of benign lesion, complicated
D7413	Excision of malignant lesion up to 1.25 cm
D7414	Excision of malignant lesion greater than 1.25 cm
D7415	Excision of malignant lesion, complicated
D7440	Excision of malignant tumor - lesion diameter up to 1.25 cm
D7441	Excision of malignant tumor - lesion diameter greater than 1.25 cm

Table 4: Omnibus Budget Reconciliation Act (OBRA) Emergency Services Only

CDT 22 Code	CDT 22 Code Description
D7450	Removal of benign odontogenic cyst or tumor - lesion diameter up to 1.25cm
D7451	Removal of benign odontogenic cyst or tumor - lesion diameter greater than 1.25 cm
D7460	Removal of benign nonodontogenic cyst or tumor - lesion diameter up to 1.25 cm
D7461	Removal of benign nonodontogenic cyst or tumor - lesion diameter greater than 1.25 cm
D7490	Radical resection of mandible with bone graft
D7510	Incision and drainage of abscess - intraoral soft tissue
D7511	Incision and drainage of abscess - intraoral soft tissue-complicated (includes drainage of multiple fascial spaces)
D7520	Incision and drainage of abscess - extraoral soft tissue
D7521	Incision and drainage of abscess - extraoral soft tissue-complicated (includes drainage of multiple fascial spaces)
D7530	Removal of foreign body from mucosa, skin, or subcutaneous alveolar tissue
D7540	Removal of reaction producing foreign bodies, musculoskeletal system
D7550	Partial ostectomy/sequestrectomy for removal of non-vital bone

Table 4: Omnibus Budget Reconciliation Act (OBRA) Emergency Services Only

CDT 22	
Code	CDT 22 Code Description
D7560	Maxillary sinusotomy for removal of tooth fragment or foreign body
D7610	Maxilla - open reduction (teeth immobilized, if present)
D7620	Maxilla - closed reduction (teeth immobilized, if present)
D7630	Mandible - open reduction (teeth immobilized, if present)
D7640	Mandible - closed reduction (teeth immobilized, if present)
D7650	Malar and/or zygomatic arch - open reduction
D7660	Malar and/or zygomatic arch - closed reduction
D7670	Alveolus - closed reduction, may include stabilization of teeth
D7671	Alveolus - open reduction, may include stabilization of teeth
D7710	Maxilla - open reduction
D7720	Maxilla - closed reduction
D7730	Mandible - open reduction
D7740	Mandible - closed reduction
D7750	Malar and/or zygomatic arch - open reduction
D7760	Malar and/or zygomatic arch - closed reduction
D7770	Alveolus - open reduction stabilization of teeth
D7771	Alveolus, closed reduction stabilization of teeth
D7810	Open reduction of dislocation
D7820	Closed reduction of dislocation
D7830	Manipulation under anesthesia
D7910	Suture of recent small wounds up to 5 cm

Table 4: Omnibus Budget Reconciliation Act (OBRA) Emergency Services Only

CDT 22	
Code	CDT 22 Code Description
D7911	Complicated suture - up to 5 cm
D7912	Complicated suture - greater than 5 cm
D7979	Non-surgical Sialolithotomy *Effective May 16, 2020
D7980	Surgical Sialolithotomy
D7983	Closure of salivary fistula
D7990	Emergency tracheotomy
D9110	Palliative (emergency) treatment of dental pain - minor procedure
D9210	Local anesthesia not in conjunction with operative or surgical procedures
D9222	Deep Sedation/General Anesthesia - First 15 Minutes *Effective March 14, 2020
D9223	Deep Sedation/General Anesthesia - Each subsequent 15 minute increment *Effective March 14, 2020
D9230	Inhalation of nitrous oxide/anxiolysis, analgesia
D9239	Intravenous Moderate (Conscious) Sedation/Analgesia - First 15 Minutes *Effective March 14, 2020
D9243	Intravenous Moderate (Conscious) Sedation/Analgesia - Each subsequent 15 minute increment *Effective March 14, 2020
D9248	Non-intravenous conscious sedation
D9410	House/extended care facility call
D9420	Hospital or ambulatory surgical center call

Table 4: Omnibus Budget Reconciliation Act (OBRA) Emergency Services Only

CDT 22	
Code	CDT 22 Code Description
D9430	Office visit for observation (during regularly scheduled hours) - no other services performed
D9440	Office visit - after regularly scheduled hours
D9610	Therapeutic parenteral drug, single administration
D9910	Application of desensitizing medicament
D9920	Behavior management, by report
D9930	Treatment of complications (post - surgical) - unusual circumstances, by report
D9951	Occlusal adjustment - limited

Table 5: Exempt Dental Services

The following procedures have been identified as always exempt from the \$1,800 dental soft cap. For details about the dental soft cap, please refer to “Section 4 – Treating Members, \$1,800 Limit per Calendar Year for Member Dental Services, with Exceptions” of this Handbook.

Table 5: Exempt Dental Services

CDT 22 Code	CDT 22 Code Description
D0310	Sialography
D0320	Temporomandibular joint arthrogram, including injection
D0322	Tomographic survey
D0502	Other oral pathology procedures, by report
D2910	Re-cement or re-bond inlay, onlay, veneer or partial coverage restoration
D2920	Recement or re-bond crown
D5110	Complete denture - maxillary
D5120	Complete denture - mandibular
D5130	Immediate denture - maxillary
D5140	Immediate denture - mandibular
D5211	Maxillary partial denture - resin base (including retentive/clasping materials, rests and teeth)
D5212	Mandibular partial denture - resin base (including retentive/clasping materials, rests and teeth)
D5213	Maxillary partial denture - cast metal framework with resin denture bases (including retentive/clasping materials, rests and teeth)
D5214	Mandibular partial denture - cast metal framework with resin denture bases (including retentive/clasping materials, rests and teeth)

Table 5: Exempt Dental Services

CDT 22 Code	CDT 22 Code Description
D5410	Adjust complete denture - maxillary
D5411	Adjust complete denture - mandibular
D5421	Adjust partial denture - maxillary
D5422	Adjust partial denture - mandibular
D5660	Add clasp to existing partial denture- per tooth
D5730	Reline complete maxillary denture (direct)
D5731	Reline complete mandibular denture (direct)
D5740	Reline maxillary partial denture (direct)
D5741	Reline mandibular partial denture (direct)
D5850	Tissue conditioning, maxillary
D5851	Tissue conditioning, mandibular
D5863	Overdenture – complete maxillary *Effective March 14, 2020
D5865	Overdenture – complete mandibular *Effective March 14, 2020
D5911	Facial moulage (sectional)
D5912	Facial moulage (complete)
D5913	Nasal prosthesis
D5914	Auricular prosthesis
D5915	Orbital prosthesis
D5916	Ocular prosthesis
D5919	Facial prosthesis

Table 5: Exempt Dental Services

CDT 22 Code	CDT 22 Code Description
D5922	Nasal septal prosthesis
D5923	Ocular prosthesis, interim
D5924	Cranial prosthesis
D5925	Facial augmentation implant prosthesis
D5926	Nasal prosthesis, replacement
D5927	Auricular prosthesis, replacement
D5928	Orbital prosthesis, replacement
D5929	Facial prosthesis, replacement
D5931	Obturator prosthesis, surgical
D5932	Obturator prosthesis, definitive
D5933	Obturator prosthesis, modification
D5934	Mandibular resection prosthesis with guide flange
D5935	Mandibular resection prosthesis without guide flange
D5936	Obturator prosthesis, interim
D5937	Trismus appliance (not for TMD treatment)
D5951	Feeding aid
D5953	Speech aid prosthesis, adult
D5954	Palatal augmentation prosthesis
D5955	Palatal lift prosthesis, definitive
D5958	Palatal lift prosthesis, interim
D5959	Palatal lift prosthesis, modification
D5960	Speech aid prosthesis, modification
D5982	Surgical stent
D5983	Radiation carrier
D5984	Radiation shield
D5985	Radiation cone locator

Table 5: Exempt Dental Services

CDT 22 Code	CDT 22 Code Description
D5986	Fluoride gel carrier
D5987	Commissure splint
D5988	Surgical splint
D5999	Unspecified maxillofacial prosthesis, by report
D6010	Surgical placement of implant body: endosteal implant
D6013	Surgical Placement of Mini Implant *Effective March 14, 2020
D6040	Surgical placement: epostal implant
D6050	Surgical placement: transosteal implant
D6055	Connecting bar - implant supported or abutment supported
D6056	Prefabricated abutment - includes modification and placement
D6057	Custom fabricated abutment - includes placement
D6058	Abutment supported porcelain/ceramic crown
D6060	Abutment supported porcelain fused to metal crown (predominantly base metal)
D6063	Abutment supported cast metal crown (predominantly base metal)
D6065	Implant supported porcelain/ceramic crown
D6068	Abutment supported retainer for porcelain/ ceramic FPD
D6070	Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal)

Table 5: Exempt Dental Services

CDT 22 Code	CDT 22 Code Description
D6073	Abutment supported retainer for cast metal FPD (predominantly base metal)
D6075	Implant supported retainer for ceramic FPD
D6080	Implant maintenance procedures when prostheses are removed and reinserted, including cleansing of prostheses and abutments
D6082	Implant supported crown – porcelain fused to predominately base alloys *Effective July 1, 2021
D6086	Implant supported crown – predominately base alloys *Effective July 1, 2021
D6090	Repair implant supported prosthesis, by report
D6091	Replacement of replaceable part of semi-precision or precision attachment of implant/abutment supported prosthesis, per attachment
D6092	Recement or Re-bond implant/abutment supported crown
D6093	Recement or Re-bond implant/abutment supported fixed partial denture
D6095	Repair implant abutment, by report
D6098	Implant supported retainer – porcelain fused to predominately base alloys *Effective July 1, 2021
D6100	Implant removal, by report

Table 5: Exempt Dental Services

CDT 22 Code	CDT 22 Code Description
D6110	Implant/Abutment Supported Removable Denture for Edentulous Arch – Maxillary *Effective March 14, 2020
D6111	Implant/Abutment Supported Removable Denture for Edentulous Arch – Mandibular *Effective March 14, 2020
D6112	Implant/Abutment Supported Removable Denture for Partially Edentulous Arch – Maxillary *Effective March 14, 2020
D6113	Implant/Abutment Supported Removable Denture for Partially Edentulous Arch – Mandibular *Effective March 14, 2020
D6114	Implant/Abutment Supported Fixed Denture for Edentulous Arch – Maxillary *Effective March 14, 2020
D6115	Implant/Abutment Supported Fixed Denture for Edentulous Arch – Mandibular *Effective March 14, 2020
D6116	Implant/Abutment Supported Fixed Denture for Partially Edentulous Arch – Maxillary *Effective March 14, 2020
D6117	Implant/Abutment Supported Fixed Denture for Partially Edentulous Arch – Mandibular *Effective March 14, 2020
D6121	Implant supported retainer for metal FPD- predominately base alloys *Effective July 1, 2021
D6191	Semi-precision abutment – placement *Effective October 1, 2021

Table 5: Exempt Dental Services

CDT 22 Code	CDT 22 Code Description
D6192	Semi-precision attachment – placement *Effective October 1, 2021
D6199	Unspecified implant procedure, by report
D6930	Recement fixed partial denture
D6980	Fixed partial denture repair, necessitated by restorative material failure
D6999	Unspecified fixed prosthodontic procedure, by report
D7260	Oroantral fistula closure
D7270	Tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth
D7285	Incisional Biopsy of oral tissue - hard (bone, tooth)
D7286	Incisional Biopsy of oral tissue - soft
D7440	Excision of malignant tumor - lesion diameter up to 1.25 cm
D7441	Excision of malignant tumor - lesion diameter greater than 1.25 cm
D7450	Removal of benign odontogenic cyst or tumor - lesion diameter up to 1.25cm
D7451	Removal of benign odontogenic cyst or tumor - lesion diameter greater than 1.25 cm
D7460	Removal of benign nonodontogenic cyst or tumor - lesion diameter up to 1.25 cm

Table 5: Exempt Dental Services

CDT 22 Code	CDT 22 Code Description
D7461	Removal of benign nonodontogenic cyst or tumor - lesion diameter greater than 1.25 cm
D7490	Radical resection of mandible with bone graft
D7510	Incision and drainage of abscess - intraoral soft tissue
D7511	Incision and drainage of abscess - intraoral soft tissue-complicated (includes drainage of multiple fascial spaces)
D7520	Incision and drainage of abscess - extraoral soft tissue
D7521	Incision and drainage of abscess - extraoral soft tissue-complicated (includes drainage of multiple fascial spaces)
D7540	Removal of reaction producing foreign bodies, musculoskeletal system
D7550	Partial ostectomy/sequestrectomy for removal of non-vital bone
D7560	Maxillary sinusotomy for removal of tooth fragment or foreign body
D7610	Maxilla - open reduction (teeth immobilized, if present)
D7620	Maxilla - closed reduction (teeth immobilized, if present)
D7630	Mandible - open reduction (teeth immobilized, if present)

Table 5: Exempt Dental Services

CDT 22 Code	CDT 22 Code Description
D7640	Mandible - closed reduction (teeth immobilized, if present)
D7650	Malar and/or zygomatic arch - open reduction
D7660	Malar and/or zygomatic arch - closed reduction
D7670	Alveolus - closed reduction, may include stabilization of teeth
D7671	Alveolus - open reduction, may include stabilization of teeth
D7710	Maxilla - open reduction
D7720	Maxilla - closed reduction
D7730	Mandible - open reduction
D7740	Mandible - closed reduction
D7750	Malar and/or zygomatic arch - open reduction
D7760	Malar and/or zygomatic arch - closed reduction
D7770	Alveolus - open reduction stabilization of teeth
D7771	Alveolus, closed reduction stabilization of teeth
D7810	Open reduction of dislocation
D7820	Closed reduction of dislocation
D7830	Manipulation under anesthesia
D7840	Condylectomy
D7850	Surgical discectomy, with/without implant
D7852	Disc repair
D7854	Synovectomy
D7856	Myotomy
D7858	Joint reconstruction
D7860	Arthrotomy
D7865	Arthroplasty

Table 5: Exempt Dental Services

CDT 22 Code	CDT 22 Code Description
D7870	Arthrocentesis
D7872	Arthroscopy - diagnosis, with or without biopsy
D7873	Arthroscopy - lavage and lysis of adhesions
D7874	Arthroscopy - disc repositioning and stabilization
D7875	Arthroscopy - synovectomy
D7876	Arthroscopy - debridement
D7877	Arthroscopy - debridement
D7910	Suture of recent small wounds up to 5 cm
D7911	Complicated suture - up to 5 cm
D7912	Complicated suture - greater than 5 cm
D7920	Skin graft (identify defect covered, location and type of graft)
D7940	Osteoplasty - for orthognathic deformities
D7941	Osteotomy - mandibular rami
D7943	Osteotomy - mandibular rami with bone graft; includes obtaining the graft
D7944	Osteotomy - segmented or subapical
D7945	Osteotomy - body of mandible
D7946	LeFort I (maxilla - total)
D7947	LeFort I (maxilla - segmented)
D7948	LeFort II or LeFort III (osteoplasty of facial bones for midface hypoplasia or retrusion) - without bone graft
D7949	LeFort II or LeFort III - with bone graft

Table 5: Exempt Dental Services

CDT 22 Code	CDT 22 Code Description
D7950	Osseous, osteoperiosteal, or cartilage graft of the mandible or maxilla – autogenous or nonautogenous, by report
D7951	Sinus augmentation with bone or bone substitutes via a lateral open approach
D7952	Sinus augmentation via a vertical approach
D7955	Repair of maxillofacial soft and/or hard tissue defect
D7961	Buccal/labial frenectomy (frenulectomy) *Effective October 1, 2021
D7962	Lingual frenectomy (frenulectomy) *Effective October 1, 2021
D7979	Non-surgical Sialolithotomy *Effective May 16, 2020
D7980	Surgical Sialolithotomy
D7981	Excision of salivary gland, by report
D7982	Sialodochoplasty
D7983	Closure of salivary fistula
D7991	Coronoidectomy
D7993	Surgical placement of craniofacial implant – extra oral *Effective October 1, 2021
D7994	Surgical placement: zygomatic implant *Effective October 1, 2021
D7995	Synthetic graft - mandible or facial bones, by report
D7997	Appliance removal (not by dentist who placed appliance), includes removal of arch bar
D7999	Unspecified oral surgery procedure, by report

Table 5: Exempt Dental Services

CDT 22 Code	CDT 22 Code Description
D9222	Deep Sedation/General Anesthesia - First 15 Minutes *Effective March 14, 2020
D9223	Deep Sedation/General Anesthesia - Each subsequent 15 minute increment *Effective March 14, 2020
D9239	Intravenous Moderate (Conscious) Sedation/Analgesia - First 15 Minutes *Effective March 14, 2020
D9243	Intravenous Moderate (Conscious) Sedation/Analgesia - Each subsequent 15 minute increment *Effective March 14, 2020
D9920	Behavior management, by report
D9995	Teledentistry – Synchronous; Real-time encounter *Effective May 16, 2020
D9996	Teledentistry – Asynchronous; Information stored and forwarded to dentist for subsequent review *Transmission costs associated with store and forward are not payable *Effective May 16, 2020

Table 6: Exempt Emergency Dental Services

The following procedure codes may be exempt from the dental soft cap if they are related to an adequately documented emergency service pursuant to W&I Code 14080(a)(1). For details about the soft dental cap, please refer to “Section 4 – Treating Members, \$1,800 Limit per Calendar Year for Member Dental Services, with Exceptions” of this Handbook.

Table 6: Exempt Emergency Dental Services	
CDT 20 Code	CDT 20 Code Description
D0160	Detailed and extensive oral evaluation - problem focused by report
D0220	Intraoral - periapical first radiographic image
D0230	Intraoral - periapical each additional radiographic image
D0240	Intraoral - occlusal radiographic image
D0250*	Extra-oral - 2D projection radiographic image created using a stationary radiation source, and detector
D0270	Bitewing - single radiographic image
D0272	Bitewings - two radiographic images
D0274	Bitewings - four radiographic images
D0330	Panoramic radiographic image
D0999	Unspecified diagnostic procedure by report
D1551	Re-cement or re-bond bilateral space maintainer – maxillary *Effective July 1, 2021
D1552	Re-cement or re-bond bilateral space maintainer – mandibular *Effective July 1, 2021

Table 6: Exempt Emergency Dental Services	
CDT 20 Code	CDT 20 Code Description
D1553	Re-cement or re-bond unilateral space maintainer – per quadrant *Effective July 1, 2021
D2940	Protective restoration
D3220	Therapeutic pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of medicament
D3221	Pulpal debridement primary and permanent teeth
D3230	Pulpal therapy (resorbable filling) - anterior, primary tooth (excluding final restoration)
D3240	Pulpal therapy (resorbable filling) - posterior primary tooth (excluding final restoration)
D3999	Unspecified endodontic procedure by report
D4920	Unscheduled dressing change (by someone other than treating dentist or their staff)
D4999	Unspecified periodontal procedure by report
D5511	Repair broken complete denture base, mandibular *Effective March 14, 2020

Table 6: Exempt Emergency Dental Services	
CDT 20 Code	CDT 20 Code Description
D5512	Repair broken complete denture base, maxillary *Effective March 14, 2020
D5520	Replace missing or broken teeth - complete denture (each tooth)
D5611	Repair resin partial denture base, mandibular *Effective March 14, 2020
D5612	Repair resin partial denture base, maxillary *Effective March 14, 2020
D5621	Repair cast partial denture framework, mandibular *Effective March 14, 2020
D5622	Repair cast partial denture framework, maxillary *Effective March 14, 2020
D5630	Repair or replace broken retentive/clasping materials per tooth
D5640	Replace broken teeth - per tooth
D5650	Add tooth to existing partial denture
D6100	Implant removal by report
D7111	Extraction coronal remnants - primary tooth
D7140	Extraction erupted tooth or exposed root (elevation and/or forceps removal)
D7210	Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, AND including elevation of mucoperiosteal flap if indicated
D7220	Removal of impacted tooth - soft tissue

Table 6: Exempt Emergency Dental Services	
CDT 20 Code	CDT 20 Code Description
D7230	Removal of impacted tooth - partially bony
D7240	Removal of impacted tooth - completely bony
D7241	Removal of impacted tooth - completely bony with unusual surgical complications
D7250	Removal of residual tooth roots (cutting procedure)
D7261	Primary closure of a sinus perforation
D7410	Excision of benign lesion up to 1.25 cm
D7411	Excision of benign lesion greater than 1.25 cm
D7412	Excision of benign lesion complicated
D7413	Excision of malignant lesion up to 1.25 cm
D7414	Excision of malignant lesion greater than 1.25 cm
D7415	Excision of malignant lesion complicated
D7465	Destruction of lesion(s) by physical or chemical method by report
D7530	Removal of foreign body from mucosa skin or subcutaneous alveolar tissue
D7680	Facial bones - complicated reduction with fixation and multiple surgical approaches
D7780	Facial bones - complicated reduction with fixation and multiple surgical approaches
D7970	Excision of hyperplastic tissue - per arch

Table 6: Exempt Emergency Dental Services	
CDT 20 Code	CDT 20 Code Description
D7971	Excision of pericoronal gingiva
D7990	Emergency tracheotomy
D8696	Repair of orthodontic appliance – maxillary *Effective July 1, 2021
D8697	Repair of orthodontic appliance – mandibular *Effective July 1, 2021
D9110	Palliative (emergency) treatment of dental pain - minor procedure
D9120	Fixed partial denture sectioning
D9210	Local anesthesia not in conjunction with operative or surgical procedures
D9230	Inhalation of nitrous oxide/anxiolysis analgesia
D9248	Non-intravenous conscious sedation
D9410	House/extended care facility call
D9420	Hospital or ambulatory surgical center call
D9430	Office visit for observation (during regularly scheduled hours) - no other services performed
D9440	Office visit - after regularly scheduled hours
D9610	Therapeutic parenteral drug single administration
D9910	Application of desensitizing medicament
D9930	Treatment of complications (post - surgical) - unusual circumstances by report

Table 6: Exempt Emergency Dental Services	
CDT 20 Code	CDT 20 Code Description
D9999	Unspecified adjunctive procedure by report