





Changes to the CDT Code

This version of the CDT Code is effective January 1, 2016 through December 31, 2016. All changes are illustrated in this section, with added text <u>underlined in blue ink</u> and deleted text stricken through in red ink. There are:

- 19 Additions
- 12 Revisions
- 8 Deletions
- 41 editorial (e.g., syntax; spelling) actions that clarify without changing the CDT Code entry's purpose or scope

As noted in the preface, the CDT Code is divided into twelve Categories of Service <u>only</u> for the purpose of organization. Each category begins at the top of a right-hand page in this section.

Classification of Materials

Additions

None

Revisions

None

Deletions

None

Editorial

Resin

Refers to any resin-based composite, including fiber or ceramic reinforced polymer compounds, and glass ionomers.

2

D0100-D0999 I. Diagnostic

Additions

Three (3) CDT Codes

D0251extra-oral posterior dental radiographic imageImage limited to exposure of complete posterior teeth in both
dental arches. This is a unique image that is not derived from
another image.

- D0422 collection and preparation of genetic sample material for laboratory analysis and report
- D0423 genetic test for susceptibility to diseases specimen analysis

<u>Certified laboratory analysis to detect specific genetic variations</u> <u>associated with increased susceptibility for diseases.</u>

Revisions

Two (2) CDT Codes

- D0250 extra_oral first <u>2D projection</u> radiographic images <u>created</u> <u>using a stationary radiation source, and detector</u> These images include, but are not limited to: Lateral Skull; <u>Posterior-Anterior Skull; Submentovertex; Waters; Reverse Tomes;</u> <u>Oblique Mandibular Body; Lateral Ramus.</u>
- D0340 <u>2D</u> cephalometric radiographic image <u>– acquisition</u>, <u>measurement and analysis</u> Image of the head made using a cephalostat to standardize

anatomic positioning, and with reproducible x-ray beam geometry.

Deletions

Two (2) CDT Codes

D0260 extraoral – each additional radiographic image

D0421 genetic test for susceptibility to oral diseases

Sample collection for the purpose of certified laboratory analysis to detect specific genetic variations associated with increased susceptibility for oral diseases such as severe periodontal disease.

Editorial

D1000-D1999 II. Preventive

Additions

One (1) CDT Code

D1354 interim caries arresting medicament application

<u>Conservative treatment of an active, non-symptomatic carious</u> <u>lesion by topical application of a caries arresting or inhibiting</u> <u>medicament and without mechanical removal of sound tooth</u> <u>structure.</u>

Revisions

None

Deletions

None

Editorial

D1999 unspecified preventive procedure, by report Used for procedure that is not adequately described by another CDT Code. Describe procedure.

D2000-D2999 III. Restorative

Additions

None

Revisions

None

Deletions

One (1) CDT Code

D2970 temporary crown (fractured tooth)

Usually a preformed artificial crown, which is fitted over a damaged tooth as an immediate protective device. This is not temporization during crown fabrication

Editorial

- **D2712** crown ¾ resin-based composite (indirect) This code procedure does not include facial veneers.
- D2783 crown ¾ porcelain/ceramic This code procedure does not include facial veneers.

D3000-D3999 IV. Endodontics

Additions

None

Revisions

None

Deletions

None

Editorial

None

2

D4000-D4999 V. Periodontics

Additions

Two (2) CDT Codes

 D4283
 autogenous connective tissue graft procedure (including donor and recipient surgical sites) – each additional contiguous tooth, implant or edentulous tooth position in same graft site Used in conjunction with D4273.

D4285non-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
Used in conjunction with D4275.

Revisions

Four (4) CDT Codes

D4273 <u>autogenous</u> subepithelial connective tissue graft procedures (including donor and recipient surgical sites) per first tooth, implant, or edentulous tooth position in graft

This procedure is performed to create or augment gingiva, to obtain root coverage to eliminate sensitivity and to prevent rootcaries, to eliminate frenum pull, to extend the vestibular fornix, to augment collapsed ridges, to provide an adequate gingival interfacewith a restoration or to cover bone or ridge regeneration sites when adequate gingival tissues are not available for effective closure. There are two surgical sites. The recipient site utilizes a split thickness incision, retaining the overlying overlapping flap of gingiva and/or mucosa. The connective tissue is dissected from a separate the donor site leaving an epithelialized flap for closure. After the graft is placed on the recipient site, it is covered with the retained overlying flap.

D4275 <u>non-autogenous connective</u> soft tissue allograft (including recipient site and donor material) first tooth, implant, or edentulous tooth position in graft

Procedure is performed to create or augment the gingiva, with orwithout root coverage. This may be used to eliminate the pull of the frena and muscle attachments, to extend the vestibular fornix, and correct localized gingival recession. There is no donor site. <u>only a</u> recipient surgical site utilizing split thickness incision, retaining the overlaying flap of gingiva and/or mucosa. A donor surgical site is not present.

- D4277 free soft tissue graft procedure (including <u>recipient and</u> donor <u>surgical</u> site<u>s</u> surgery) first tooth, <u>implant</u>, or edentulous tooth position in graft
- D4278 free soft tissue graft procedure (including <u>recipient and</u> donor <u>surgery</u> <u>surgical</u> site<u>s</u>) each additional contiguous tooth, <u>implant</u>, or edentulous tooth position in same graft site Used in conjunction with D4277.

Deletions

None

Editorial

D5000-D5899 VI. Prosthodontics (removable)

Additions

Four (4) CDT Codes

- D5221
 immediate maxillary partial denture resin base (including any conventional clasps, rests and teeth)

 Includes limited follow-up care only; does not include future rebasing / relining procedure(s).
- D5222
 immediate mandibular partial denture resin base (including any conventional clasps, rests and teeth)

 Includes limited follow-up care only; does not include future rebasing / relining procedure(s).
- D5223
 immediate maxillary partial denture cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)

 Includes limited follow-up care only; does not include future

rebasing / relining procedure(s).

D5224immediate mandibular partial denture – cast metal
framework with resin denture bases (including any
conventional clasps, rests and teeth)

Includes limited follow-up care only; does not include future rebasing / relining procedure(s).

Revisions

Five (5) CDT Codes

D5130 immediate denture – maxillary

Includes limited follow-up care only; does not include future rebasing / relining procedure(s) or a complete new denture.

D5140 immediate denture – mandibular

Includes limited follow-up care only; does not include future rebasing / relining procedure(s) or a complete new denture.

- D5630 repair or replace broken clasp <u>– per tooth</u>
- D5660 add clasp to existing partial denture <u>– per tooth</u>
- D5875 modification of removable prosthesis following implant surgery

Attachment assemblies are reported using separate codes. The modification of existing removable prosthesis is sometimesnecessary at the time of implant placement and bone graft surgeryand is always necessary at the time of the placement of the healingcaps. This code could also be used for the modification of anexisting prosthesis when the abutments are placed and retentiveelements are placed into the removable prosthesis, therebyreducing the need for a new prosthesis.

Deletions None

Editorial

D5900-D5999 VII. Maxillofacial Prosthetics

Additions

None

Revisions

None

Deletions

None

Editorial

D5993 maintenance and cleaning of a maxillofacial prosthesis (extra- or intra-oral) other than required adjustments, by report

Maintenance and cleaning of a maxillofacial prosthesis.

D6000-D6199 VIII. Implant Services

Additions

None

Revisions

None

Deletions

None

Editorial

D6103 bone graft for repair of peri-implant defect – does not include flap entry and closure. Placement of a barrier membrane or biologic materials to aid in osseous regeneration are reported separately. Placement of a barrier membrane or biologic materials to aid in osseous regeneration, are reported separately.

2

D6200-D6999 IX. Prosthodontics, fixed

Additions

None

Revisions

None

Deletions

None

Editorial

Subcategory Descriptor

The term "fixed partial denture" <u>or FPD is synonymous with fixed bridge or</u> <u>bridgework.</u> replaces the words "bridge" and "bridgework" throughout this section.

CDT Code Entries

- D6600 retainer inlay porcelain/ceramic, two surfaces
- D6601 retainer inlay porcelain/ceramic, three or more surfaces
- D6602 retainer inlay cast high noble metal, two surfaces
- D6603 retainer inlay cast high noble metal, three or more surfaces
- D6604 retainer inlay cast predominantly base metal, two surfaces
- D6605 <u>retainer</u> inlay cast predominantly base metal, three or more surfaces
- D6606 retainer inlay cast noble metal, two surfaces
- D6607 retainer inlay cast noble metal, three or more surfaces

Changes - Prosthodontics, fixed

- D6608 <u>retainer</u> onlay porcelain/ceramic, two surfaces
- D6609 <u>retainer</u> onlay porcelain/ceramic, three or more surfaces
- D6610 <u>retainer</u> onlay cast high noble metal, two surfaces
- D6611 <u>retainer</u> onlay cast high noble metal, three or more surfaces
- D6612 <u>retainer</u> onlay cast predominantly base metal, two surfaces
- D6613 <u>retainer</u> onlay cast predominantly base metal, three or more surfaces
- D6614 <u>retainer</u> onlay cast noble metal, two surfaces
- D6615 <u>retainer</u> onlay cast noble metal, three or more surfaces
- D6624 <u>retainer</u> inlay titanium
- D6634 <u>retainer</u> onlay titanium
- **D6710** <u>retainer</u> crown indirect resin based composite Not to be used as a temporary or provisional prosthesis.
- D6720 <u>retainer</u> crown resin with high noble metal
- D6721 <u>retainer</u> crown resin with predominantly base metal
- D6722 <u>retainer</u> crown resin with noble metal
- D6740 <u>retainer</u> crown porcelain/ceramic
- D6750 <u>retainer</u> crown porcelain fused to high noble metal
- D6751 <u>retainer</u> crown porcelain fused to predominantly base metal
- D6752 <u>retainer</u> crown porcelain fused to noble metal
- D6780 <u>retainer</u> crown 3/4 cast high noble metal
- D6781 retainer crown 3/4 cast predominantly base metal
- D6782 <u>retainer</u> crown 3/4 cast noble metal
- D6783 <u>retainer</u> crown 3/4 porcelain/ceramic

- D6790 <u>retainer</u> crown full cast high noble metal
- D6791 retainer crown full cast predominantly base metal
- D6792 <u>retainer</u> crown full cast noble metal
- D6794 <u>retainer</u> crown titanium

D7000-D7999 X. Oral and Maxillofacial Surgery

Additions

One (1) CDT Code

D7881 occlusal orthotic device adjustment

Revisions

None

Deletions

None

Editorial

D8000-D8999 XI. Orthodontics

Additions

One (1) CDT Code

D8681 removable orthodontic retainer adjustment

Revisions

None

Deletions

None

Editorial

D9000-D9999 XII. Adjunctive General Services

Additions

Seven (7) CDT Codes

D9223 <u>deep sedation/general anesthesia – each 15 minute</u> <u>increment</u>

Anesthesia time begins when the doctor administering the anesthetic agent initiates the appropriate anesthesia and noninvasive monitoring protocol and remains in continuous attendance of the patient. Anesthesia services are considered completed when the patient may be safely left under the observation of trained personnel and the doctor may safely leave the room to attend to other patients or duties.

The level of anesthesia is determined by the anesthesia provider's documentation of the anesthetics effects upon the central nervous system and not dependent upon the route of administration.

D9243 intravenous moderate (conscious) sedation/analgesia – each 15 minute increment

Anesthesia time begins when the doctor administering the anesthetic agent initiates the appropriate anesthesia and noninvasive monitoring protocol and remains in continuous attendance of the patient. Anesthesia services are considered completed when the patient may be safely left under the observation of trained personnel and the doctor may safely leave the room to attend to other patients or duties.

The level of anesthesia is determined by the anesthesia provider's documentation of the anesthetics effects upon the central nervous system and not dependent upon the route of administration.

D9932 cleaning and inspection of removable complete denture, maxillary

This procedure does not include any adjustments.

D9933 cleaning and inspection of removable complete denture, mandibular

This procedure does not include any adjustments.

D9934 cleaning and inspection of removable partial denture, maxillary

This procedure does not include any adjustments.

D9935cleaning and inspection of removable partial denture,
mandibularThis procedure does not include any adjustments.

D9943 occlusal guard adjustment

Revisions

One (1) CDT Code

D9248 non-intravenous moderate (conscious) sedation

This includes non-IV minimal and moderate sedation.

A medically controlled state of depressed consciousness while maintaining the patient's airway, protective reflexes and the ability to respond to stimulation or verbal commands. It includes nonintravenous administration of sedative and/or analgesic agent(s) and appropriate monitoring.

The level of anesthesia is determined by the anesthesia provider's documentation of the anesthetic's effects upon the central nervous system and not dependent on the route of administration.

Deletions

Five (5) CDT Codes

D9220 deep sedation/general anesthesia – first 30 minutes

Anesthesia time begins when the doctor administering the anesthetic agent initiates the appropriate anesthesia and noninvasive monitoring protocol and remains in continuous attendance of the patient. Anesthesia services are considered completed when the patient mae be safely left under the observation of trainedpersonnel and the doctor may safgely leave the room to attend to other patients or duties.

The level of anesthesia is determined by the anesthesia provider'sdocumentation of the anesthetics effects upon the central nervoussystem and not dependent upon the route of administration.

D9221 deep sedation/general anesthesia – each additional 15minutes

D9241 intravenous moderate (conscious) sedation/analgesia – first 30 minutes

Anesthesia time begins when the doctor administering the anesthetic agent initiates the appropriate anesthesia and noninvasive monitoring protocol and remains in continuous attendance of the patient. Anesthesia services are considered completed when the patient may be safely left under the observation of trainedpersonnel and the doctor may safely leave the room to attend to other patients or duties.

The level of anesthesia is determined by the anesthesia provider'sdocumentation of the anesthetics effects upon the central nervoussystem and not dependent upon the route of administration

D9242 intravenous moderate (conscious) sedation/analgesia – each additional 15 minutes

D9931 cleaning and inspection of a removable appliance This procedure does not include any required adjustments.

Editorial