

MCS Commercial Dental Coverage D-213 Effective Date 1/1/2019

Rev. 5/7/19 LMR

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	Description	Commercial Dental B	ase Coverage	D-21: Asociación de I			
CDT -	Providers:	Generalist, Pedodontics & Prosthodontics only covers Diagnostic, Preventive, Restorative & Crowns Services	Specialist: Endodontics, Periodontic & Oral Surgeon	Generalist, Pedodontics & Prosthodontics only covers Diagnostic, Preventive & Restorative Services	Specialist: Endodontics & Oral Surgeon		
	Standard or Special Codes or Categories not covered:	Standard Codes		Special Codes and less than STD, crown, Prosthodontics & Periodontics Services not covered			
N	Maximum coverage amount per member:	Varies per gr	oup	Varies	3		
Į.	Annual Deductible:	N/A		N/A			
L	Limits & Frequencies:	Standards		Standar	rds		
D0400	DIAGNOSTIC Paried to Ocal Fusioning	Van Can Dada 8 Draath	Van Daviadar	00/ Can Dada 8 Breath	NO		
	Periodic Oral Evaluation	Yes, Gen, Pedo & Prosth	Yes Periodon Yes Periodon &	0%, Gen, Pedo & Prosth	NC		
D0140 L	Limited Oral Evaluation	Yes, Gen, Pedo & Prosth	Endodont	0%, Gen, Pedo & Prosth	0% Endo		
	Comprehensive Oral Evaluation (New or establish patient)	Yes, Gen, Pedo & Prosth	NC	0%, Gen, Pedo & Prosth	NC		
	Detailed and extensive oral evaluation- problem focus by report	NC	Yes Oral Surg	NC	NC		
D0180 C	Comprehensive Periodontal Evaluation	NC	Yes Periodon	NC	NC		
	DIAGNOSTIC IMAGING		Yes Periodon &				
D0210	Intra oral – complete series of radiographic images	Yes, Gen, Pedo & Prosth	Oral Surg	0%, Gen, Pedo & Prosth	0% Oral Surg		
D0220	Intraoral – periapical radiographic image	Yes, Gen, Pedo & Prosth	Yes	0%, Gen, Pedo & Prosth	0% Endo & Oral Surg		
	Intraoral – periapical each additional radiographic image	Yes, Gen, Pedo & Prosth	Yes	0%, Gen, Pedo & Prosth	0% Endo & Oral Surg		
D0240 I	Intraoral – occlusal radiographic image	Special	Special Oral Surg Yes Endodont &	NC	NC		
D0270 E	Bitewing – single radiographic image	Yes, Gen, Pedo & Prosth	Periodont &	0%, Gen, Pedo & Prosth	0% Endo		
D0272 E	Bitewings – two radiographic images	Yes, Gen, Pedo & Prosth	Yes Periodon	0%, Gen, Pedo & Prosth	NC		
D0274 E	Bitewings – four radiographic images	Yes EU, Gen, Pedo & Prosth	Yes EU	0% EU , Gen, Pedo & Prosth	0% EU		
D0330 F	Panoramic radiographic image	Yes, Gen, Pedo & Prosth	Yes	0%, Gen, Pedo & Prosth	0% Endo & Oral Surg		
D0350 2	2D Oral/facial photograhic image obtained intra-orally or extra-orally	Special	NC	NC	NC		
	TESTS and EXAMINATIONS						
D0460 F	Pulp Vitality Tests	Yes, Gen, Pedo & Prosth	Yes Endodont	0%, Gen, Pedo & Prosth	0%		
	Accession of exfoliative cytologic smear, microscopic, examination, preparation and transmission of written report	Special	NC	NC	NC		
-	Direct immunofluorescence	Special	NC	NC	NC		
D0999 L	Unspecified Diagnostic Procedures, by Report	Special	Special	NC	NC		
	PREVENTIVE						
	Prophylaxis – Adult (Over 12 yrs old)	Yes, Gen, Pedo & Prosth	Yes Periodon	0%, Gen, Pedo & Prosth	NC		
	Prophylaxis – Child (Under 11 yrs old)	Yes, Gen, Pedo & Prosth	Yes Periodon	0%, Gen, Pedo & Prosth	NC		
	Topical fluoride varnish; therapeutic application for moderate to high caries risk patients	Special	NC	NC	NC		
D1208	Topical application of fluoride - excluding varnish (child only)	Yes, Gen, Pedo & Prosth	Yes Periodon	0%, Gen, Pedo & Prosth	NC		
	Sealant Per Tooth	Yes, Gen, Pedo & Prosth	NC	0%, Gen, Pedo & Prosth	NC		
111352	Preventive resin restoration in a moderate to high caries risk patient – permanent tooth	Special	NC	NC	NC		
	SPACE MAINTAINERS						
D1510	Space Maintainer Fixed Unilateral	Yes, Gen, Pedo & Prosth	NC	20%, Gen, Pedo & Prosth	NC		
	Space Maintainer – Fixed Bilateral, maxillary	Yes, Gen, Pedo & Prosth	NC	20%, Gen, Pedo & Prosth	NC		
	Space Maintainer – Fixed Bilateral, mandibular	Yes, Gen, Pedo & Prosth	NC	20%, Gen, Pedo & Prosth	NC		
	Space Maintainer Removable Unilateral	Yes, Gen, Pedo & Prosth	NC	NC	NC		
	Space Maintainer Removable Bilateral, maxillary	Yes, Gen, Pedo & Prosth	NC NO	NC NO	NC NC		
	Space Maintainer Removable Bilateral, mandibular	Yes, Gen, Pedo & Prosth	NC NC	NC NC	NC NC		
	Re-cementation or re-bond space maintainer Unspecified preventive procedure, by Report	Yes, Gen, Pedo & Prosth Special	Special Periodon	NC NC	NC NC		
D1999 C	RESTORATIVE	Оресіаі	Special Fellodoli	NO	INC		
D2140 A	Amalgam One Surfaces primary or permanent	Yes, Gen, Pedo & Prosth	NC	30%, Gen, Pedo & Prosth	NC		
	Amalgam Two Surfaces primary or permanent	Yes, Gen, Pedo & Prosth	NC	30%, Gen, Pedo & Prosth	NC		
	Amalgam Three Surfaces primary or permanent	Yes, Gen, Pedo & Prosth	NC	30%, Gen, Pedo & Prosth	NC		
D2161 A	Amalgam Four or More Surfaces primary or permanent	Yes, Gen, Pedo & Prosth	NC	30%, Gen, Pedo & Prosth	NC		
D2330 F	Resin Based Composite – One Surface anterior	Yes, Gen, Pedo & Prosth	NC	30%, Gen, Pedo & Prosth	NC		
D2331 F	Resin Based Composite – Two Surfaces anterior	Yes, Gen, Pedo & Prosth	NC	30%, Gen, Pedo & Prosth	NC		
	Resin Based Composite – Three Surfaces anterior	Yes, Gen, Pedo & Prosth	NC	30%, Gen, Pedo & Prosth	NC		
D2335	Resin Based Composite – Four or More surface or involving incisal angle	Yes, Gen, Pedo & Prosth	NC	30%, Gen, Pedo & Prosth	NC		

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D2391	Resin Based Composite – Posterior bucal surface only	Yes, Gen, Pedo & Prosth	NC	30%, Gen, Pedo & Prosth	NC	
D2392	Resin basd composite-Two surfaces, posterior	Special, Gen, Pedo & Prosth	NC	30%, Gen, Pedo & Prosth	NC	
D2393	Resin basd composite-Three surfaces, posterior	Special, Gen, Pedo & Prosth	NC	30%, Gen, Pedo & Prosth	NC	
D2394	Resin basd composite-Four or more surfaces, posterior	Special, Gen, Pedo & Prosth	NC	30%, Gen, Pedo & Prosth	NC	
D2410	Gold foil-one surface	Special	NC	NC	NC	
D2420	Gold foil-two surfaces	Special	NC	NC	NC	
D2430	Gold foil-three surfaces	Special	NC	NC	NC	
D2510	Inlay-metallic-one surface	Special	NC	NC	NC	
D2520	Inlay-metallic-two surfaces	Special	NC	NC	NC	
D2530	Inlay-metallic-three or more surfaces	Special	NC	NC	NC	
D2542	Onlay metallic -two surfaces	Special	NC	NC	NC	
D2543	Onlay metallic -three surfaces	Special	NC	NC	NC	
D2544	Onlay metallic -four or more surfaces	Special	NC	NC	NC	
D2610	Inlay-porcelain/ceramic - one surface	Special	NC	NC	NC	
D2620	Inlay-porcelain/ceramic - two surfaces	Special	NC	NC NO	NC	
D2642	Onlay porcelain/ceramic -two surfaces	Special	NC NC	NC NO	NC NO	
D2643	Onlay porcelain/ceramic -three surfaces	Special	NC NC	NC NO	NC NO	
D2644	Onlay porcelain/ceramic -four or more surfaces	Special	NC NC	NC NC	NC NC	
D2650 D2651	Inlay-resin based-composite-one surface	Special	NC NC	NC NC	NC NC	
D2651 D2652	Inlay-resin based-composite-two surfaces	Special Special	NC NC	NC NC	NC NC	
D2652 D2662	Inlay-resin based-composite-three or more surfaces Onlay – resin-based composite – two surfaces	Special	NC NC	NC NC	NC NC	
D2663	Onlay – resin-based composite – two surfaces Onlay – resin-based composite – three surfaces	Special	NC NC	NC NC	NC NC	
D2664	Onlay – resin-based composite – four or more surfaces Onlay – resin-based composite – four or more surfaces	Special	NC NC	NC NC	NC NC	
D2004	CROWNS - SINGLE RESTORATION ONLY	Оросна	NO	NO	140	
D2720	Crown – resin with high noble metal	Special	NC	NC	NC	
D2722	Crown – resin with night hobie metal	Special	NC	NC NC	NC	
D2740	Crown Porcelain/Ceramic	Yes, Gen, Pedo & Prosth	NC	NC	NC	
D2750	Crown Porcelain Fused to High Noble Metal	Yes, Gen, Pedo & Prosth	NC	NC	NC	
D2751	Crown Porcelain Fused to predominantly base metal	Special	NC	NC	NC	
D2752	Crown Porcelain Fused to Noble Metal	Yes, Gen, Pedo & Prosth	NC	NC	NC	
D2780	Crown 3/4 Cast High Noble Metal	Special	NC	NC	NC	
D2781	Crown – ¾ cast predominantly base metal	Special	NC	NC	NC	
D2782	Crown 3/4 Cast Noble Metal	Yes, Gen, Pedo & Prosth	NC	NC	NC	
D2783	Crown 3/4porcelain /ceramic	Special	NC	NC	NC	
D2790	Crown Full Cast High Noble Metal	Yes, Gen, Pedo & Prosth	NC	NC	NC	
D2791	Crown Full cast predominantly base metal	Special	NC	NC	NC	
D2792	Crown Full Cast Noble Metal	Yes, Gen, Pedo & Prosth	NC	NC	NC	
D2794	Crown – titanium	Special	NC	NC	NC	
D2799	Provisional crown- further treatment or completion of diagnosis necessary to final impression	Yes, Gen, Pedo & Prosth	NC	30%, Gen, Pedo & Prosth	NC	
D2910	Re-cementation or re-bond inlay, onlay, veneer or partial coverage restoration. Re- cement or re-bond indirectly fabricated or prefabricated post and	Yes, Gen, Pedo & Prosth	NC	30%, Gen, Pedo & Prosth	NC	
D2915	core	Yes, Gen, Pedo & Prosth	NC	NC	NC NC	
D2920	Re-cement or re-bond crown	Yes, Gen, Pedo & Prosth	NC NC	30%, Gen, Pedo & Prosth	NC NO	
D2930	Prefabricated Stainless Steel Crown – Primary	Yes, Gen, Pedo & Prosth	NC NC	30%, Gen, Pedo & Prosth	NC NC	
D2931 D2940	Prefabricated Stainless Steel Crown – Permanent Protective restoration	Yes, Gen, Pedo & Prosth Yes, Gen, Pedo & Prosth	NC NC	NC 30%, Gen, Pedo & Prosth	NC NC	
D2940 D2950	Core Buildup, Including Any Pins, when required	Yes, Gen, Pedo & Prostn Yes, Gen, Pedo & Prosth	NC NC	NC	NC NC	
D2950 D2951	Pin Retention Per Tooth in addittion to restoration	Yes, Gen, Pedo & Prosth	NC NC	30%, Gen, Pedo & Prosth	NC NC	
D2951 D2952	Cast Post and Core in Addition to Crown	Yes, Gen, Pedo & Prosth	NC NC	NC	NC	
D2954	Prefabricated Post and Core in Addition to Crown	Yes, Gen, Pedo & Prosth	NC	NC NC	NC NC	
D2962	Lavial veneer (porcelain laminate)-laboratory	Special	NC	NC NC	NC NC	
D2971	Additional procedures to construct new crown under existing partial denture framework	Special	NC	NC NC	NC	
D2980	Crown repair necessitated by restorative material failure	Special	NC	NC	NC	
D2999	Unspecified restorative procedure, by report	Special	NC	NC	NC	

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	ENDODONTICS				
D3110	Pulp Cap Direct (excluding final restoration)	Yes	Yes Endodont	30%	30%
D3120	Pulp Cap Indirect (excluding final restoration)	Yes	Yes Endodont	30%	30%
D3220	Therapeutic Pulpotomy (excluding final restoration)	Yes	Yes Endodont	30%	30%
D3221	Pulpal Debridement, Primary and Permanent	Yes	Yes Endodont	30%	30%
D3230	Pulpal Therapy (resorbable filling) anterior, primary tooth (excluding final restoration) Pulpal therapy (resorbable filling) – posterior, primary tooth (excluding	Special Pedodontic only	Special Endodont	NC	NC
D3240	final restoration)	Special Pedodontic only	Special Endodont	NC	NC
D3310	Endodontic Therapy, anterior tooth (excluding final restoration)	Yes	Yes Endodont	30%	30%
D3320	Endodontic Therapy, premolar tooth (excluding final restoration)	Yes	Yes Endodont	30%	30%
D3330	Endodontic Therapy, molar tooth (excluding final restoration)	Yes	Yes Endodont	NC	NC
D3333	Internal root repair of perforation defects	NC	Special Endodont	NC	NC
D3346	Retreatment of previous root canal therapy – Anterior	Yes	Yes Endodont	30%	30%
D3347	Retreatment of previous root canal therapy – Premolar	Yes	Yes Endodont	30%	30%
D3348	Retreatment of previous root canal therapy – Molar	Yes	Yes Endodont	NC	NC
D3351	Apexification/recalcification – initial visit (apical closure/calcific repair	NC	Yes Endodont	NC	NC
D3352	of perforations, root resorption,etc.)	NC	Yes Endodont	NC	NC
D3352	Appexification/recalcification – interim medication replacement	NC NC	Yes Endodont	NC NC	NC NC
D3353	Apexification/Recalcification – Final Visit Apicoectomy – Anterior	NC NC	Yes Endodont & Oral Surg	NC NC	30% Endo & Oral Surg
D3421	Apicoectomy – Premolar (first root)	NC	Yes Endodont & Oral Surg	NC	30% Endo & Oral Surg
D3425	Apicoectomy – Molar (first root)	NC	Yes Endodont & Oral Surg	NC	NC
D3426	Apicoectomy - each additional root	NC	Yes Endodont & Oral Surg	NC	NC
D3430	Retrograde Filling – Per Root	NC	Yes Endodont & Oral Surg Yes Endodont &	NC	30% Endo & Oral Surg
D3450	Root Amputation – Per Root	NC	Oral Surg	NC	NC
D3920	Hemisection	NC	Yes Endodont	NC	NC
D3999	Unspecified endodontices procedures	NC	Special Endodont	NC	NC
	PERIODONTICS				
D4210	Gingivectomy or Gingivoplasty – Four or More contiguos teeth per	Yes	Yes Periodon	NC	NC
D4211	quadrant Gingivectomy or Gingivoplasty – One to Three teeth per quadrant	Yes	Yes Periodon	NC	NC
D4211	Gingive Conny or Gingivopiasty – One to Thiree teeth per quadrant	NC NC	Yes Periodon	NC NC	NC NC
D4240	Gingival Flap Procedure – One to Three Teeth	NC	Yes Periodon	NC NC	NC NC
D4241	Apically Positioned Flap	NC	Yes Periodon	NC NC	NC NC
D4249	Clinical Crown Lengthening – Hard Tissue	NC NC	Yes Periodon	NC NC	NC NC
D4249	Osseous surgery (including elevation of a full thickness flap and	INC	res renodon	NC	INC
D4260	closure) - four or more contiguous teeth or tooth bounded spaces per quadrant.	NC	Yes Periodon	NC	NC
D4261	Osseous surgery (including elevation of a full thickness flap and closure) - one or three contiguous teeth or tooth bounded spaces per quadrant.	NC	Yes Periodon	NC	NC
D4263	Bone Replacement Graft - retained natural tooth - First site in quadrant	NC	Yes Periodon	NC	NC
D4264	Bone Replacement Graft - retained natural tooth- Each additional site in quadrant	NC	Yes Periodon	NC	NC
D4265	Biologic materials to aid in soft and osseous tissue regeneration	NC	Special Periodon	NC	NC
D4266	Guided tissue regeneration- resorbable barrier, per site	NC	Special Periodon	NC	NC
D4267	Guided tissue regeneration- nonresorbable barrier, per site (includes membrane removal	NC NC	Special Periodon	NC NC	NC NC
D4270	Pedicle soft tissue graft procedure	NC	Special Periodon	NC	NC
D4273	Autogenous connective tissue graft procedures (including donor and recipient surgical sites) first tooth, implant or edentulous tooth position in graft	NC	Special Periodon	NC	NC
D4277	Free soft tissue graft procedure (including recipient and donor site (surgery), first tooth , implent or edentulous tooth position graftdonor site surgery) first tooth or edentulous tooth position in graft	NC	Yes Periodon	NC	NC
D4320	Provisional splinting - intracoronal	Special	Special Periodon	NC	NC
D4321	Provisional splinting-extracoronal	NC	Special Periodon	NC	NC
D4341	Periodontal Scaling/Root Planning, Four or More contiguos teeth per quadrant	Yes	Yes Periodon	NC	NC
D4342	Periodontal Scaling/Root Planning, One to Three per quadrant	Yes	Yes Periodon	NC	NC

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D4355	Full Mouth Debridement to enable comprehensive oral evaluation and diagnosis on a subsequent visit	Yes	Yes Periodon	NC	NC
D4910	Periodontal Maintenance	NC	Yes Periodon	NC	NC
D4920	Unschedule dressing change - by someone other than treating dentist	Special	Special Periodon	NC	NC
D4999	or their staff. Unspecified Periodontics procedures	NC	Special Periodon	NC	NC
B-1000	PROSTHODONTICS Removable	110	Opedial i cricacii	110	
D5110	Complete Denture – Maxillary	Yes	NC	NC	NC
D5120	Complete Denture – Mandibular	Yes	NC	NC	NC
D5130	Immediate Denture – Maxillary	Yes	NC	NC	NC
D5140	Immediate Denture – Mandibular	Yes	NC	NC	NC
D5211	Maxillary Partial Denture – Resin Base (including retentive / clasping materials, rests and teeth)	Yes	NC	NC	NC
D5212	Mandibular Partial Denture – Resin Base (including retentive / clasping	Yes	NC	NC	NC
D5213	materials, rests and teeth) Maxillary Partial Denture – Cast Metal Framework	Yes	NC	NC	NC
D5214	Mandibular Partial Denture–Cast Metal Framework	Yes	NC	NC NC	NC
D5282	Removable Unilateral Partial Denture - one piece cast metal (including	Yes	NC	NC	NC
D5283	clasp and teeth), maxillary Removable Unilateral Partial Denture - one piece cast metal (including	Yes	NC	NC	NC
	clasp and teeth), mandibular PROSTHODONTICS Repair to denture				
D5410	Adjust Complete Denture – Maxillary	Yes	NC	NC	NC
D5411	Adjust Complete Denture – Mandibular	Yes	NC	NC	NC
D5421	Adjust Partial Denture – Maxillary	Yes	NC	NC	NC
D5422	Adjust Partial Denture – Mandibular	Yes	NC	NC	NC
D5511	Repair Broken Complete Denture Base, Mandibular	Yes	NC	NC	NC
D5512	Repair Broken Complete Denture Base, Maxillary	Yes	NC	NC	NC
D5520	Replace Missing or Broken Teeth	Yes	NC	NC	NC
D5611	Repair Resin Partial Denture Base, Mandibular	Yes	NC NC	NC NC	NC NO
D5612 D5621	Repair Resin Partial Denture Base, Maxillary Repair Cast Partial Framework, Mandibular	Yes Yes	NC NC	NC NC	NC NC
D5622	Repair Cast Partial Framework, Maxillary	Yes	NC NC	NC NC	NC NC
D5630	Repair or Replace Broken retentive / clasping materials- per tooth	Yes	NC	NC NC	NC
D5640	Repair Broken Teeth NC Per Tooth	Yes	NC	NC	NC
D5650	Add Tooth to Existing Partial Denture	Yes	NC	NC	NC
D5660	Add Clasp to Existing Partial Denture - per tooth	Yes	NC	NC	NC
D5710	Rebase Complete Maxillary Denture	Yes	NC	NC	NC
D5711	Rebase Complete Mandibular Denture	Yes	NC	NC	NC
D5720	Rebase Maxillary Partial Denture	Yes	NC	NC	NC
D5721	Rebase Mandibular Partial Denture	Yes	NC	NC NO	NC NO
D5730	Reline Complete Maxillary Denture (chairside)	Yes	NC NC	NC NC	NC NC
D5731 D5740	Reline Complete Mandibular Denture (chairside) Reline Maxillary Partial Denture (chairside)	Yes Yes	NC NC	NC NC	NC NC
D5740	Reline Mandibular Partial Denture (chairside)	Yes	NC NC	NC NC	NC NC
D5750	Reline Complete Maxillary Denture (Inboratory)	Yes	NC	NC NC	NC
D5751	Reline complete mandibualr denture (laboratory)	Special	NC	NC	NC
D5760	Reline Maxillary Partial Denture (laboratory)	Yes	NC	NC	NC
D5761	Reline mandibular partial denture (laboratory)	Special	NC	NC	NC
D5850	Tissue Conditioning, Maxillary	Yes	NC	NC	NC
D5851	Tissue Conditioning, Mandibular	Yes	NC	NC	NC
D5899	Unspecified removable prosthodontic procedure, by report	Special	NC NC	NC NC	NC NC
D5986	Floride gel carrier PROSTHODONTICS Fixed	Special	NC	NC	NC
D6010	Surgical Placement of implant body:endosteal implant	NC	NC	NC	NC
	Single crown, Abutment Supported			-	
D6058	Abutment supported porcelain/ceramic crown	Special	NC	NC	NC
D6059	Abutment supported porcelain fused to metal crown (high noble metal)	Special	NC	NC	NC
D6060	Abutment supported porcelain fused to metal crown (predominantly base metal)	Special	NC	NC	NC
D6061	Abutment supported porcelain fused to metal crown (noble metal)	Special	NC	NC	NC
D6062	Abutment supported cast metal crown (high noble metal)	Special	NC NC	NC NC	NC NC
D6063	Abutment supported cast metal crown (predominantly base metal)	Special	NC	NC	NC

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D6064	Abutment supported cast metal crown (noble metal)	Special	NC	NC	NC
	Single crown, Implant Supported				
D6065	Implant supported porcelain/ceramic crown Implant Support Porcelain Fused to Metal Crown (Titanium, Alloy,	Special	NC	NC	NC
D6066	High Noble Metal)	Special	NC	NC	NC
D6067	Implant Support Metal Crown (Titanium, Alloy, High Noble Metal)	Special	NC	NC	NC
	Fixed Partial Denture, Abutment Supported				
D6068	Abutment supported retainer for porcelain/ceramic FPD	Special	NC	NC	NC
D6069	Abutment supported retainer for porcelain fused to metal FPD (high noble metal)	Special	NC	NC	NC
D6070	Abutment supported retainer for porcelain fused to metal FPD	Special	NC	NC	NC
D6071	Abutment supported retainer for porcelain fused to metal FPD (noble metal)	Special	NC	NC	NC
D6072	Abutment supported retainer for cast metal FPD (high noble metal)	Special	NC	NC	NC
D6073	Abutment supported retainer for cast metal FPD (predominantly base	Special	NC	NC	NC
D6073	metal) Abutment supported retainer for cast metal FPD (noble metal)	Special	NC NC	NC NC	NC NC
D0014	Fixed Partial Denture, Implant Supported	Эресіаі	INC	INC	INC
D6075	Implant supported retainer for ceramic FPD	Special	NC	NC	NC
D6076	Implant supported retainer for procelain fused to metal FPD (titanium,	Special	NC	NC NC	NC
D6077	titanium alloy, or high noble metal) Implant supported retainer for cast metal FPS (titanium, titanium		NC	NC	NC
	alloy, or high noble metal	Special			
D6210 D6211	Pontic Cast High Noble Metal Pontic Cast Predominantly base metal	Yes Special	NC NC	NC NC	NC NC
D6211	Pontic Cast Predominantly base metal Pontic Cast Noble Metal	Yes	NC NC	NC NC	NC NC
D6214	Pontic – titanium	Special	NC NC	NC NC	NC NC
D6240	Pontic Porcelain Fused to High Noble Metal	Yes	NC	NC NC	NC
D6241	Pontic- porcelain fused to predominantly base metal	Special	NC	NC	NC
D6242	Pontic Porcelain Fused to Noble Metal	Yes	NC	NC	NC
D6250	Pontic resin with high noble metal	Special	NC	NC	NC
D6545	Retainer – Cast Metal for Resin Bonded Fixed	Yes	NC	NC	NC
D6606	Retainer inlay – cast noble metal, two surfaces	Special	NC	NC	NC
D6607	Retainer inlay – cast noble metal, three or more surfaces	Special	NC	NC	NC
D6608	Retainer onlay – porcelain /ceramic, two surfaces	Special	NC	NC	NC
D6609	Retainer onlay – porcelain /ceramic, three or more surfaces	Special	NC	NC	NC
D6610	Retainer onlay – cast high noble metal, two surfaces	Special	NC	NC	NC
D6710	Retainer crown – indirect resin based composite	Special	NC NC	NC NC	NC
D6720 D6750	Retainer crown - resin with high noble metal Retainer crown - porcelain fused to high noble metal	Special Yes	NC NC	NC NC	NC NC
D6751	Retainer crown -porcelain fused to high hobie metal Retainer crown -porcelain fused to predominantly base metal	Special	NC NC	NC NC	NC NC
D6752	Retainer crown -porcelain fused to predominantly base metal	Yes	NC NC	NC NC	NC NC
D6780	Retainer crown - 3/4 cast high noble metal	Special	NC	NC NC	NC
D6781	Retainer crown – 3/4 cast predominantly base metal	Special	NC	NC	NC
D6782	Retainer crown – ¾ cast noble metal	Special	NC	NC	NC
D6783	Retainer crown - 3/4 porcelain/ ceramic	Special	NC	NC	NC
D6790	Retainer crown -full cast high noble metal	Yes	NC	NC	NC
D6791	Retainer crown – full cast predominantly base metal	Special	NC	NC	NC
D6792	Retainer crown -full cast noble metal	Yes	NC	NC	NC
D6794	Retainer crown – titanium	Special	NC	NC	NC
D6930	Re- cement or re-bonf fixed partial denture	Yes	NC NC	30%	NC
D6980	Fixed Partial Denture Repair, by Report.	Special	NC NC	NC NC	NC
D6999	Unspecified fixed prosthodontic procedure, by report	Special	NC	NC	NC
D7444	ORAL SURGERY	Vas	Yes Periodon &	NO	NO
D7111	Extraction, Coronal Remnants – primary tooth	Yes	Oral Surg Yes Periodon &	NC	NC
D7140	Extraction, Erupted Tooth or Exposed Root	Yes	Oral Surg	30%	30% Oral Surg
D7210	Extraction, Erupted Tooth requiring removal of bone and/or sectioning of tooth and including elevation of mucoperiosteal flap if indicated	Yes	Yes Periodon & Oral Surg	30%	30% Oral Surg
D7220	Removal of Impacted Tooth Soft Tissue	Yes	Medical Coverage	30%	Med. Cov.
D7230	Removal of Impacted Tooth Partially Bony	Yes	Medical Coverage	30%	Med. Cov.

	Description	Commercial Dental Base Coverage		D-213 Asociación de Industriales	
CDT	Providers:	Generalist, Pedodontics & Prosthodontics only covers Diagnostic, Preventive, Restorative & Crowns Services	Specialist: Endodontics, Periodontic & Oral Surgeon	Generalist, Pedodontics & Prosthodontics only covers Diagnostic, Preventive & Restorative Services	Specialist: Endodontics & Oral Surgeon
D7240	Removal of Impacted Tooth Completely Bony	Yes	Medical Coverage	30%	Med. Cov.
D7241	Removal of Impacted Tooth – Complicated	NC	Medical Coverage	NC	Med. Cov.
D7250	Removal of Residual Tooth Roots (cutting procedure)	Yes	Yes Periodon & Oral Surg	30%	30% Oral Surg
D7260	Oroantral Fistula Closure	Special	Yes Oral Surg	NC	NC
D7261	Primary Closure of a Sinus Perforation	Special	Yes Oral Surg	NC	NC
D7270	Tooth Reimplantation and/or Stabilization	Yes	Yes Oral Surg	NC	NC
D7272	Tooth Transportation	NC	Special Oral Surg	NC	NC
D7280	Exposure of an Unerupted Tooth	Yes	Yes Oral Surg	30%	30%
D7283	Placement of device to facilitate eruption of impacted tooth	Yes	Yes Oral Surg	NC	NC
D7285	Incisional biopsy of oral tissue - hard (bone - tooth)	Special	Yes Oral Surg	NC	NC
D7286	Incisional biopsy of oral tissue -soft	Yes	Yes Oral Surg	30%	30%
D7290	Surgical Repositioning of Teeth	Special	Yes Oral Surg	NC	NC
D7291	Transseptal fibertomy/supra crestal fiberotomy, by report	NC	Special Oral Surg	NC	NC
D7310	Alveoloplasty in Conjunction with Extractions - four or more teeth or tooth space, per quadrant	Yes	Yes Oral Surg	NC	NC
D7311	Alveoloplasty in Conjunction with Extractions-one to three teeth or tooth spaces, per quadrant	Yes	Yes Oral Surg	NC	NC
D7320	Alveoloplasty not in Conjunction with Extractions - four or more teeth or tooth space, per quadrant	Yes	Yes Oral Surg	NC	NC
D7321	Alveoloplasty in Conjunction with Extractions-one to three teeth or tooth spaces, per quadrant	Yes	Yes Oral Surg	NC	NC
D7340	Vestibuloplasty Secondary Epithelialization	NC	Yes Oral Surg	NC	NC
D7350	Vestibuloplasty –Soft Tissue Grafts	NC	Yes Oral Surg	NC	NC
D7471	Removal of Lateral Exostosis	Special	Yes Oral Surg	NC	NC
D7472	Removal of Torus Palatinus	Special	Yes Oral Surg	NC	NC
D7473	Removal of Torus Mandibularis	Special	Yes Oral Surg	NC	NC
D7510	Incision and Drainage of Abscess Intraoral	Yes	Yes Oral Surg	30%	30%
D7520	Incision and Drainage of Abscess – Extraoral	NC	Yes Oral Surg	NC	NC
D7550	Partial oslectomy/sequestrecstomy for removal on non-vitals	NC	Special Oral Surg	NC	NC
D7670	Alveolus – closed reduction, may include stabilization of teeth	NC	Special Oral Surg	NC	NC
D7671	Alveolus – open reduction, may include stabilization of teeth	NC	Special Oral Surg	NC	NC
D7960	Frenulectomy Separate Procedure	Yes	Yes Oral Surg & Periodon	NC	NC
D7970	Excision of Hyperplastic Tissue Per Arch	Special	Yes Oral Surg	NC	NC
D7971	Excision of Pericoronal Gingiva	Yes	Yes Oral Surg	30%	30%
D7999	Unspecified oral surgery procedure, by report	NC	Special Oral Surg	NC	NC
	ADJUSTIVE GENERAL SERVICES	V 0 D 1 0 D 11		2004 0 0 0 0 0 0	2001
D9110 D9222	Palliative (Emergency) Treatment of Dental Pain Deep sedation /general anesthesia - first 15 minutes	Yes, Gen, Pedo & Prosth Yes, Pedodontics only	Yes Endodont Medical Coverage	30%, Gen, Pedo & Prosth 0%, Pedodontics only	30% Med. Cov.
D9223	Deep sedation /general anesthesia - each subsequent 15 minutes increment	Yes, Pedodontics only	Medical Coverage	0%, Pedodontics only	Med. Cov.
D9239	Intravenous moderate (conscious) sedation/analgesia - first 15 minutes	Yes, Pedodontics only	Medical Coverage	0%, Pedodontics only	Med. Cov.
D9243	Intravenous moderate (conscious) sedation/analgesia - each 15 subsequent minutes increment	Yes, Pedodontics only	Medical Coverage	0%, Pedodontics only	Med. Cov.
D9420	Hospital or ambulatory center call	Yes, Pedodontics only	NC	0%, Pedodontics only	NC
D9630	Other drugs abd/or medicaments, by report	NC	Special Oral Surg	NC	30%
D9910	Application of desensitizing resin for cervical and/or root surface, per tooth	Special	Special Periodon	30%	30%
D9930	Treatment of complications (post surgical)-unusual circumstances, by report	Special	Special	30%	30%
D9940	Occlusal guard, by report	Special	Special	NC	NC
D9951	Occlusal adjustment - limited	NC	Yes Periodon	NC	NC
D9952	Occlusal adjustment - complete	NC	Yes Periodon	NC	NC
D9999	Unspecifed adjuntive procedure, by report	Special	Special	NC	NC