Medical Coverage Policy

Dental Services in Outpatient Hospital or Ambulatory Settings for Qualifying Conditions

☐ Device/Equipment  ☐ Drug  ☒ Medical  ☐ Surgery  ☐ Test  ☐ Other

Effective Date:  7/1/2011  Policy Last Updated:  10/18/2011

☐ Prospective review is recommended/required. Please check the member agreement for preauthorization guidelines.

☒ Prospective review is not required.

This policy addresses facility reimbursement for dental procedures performed in the hospital outpatient, ambulatory surgery center setting due to a medical condition.

Description:

When a member has a significant qualifying medical condition, a dentist may request preauthorization to perform the dental service in a setting other than the dental office.

Medical criteria:

While most dental treatment may be performed in an office setting, some members needing dental treatment may have a qualifying medical condition that requires the procedure be provided at an inpatient/outpatient hospital setting or ambulatory surgical center.

Significant qualifying medical conditions may include:

1. Documented medical conditions such as but not limited to:
   • Heart disease, including congenital defects and prosthetic heart valve that require strict anticoagulation
   • Endocrine disturbances, including brittle diabetes and adrenal insufficiency
   • Blood dyscrasias, including coagulation defects
   • Neuromuscular disease, including spastic paralysis and muscular dystonias
   • Pulmonary disease including asthma that cannot safely be managed in an office setting
   • Genetic disease, including cystic fibrosis and cleft palate

2. Mental retardation complicated by seizure disorders, cerebral palsy, or behavior disorders.

3. Documented severe emotional disturbance/behavioral disorders.

4. Rampant caries in a patient less than forty-eight (48) months of age (Baby Bottle Syndrome).
5. Extreme apprehension in children with documentation of unsuccessful attempt(s) at office treatment with sedation.

**Policy:**

Facility charges (e.g., operating room, anesthesia, medical consults) are eligible for coverage under the member's medical benefit when the above medical criteria are met.

Coverage for services performed by the oral surgeon/dentist may be provided through the dental benefit. If the member has no dental coverage, payment for the dental services are the member's responsibility.

**Prior authorization is required for BlueCHiP for Medicare and recommended for all other lines of business.**

**Coverage:**

Benefits may vary between groups/contracts. Please refer to the appropriate Evidence of Coverage or Subscriber Agreement for applicable Dental and Inpatient/Outpatient/Free-Standing Ambulatory Surgery benefits/coverage.

**Coding:**

To insure correct claim processing, facilities are requested to use the following HCPCS dental codes:

**HCPCS Dental Procedures:**

D0120 periodic oral evaluation - established patient
D0140 limited oral evaluation - problem focused
D0145 oral evaluation for a patient under three years of age and counseling with primary caregiver
D0150 comprehensive oral evaluation - new or established patient
D0160 detailed and extensive oral evaluation - problem focused, by report
D0170 re-evaluation-limited, problem focused (established patient; not post-operative visit
D0180 comprehensive periodontal evaluation - new or established patient
D1110 prophylaxis-adult
D1120 prophylaxis-child
D1201 topical application of fluoride (including prophylaxis)-child
D1203 topical application of fluoride - child
D1204 topical application of fluoride - adult
D1205 topical application of fluoride (including prophylaxis)-adult
D1206 topical fluoride varnish; therapeutic application for moderate to high caries risk patients
D1351 sealant-per tooth
D1510 space maintainer-fixed unilateral
D1515 space maintainer-fixed bilateral
D1520 space maintainer-removable unilateral
D1525 space maintainer-removable bilateral
D1550 recementation of space maintainer
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>D1555</td>
<td>removal of fixed space maintainer</td>
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<tr>
<td>D2140</td>
<td>amalgam-one surface, primary or permanent</td>
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<tr>
<td>D2150</td>
<td>amalgam-two surfaces, primary or permanent</td>
</tr>
<tr>
<td>D2160</td>
<td>amalgam-three surfaces, primary or permanent</td>
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<tr>
<td>D2161</td>
<td>amalgam-four or more surfaces, primary or permanent</td>
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<tr>
<td>D2330</td>
<td>resin-one surface, anterior</td>
</tr>
<tr>
<td>D2331</td>
<td>resin-two surfaces, anterior</td>
</tr>
<tr>
<td>D2332</td>
<td>resin-three surfaces, anterior</td>
</tr>
<tr>
<td>D2335</td>
<td>resin-four or more surfaces or involving incisal angle (anterior)</td>
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<tr>
<td>D2390</td>
<td>resin-based composite crown, anterior</td>
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<tr>
<td>D2391</td>
<td>resin-based composite - one surface, posterior</td>
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<tr>
<td>D2392</td>
<td>resin-based composite - two surfaces, posterior</td>
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<tr>
<td>D2393</td>
<td>resin-based composite - three surfaces, posterior</td>
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<tr>
<td>D2394</td>
<td>resin-based composite - four or more surfaces, posterior</td>
</tr>
<tr>
<td>D2410</td>
<td>gold foil-one surface</td>
</tr>
<tr>
<td>D2420</td>
<td>gold foil-two surfaces</td>
</tr>
<tr>
<td>D2430</td>
<td>gold foil-three surfaces</td>
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<tr>
<td>D2510</td>
<td>inlay-metallic-one surface</td>
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<tr>
<td>D2520</td>
<td>inlay-metallic-two surfaces</td>
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<tr>
<td>D2530</td>
<td>inlay-metallic-three or more surfaces</td>
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<tr>
<td>D2542</td>
<td>onlay-metallic-two surfaces</td>
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<tr>
<td>D2543</td>
<td>onlay - metallic - three surfaces</td>
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<tr>
<td>D2544</td>
<td>onlay - metallic - four or more surfaces</td>
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<tr>
<td>D2610</td>
<td>inlay-porcelain/ceramic-one surface</td>
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<tr>
<td>D2620</td>
<td>inlay-porcelain/ceramic-two surfaces</td>
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<tr>
<td>D2630</td>
<td>inlay-porcelain/ceramic-three or more surfaces</td>
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<tr>
<td>D2642</td>
<td>onlay - porcelain/ceramic - two surfaces</td>
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<tr>
<td>D2643</td>
<td>onlay - porcelain/ceramic - three surfaces</td>
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<tr>
<td>D2644</td>
<td>onlay - porcelain/ceramic - four or more surfaces</td>
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<tr>
<td>D2660</td>
<td>inlay - resin-based composite - one surface</td>
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<tr>
<td>D2651</td>
<td>inlay - resin-based composite - two surfaces</td>
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<tr>
<td>D2652</td>
<td>inlay - resin-based composite - three or more surfaces</td>
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<tr>
<td>D2662</td>
<td>onlay - resin-based composite - two surfaces</td>
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<tr>
<td>D2663</td>
<td>onlay - resin-based composite - three surfaces</td>
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<tr>
<td>D2664</td>
<td>onlay - - resin-based composite - four or more surfaces</td>
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<tr>
<td>D2710</td>
<td>crown - resin-based composite (indirect)</td>
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<tr>
<td>D2712</td>
<td>crown - 3/4 resin-based composite (indirect)</td>
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<tr>
<td>D2720</td>
<td>crown-resin with high noble metal</td>
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<tr>
<td>D2721</td>
<td>crown-resin with predominantly base metal</td>
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<tr>
<td>D2722</td>
<td>crown-resin with noble metal</td>
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<tr>
<td>D2740</td>
<td>crown-porcelain/ceramic substrate</td>
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<tr>
<td>D2750</td>
<td>crown-porcelain fused to high noble metal</td>
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<tr>
<td>D2751</td>
<td>crown-procelain fused to predominantly base metal</td>
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<tr>
<td>D2752</td>
<td>crown-porcelain fused to noble metal</td>
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<tr>
<td>D2780</td>
<td>crown - 3/4 cast high noble metal</td>
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<tr>
<td>D2781</td>
<td>crown - 3/4 cast predominantly base metal</td>
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<tr>
<td>D2782</td>
<td>crown - 3/4 cast noble metal</td>
</tr>
<tr>
<td>D2783</td>
<td>crown - 3/4 porcelain/ceramic</td>
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<tr>
<td>D2790</td>
<td>crown-full cast high noble metal</td>
</tr>
<tr>
<td>D2791</td>
<td>crown-full cast predominantly base metal</td>
</tr>
<tr>
<td>D2792</td>
<td>crown-full cast noble metal</td>
</tr>
</tbody>
</table>
D2794 crown-titanium
D2799 provisional crown
D2910 recement inlay, onlay or partial coverage restoration
D2915 recement cast or prefabricated post and core
D2920 recement crown
D2930 prefabricated stainless steel crown-primary tooth
D2931 prefabricated stainless steel crown-permanent tooth
D2932 prefabricated resin crown
D2933 prefabricated stainless steel crown with resin window
D2934 prefabricated esthetic coated stainless steel crown - primary tooth
D2940 sedative filling
D2950 core build-up, including any pins
D2951 pin retention-per tooth, in addition to restoration
D2952 post and core in addition to crown, indirectly fabricated
D2953 each additional indirectly fabricated post - same tooth
D2954 prefabricated post and core in addition to crown
D2955 post removal (not in conjunction with endodontic therapy)
D2957 each additional prefabricated post - same tooth
D2960 labial veneer (laminate)-chairside
D2961 labial veneer (resin laminate)-laboratory
D2962 labial veneer (porcelain laminate)-laboratory
D2970 temporary crown (fractured tooth)
D2971 additional procedures to construct new crown under existing partial denture framework
D2975 coping
D2980 crown repair, by report
D2999 unspecified restorative procedure, by report
D3110 pulp cap-direct (excluding final restoration)
D3120 pulp cap-indirect (excluding final 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
D3222 partial pulpotomy for apexogenesis - permanent tooth with incomplete root
development
D3230 pulpal therapy (resorbable filling)-anterior, primary tooth (excluding final restoration)
D3240 pulpal therapy (resorbable filling)-posterior, primary tooth (excluding final restoration)
D3310 endodontic therapy, anterior tooth (excluding final restoration)
D3320 endodontic therapy, bicuspid tooth (excluding final restoration)
D3330 endodontic therapy, molar (excluding final restoration)
D3331 treatment of root canal obstruction; non-surgical access
D3332 incomplete endodontic therapy; inoperable, unrestorable or fractured tooth
D3333 internal root repair of perforation defects
D3346 retreatment of previous root canal therapy-anterior
D3347 retreatment of previous root canal therapy-bicuspid
D3348 retreatment of previous root canal therapy-molar
D3351 apexification/recalcification-initial visit (apical closure/calcific repair of perforations, root
resorption, etc.)
D3352 apexification/recalcification-interim medication replacement (apical closure/calcific
repair of perforations, root resorption, etc.)
D3353 apexification/recalcification-final visit (includes completed root canal therapy-apical
closure/calcific repair of perforations, root resorption, etc.)
D3410 apicoectomy/periradicular surgery-anterior
D3421 apicoectomy/periradicular surgery-bicuspid (first root)
D3425 apicoectomy/periradicular surgery-molar (first root).
D3426 apicoectomy/periradicular surgery (each additional root)
D3430 retrograde filling-per root
D3450 root amputation-per root
D3460 endodontic endosseous implant
D3470 intentional replantation (including necessary splinting)
D3910 surgical procedure for isolation of tooth with rubber dam
D3920 hemisection (including any root removal), not including root canal therapy
D3950 canal preparation and fitting of preformed dowel or post
D3999 unspecified endodontic procedure, by report
D4210 gingivectomy or gingivoplasty - four or more contiguous teeth or tooth bounded
D4211 spaces per quadrant
D42111 gingivectomy or gingivoplasty - one to three contiguous teeth or tooth bounded spaces per quadrant
D4230 anatomical crown exposure - four or more contiguous teeth per quadrant
D4231 anatomical crown exposure - one to three teeth per quadrant
D4240 gingival flap procedure, including root planing - four or more contiguous teeth or tooth bounded spaces per quadrant
D4241 gingival flap procedure, including root planing - one to three contiguous teeth or tooth bounded spaces per quadrant
D4245 apically positioned flap
D4249 clinical crown lengthening-hard tissue
D4260 osseous surgery (including flap entry and closure) - four or more contiguous teeth or tooth bounded spaces per quadrant
D4261 osseous surgery (including flap entry and closure) - one to three contiguous teeth or tooth bounded spaces per quadrant
D4263 bone replacement graft - first site in quadrant
D4264 bone replacement graft - each additional site in quadrant
D4265 biologic materials to aid in soft and osseous tissue regeneration
D4266 guided tissue regeneration - resorbable barrier, per site
D4267 guided tissue regeneration - nonresorbable barrier, per site, (includes membrane removal)
D4268 surgical revision procedure, per tooth
D4270 pedicle soft tissue graft procedure
D4271 free soft tissue graft procedure (including donor site surgery)
D4273 subepithelial connective tissue graft procedures, per tooth
D4274 distal or proximal wedge procedure (when not performed in conjunction with surgical procedures in the same anatomical area)
D4275 soft tissue allograft
D4276 combined connective tissue and double pedicle graft, per tooth
D4320 provisional splinting-intracoronaral
D4321 provisional splinting-extracoronaral
D4341 periodontal scaling and root planing - four or more teeth per quadrant
D4342 periodontal scaling and root planing - one to three teeth, per quadrant
D4355 full mouth debridement to enable comprehensive evaluation and diagnosis
D4381 localized delivery of antimicrobial agents via a controlled release vehicle into diseased crevicular tissue, per tooth, by report
D4910 periodontal maintenance
D4920 unscheduled dressing change (by someone other than treating dentist)
D4999 unspecified periodontal procedure, by report
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>D5410</td>
<td>adjust complete denture - maxillary</td>
</tr>
<tr>
<td>D5411</td>
<td>adjust complete denture - mandibular</td>
</tr>
<tr>
<td>D5421</td>
<td>adjust partial denture - maxillary</td>
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<tr>
<td>D5422</td>
<td>adjust partial denture - mandibular</td>
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<tr>
<td>D5911</td>
<td>facial moulage (sectional)</td>
</tr>
<tr>
<td>D5912</td>
<td>facial moulage (complete)</td>
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<tr>
<td>D5913</td>
<td>nasal prosthesis</td>
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<tr>
<td>D5914</td>
<td>auricular prosthesis</td>
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<td>D5916</td>
<td>ocular prosthesis</td>
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<td>D5919</td>
<td>facial prosthesis</td>
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<td>D5922</td>
<td>nasal septal prosthesis</td>
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<td>D5923</td>
<td>ocular prosthesis, interim</td>
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<td>D5924</td>
<td>cranial prosthesis</td>
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<td>D5925</td>
<td>facial augmentation implant prosthesis</td>
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<td>D5926</td>
<td>nasal prosthesis, replacement</td>
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<td>D5927</td>
<td>auricular prosthesis, replacement</td>
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<td>D5928</td>
<td>orbital prosthesis, replacement</td>
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<td>D5929</td>
<td>facial prosthesis, replacement</td>
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<td>D5931</td>
<td>obturator prosthesis, surgical</td>
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<tr>
<td>D5932</td>
<td>obturator prosthesis, definitive</td>
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<tr>
<td>D5933</td>
<td>obturator prosthesis, modification</td>
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<tr>
<td>D5934</td>
<td>mandibular resection prosthesis with guide flange</td>
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<td>D5935</td>
<td>mandibular resection prosthesis without guide flange</td>
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<td>D5936</td>
<td>obturator/prosthesis, interim</td>
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<td>D5937</td>
<td>trismus appliance (not for tm treatment)</td>
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<td>palatal augmentation prosthesis</td>
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<td>palatal lift prosthesis, definitive</td>
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<td>D5958</td>
<td>palatal lift prosthesis, interim</td>
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<td>palatal lift prosthesis, modification</td>
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<td>speech aid prosthesis, modification</td>
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<td>D5982</td>
<td>surgical stent</td>
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<td>D5987</td>
<td>commissure splint</td>
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<td>D5988</td>
<td>surgical splint</td>
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<tr>
<td>D5991</td>
<td>topical medicament carrier</td>
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<tr>
<td>D5999</td>
<td>unspecified maxillofacial prosthesis, by report</td>
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<td>D6010</td>
<td>surgical placement of implant body: endosteal implant</td>
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<tr>
<td>D6012</td>
<td>surgical placement of interim implant body for transitional prosthesis: endosteal implant</td>
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<tr>
<td>D6040</td>
<td>surgical placement: eposteal implant</td>
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<tr>
<td>D6050</td>
<td>surgical placement: transosteal implant</td>
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<tr>
<td>D6053</td>
<td>implant/abutment supported removable denture for completely edentulous arch</td>
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<tr>
<td>D6054</td>
<td>implant/abutment supported removable denture for partially edentulous arch</td>
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<tr>
<td>D6055</td>
<td>dental implant supported connecting bar</td>
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<tr>
<td>D6056</td>
<td>prefabricated abutment - includes placement</td>
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<tr>
<td>D6057</td>
<td>custom abutment - includes placement</td>
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<tr>
<td>D6058</td>
<td>abutment supported porcelain/ceramic crown</td>
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<tr>
<td>D6059</td>
<td>abutment supported porcelain fused to metal crown (high noble metal)</td>
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<tr>
<td>D6060</td>
<td>abutment supported porcelain fused to metal crown (predominantly base metal)</td>
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<tr>
<td>D6061</td>
<td>abutment supported porcelain fused to metal crown (noble metal)</td>
</tr>
<tr>
<td>D6062</td>
<td>abutment supported cast metal crown (high noble metal)</td>
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</tbody>
</table>
D6063 abutment supported cast metal crown (predominantly base metal)
D6064 abutment supported cast metal crown (noble metal)
D6065 implant supported porcelain/ceramic crown
D6066 implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal)
D6067 implant supported metal crown (titanium, titanium alloy, high noble metal)
D6068 abutment supported retainer for porcelain/ceramic fpd
D6069 abutment supported retainer for porcelain fused to metal fpd (high noble metal)
D6070 abutment supported retainer for porcelain fused to metal fpd (predominantly base metal)
D6071 abutment supported retainer for porcelain fused to metal fpd (noble metal)
D6072 implant supported retainer for porcelain fused to metal fpd (high noble metal)
D6073 implant supported retainer for porcelain fused to metal fpd (predominantly base metal)
D6074 implant supported retainer for porcelain fused to metal fpd (noble metal)
D6075 implant supported retainer for ceramic fpd
D6076 implant supported retainer for porcelain fused to metal fpd (titanium, titanium alloy, or high noble metal)
D6077 implant supported retainer for cast metal fpd (titanium, titanium alloy, or high noble metal)
D6078 implant/abutment supported fixed denture for completely edentulous arch
D6079 implant/abutment supported fixed denture for partially edentulous arch
D6080 implant maintenance procedures, including: removal of prosthesis/cleansing of prosthesis/abutment reinsertion of prosthesis
D6090 repair implant supported prosthesis by report
D6091 replacement of semi-precision or precision attachment (male or female component) of implant/abutment supported prosthesis, per attachment
D6092 recement implant/abutment supported crown
D6093 recement implant/abutment supported fixed partial denture
D6094 abutment supported crown - (titanium)
D6095 repair implant abutment, by report
D6100 implant removal, by report
D6190 radiographic/surgical implant index, by report
D6194 abutment supported retainer crown for fpd - (titanium)
D6199 unspecified implant procedure, by report
D6205 pontic - indirect resin based composite
D6210 pontic-cast high noble metal
D6211 pontic-cast predominantly base metal
D6212 pontic-cast noble metal
D6214 pontic - titanium
D6240 pontic-porcelain fused to high noble metal
D6241 pontic-porcelain fused to predominantly base metal
D6242 pontic-porcelain fused to noble metal
D6245 pontic - porcelain/ceramic
D6250 pontic-resin with high noble metal
D6251 pontic-resin with predominantly base metal
D6252 pontic-resin with noble metal
D6253 provisional pontic
D6545 retainer-cast metal for resin bonded fixed prosthesis
D6548 retainer - porcelain/ceramic for resin bonded fixed prosthesis
D6600 inlay-porcelain/ceramic, two surfaces
D6601 inlay - porcelain/ceramic, three or more surfaces
D6602 inlay - cast high noble metal, two surfaces
D6603 inlay - cast high noble metal, three or more surfaces
D6604 inlay - cast predominantly base metal, two surfaces
D6605 inlay - cast predominantly base metal, three or more surfaces
D6606 inlay - cast noble metal, two surfaces
D6607 inlay - cast noble metal, three or more surfaces
D6608 onlay - porcelain/ceramic, two surfaces
D6609 onlay - porcelain/ceramic, three or more surfaces
D6610 onlay - cast high noble metal, two surfaces
D6611 onlay - cast high noble metal, three or more surfaces
D6612 onlay - cast predominantly base metal, two surfaces
D6613 onlay - cast predominantly base metal, three or more surfaces
D6614 onlay - cast noble metal, two surfaces
D6615 onlay - cast noble metal, three or more surfaces
D6624 inlay - titanium
D6634 onlay - titanium
D6710 crown - indirect resin based composite
D6720 crown-resin with high noble metal
D6721 crown-resin with predominantly base metal
D6722 crown-resin with noble metal
D6740 crown - porcelain/ceramic
D6750 crown-porcelain fused to high noble metal
D6751 crown-porcelain fused to predominantly base metal
D6752 crown-porcelain fused to noble metal
D6780 crown-3/4 cast high noble metal
D6781 crown - 3/4 cast predominantly based metal
D6782 crown - 3/4 cast noble metal
D6783 crown - 3/4 porcelain/ceramic
D6790 crown-full cast high noble metal
D6791 crown-full cast predominantly base metal
D6792 crown-full cast noble metal
D6793 provisional retainer crown
D6794 crown - titanium
D6920 connector bar
D6930 recement bridge
D6940 stress breaker
D6950 precision attachment
D6970 post and core in addition to fixed partial denture retainer, indirectly fabricated
D6971 cast post as part of bridge retainer
D6972 prefabricated post and core in addition to bridge retainer
D6973 core build up for retainer, including any pins
D6975 coping-metal
D6976 each additional indirectly fabricated post - same tooth
D6977 each additional prefabricated post - same tooth
D7111 extraction, coronal remnants - deciduous tooth
D7140 extraction, erupted tooth or exposed root (elevation and/or forceps removal)
D7210 surgical removal of erupted tooth requiring elevation of mucoperiosteal flap
D7210 and removal of bone and/or section of tooth
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 surgical removal of residual tooth roots (cutting procedure)
D7260 oral antral fistula closure
D7261 primary closure of a sinus perforation
D7270 tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth
D7272 tooth transplantation (includes reimplantation from one site to another and splinting and/or stabilization)
D7280 surgical access of an unerupted tooth
D7282 mobilization of erupted or malpositioned tooth to aid eruption
D7283 placement of device to facilitate eruption of impacted tooth
D7285 biopsy of oral tissue - hard (bone, tooth)
D7286 biopsy of oral tissue - soft
D7287 exfoliative cytological sample collection
D7288 brush biopsy - transepithelial sample collection
D7290 surgical repositioning of teeth
D7291 transseptal fiberotomy/supra crestal fiberotomy, by report
D7292 surgical placement: temporary anchorage device [screw retained plate] requiring surgical flap
D7293 surgical placement: temporary anchorage device requiring surgical flap
D7294 surgical placement: temporary anchorage device without surgical flap
D7310 alveoloplasty in conjunction with extractions - four or more teeth or tooth spaces, per quadrant
D7311 alveoloplasty in conjunction with extractions - one to three teeth or tooth spaces, per quadrant
D7320 alveoloplasty not in conjunction with extractions - four or more teeth or tooth spaces, per quadrant
D7321 alveoloplasty not in conjunction with extractions - one to three teeth or tooth spaces, per quadrant
D7340 vestibuloplasty-ridge extension (second epithelialization)
D7350 vestibuloplasty-ridge extension (including soft tissue grafts, muscle re-attachments, revision of soft tissue attachment, and management of hypertrophied and hyperplastic tissue)
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
D7450 removal of benign odontogenic cyst or tumor-lesion diameter up to 1.25 cm
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 methods, by report
D7470 removal of lateral exostosis (maxilla or mandible)
D7472 removal of torus palatinus
D7473 removal of torus mandibularis
D7485 surgical reduction of osseous tuberosity
D7490 radical resection of maxilla or mandible
D7510 incision and drainage of abscess-intraoral soft tissue
D7511 incision and drainage of abscess - intraoral soft tissue - complicated
D7511 (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
D7521 (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
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
D7680 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
D7780 facial bones-complicated reduction with fixation and multiple surgical approaches
D7780 maxilla-open reduction
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 arthroplasty
D7865 arthroscopy
D7870 arthrocentesis
D7871 arthroscopy-diagnosis, with or without biopsy
D7872 arthroscopy-surgical: lavage and lysis of adhesions
D7874 arthroscopy-surgical: disc repositioning and stabilization
D7875 arthroscopy-surgical: synovectomy
D7876 arthroscopy-surgical: discectomy
D7877 arthroscopy-surgical: debridement
D7880 occlusal orthotic appliance
D7899 unspecified tmd therapy, by report
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 retraction)-without bone graft
D7949 lefort ii or lefort iii-with bone graft
D7950 osseous, osteoperiosteal, or cartilage graft of the mandible or maxilla -
D7950 autogenous or nonautogenous, by report
D7951 sinus augmentation with bone or bone substitutes
D7953 bone replacement graft for ridge preservation - per site
D7955 repair of maxillofacial soft and/or hard tissue defect
D7960 frenulectomy (frenectomy or frenotomy)-separate procedure
D7963 frenuoplasty
D7970 excision of hyperplastic tissue-per arch
D7971 excision of pericoronal gingiva
D7972 surgical reduction of fibrous tuberosity
D7980 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
D7996 implant-mandible for augmentation purposes (excluding alveolar ridge), by report
D7997 appliance removal (not by dentist who placed appliance), includes removal of archbar
D7998 intraoral placement of a fixation device not in conjunction with a fracture
D7999 unspecified oral surgery procedure, by report

Related Topics:

Oral Surgeons Filing Evaluation and Management Services
Dental Services for Accidental Injury
Dental Services: Oral Surgeons Filing Anesthesia Services in the Office Setting
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