



Covered Procedure Code List

Code	Description	Notes
D0120	Periodic oral evaluation - established patient	
D0140	Limited oral evaluation - problem focused	
D0150	Comprehensive oral evaluation - new and established patient	
D0160	Detailed and extensive oral evaluation - problem focused, by report	
D0170	Re-evaluation - limited, problem focused (established patient; not post-operative visit)	
D0210	Intraoral - complete series (including bitewings)	
D0220	Intraoral - periapical first film	
D0230	Intraoral - periapical each additional film	
D0240	Extraoral - occlusal film	
D0270	Bitewing - single film	
D0272	Bitewings - two films	
D0273	Bitewings - three films	
D0274	Bitewings - four films	
D0330	Panoramic film	
D0460	Pulp vitality tests	
D1120	Prophylaxis - child	
D1203	Topical application of fluoride - child	
D1206	Topical fluoride varnish; therapeutic application for moderate to high caries risk patients	
D1351	Sealant - per tooth	unrestored molars only
D1510	Space maintainer - fixed - unilateral	
D1515	Space maintainer - fixed - bilateral	
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	
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	
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	
D2940	Sedative filling	
D2970	Temporary crown (fractured tooth)	



Code	Description	Notes
D2999	Unspecified restorative procedure, by report	
D3110	Pulp cap - direct (excluding final restoration)	
D3220	Therapeutic pulpotomy (excluding final restoration)	
D3221	Pulpal debridement, primary and permanent teeth	
D3222	Partial pulpotomy for apexogenesis - permanent tooth with incomplete root development	
D3230	Pulpal therapy (resorable filling) - anterior, primary tooth (excluding final restoration)	
D3240	Pulpal therapy (resorable filling) - posterior, primary tooth (excluding final restoration)	
D3310	Endodontic therapy, anterior tooth (excluding final restoration)	
D3330	Endodontic therapy, molar (excluding final restoration)	
D3351	Apexification/recalcification - initial visit	
D3352	Apexification/recalcification - interim medication replacement	
D3353	Apexification/recalcification - final visit	
D3470	Intentional reimplantation (including necessary splinting)	
D4211	Gingivectomy or gingivoplasty - one to three contiguous teeth	
D4230	Anatomical crown exposure - four or more contiguous teeth per quadrant	
D4231	Anatomical crown exposure - one to three teeth per quadrant	
D7111	Extraction, coronal remnants - deciduous tooth	
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	
D7210	Surgical removal of erupted tooth	
D7250	Surgical removal of residual tooth roots (cutting procedure)	
D7270	Tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth	
D7280	Surgical access of an unerupted tooth	
D7510	Incision and drainage of abscess - intraoral soft tissue	
D7511	Incision and drainage of abscess - intraoral soft tissue - complicated	
D7520	Incision and drainage of abscess - extraoral soft tissue	
D7910	Suture of recent small wounds up to 5 cm	
D8210	Removable appliance therapy	By report
D8220	Fixed appliance therapy	By report
D9230	Analgesia, anxiolysis, inhalation of nitrous oxide	
D9440	Office visit - after regularly scheduled hours	
D9920	Behavior management, by report	
D9930	Treatment of complications (post-surgical) - unusual circumstances, by report	
*Services are subject to the child's maximum.		