

NC Medicaid Dental Reimbursement Rates
Federally Qualified Health Clinics & Rural Health Centers

Effective Date: January 1, 2014

The inclusion of a rate on this table does not guarantee that a service is covered.

Please refer to the Medicaid Billing Guide and the Medicaid and Health Choice Clinical Coverage Policies on the DMA website.

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Applicable FARS/DFARS apply.

CDT 2014 Code	Description	Medicaid Rate
D0120	Periodic oral evaluation	25.02
D0140	Limited oral evaluation - problem focused	35.66
D0145	Oral evaluation for a patient under three years of age and counseling with primary caregiver	34.55
D0150	Comprehensive oral evaluation - new or established patient	43.27
D0160	Detailed and extensive oral evaluation - problem focused, by report	66.22
D0170	Re-evaluation - limited, problem focused (established patient; not post-operative visit)	27.87
D0210	Intraoral - complete series of radiographic images	69.64
D0220	Intraoral - periapical first radiographic image	14.46
D0230	Intraoral - periapical each additional radiographic image	11.67
D0240	Intraoral - occlusal radiographic image	15.50
D0250	Extraoral - first radiographic image	20.87
D0260	Extraoral - each additional radiographic image	17.25
D0270	Bitewing - single radiographic image	11.00
D0272	Bitewings - two radiographic images	17.95
D0273	Bitewings - three radiographic images	24.50
D0274	Bitewings - four radiographic images	31.12
D0290	Posterior-anterior or lateral skull and facial bone survey radiographic image	43.56
D0310	Sialography	93.49
D0320	Temporomandibular joint arthrogram, including injection	190.61
D0330	Panoramic radiographic image	57.47
D0340	Cephalometric radiographic image	50.83
D0470	Diagnostic casts	41.50
D0473	Accession of tissue, gross and microscopic examination	47.20
D1110	Prophylaxis - adult	36.96
D1120	Prophylaxis - child	26.39
D1206	Topical application of fluoride varnish	15.25
D1208	Topical application of fluoride	15.56
D1351	Sealant - per tooth	27.72
D1510	Space maintainer - fixed - unilateral	185.23
D1515	Space maintainer - fixed - bilateral	259.32
D2140	Amalgam - one surface, primary or permanent	68.89
D2150	Amalgam - two surfaces, primary or permanent	87.29
D2160	Amalgam - three surfaces, primary or permanent	101.06

D2161	Amalgam - four or more surfaces, primary or permanent	111.25
D2330	Resin-based composite - one surface, anterior	63.92
D2331	Resin-based composite - two surfaces, anterior	78.97
D2332	Resin-based composite - three surfaces, anterior	93.35
D2335	Resin-based composite - four or more surfaces or involving incisal angle (anterior)	118.25
D2390	Resin-based composite crown, anterior	168.10
D2391	Resin-based composite - one surface, posterior	73.72
D2392	Resin-based composite - two surfaces, posterior	97.81
D2393	Resin-based composite - three surfaces, posterior	118.96
D2394	Resin-based composite - four or more surfaces, posterior	144.14
D2930	Prefabricated stainless steel crown - primary tooth	139.95
D2931	Prefabricated stainless steel crown - permanent tooth	150.51
D2932	Prefabricated resin crown	164.43
D2933	Prefabricated stainless steel crown with resin window	183.38
D2934	Prefabricated esthetic coated stainless steel crown - primary tooth	183.38
D2940	Protective restoration	38.58
D2950	Core buildup, including any pins	95.30
D2951	Pin retention - per tooth, in addition to restoration	23.14
D2970	Temporary crown (fractured tooth)	135.54
D3220	Therapeutic pulpotomy (excluding final restoration)	78.66
D3222	Partial pulpotomy for apexogenesis - permanent tooth with incomplete root development	78.66
D3230	Pulpal therapy (resorbable filling) - anterior, primary tooth (excluding final restoration)	138.92
D3240	Pulpal therapy (resorbable filling) - posterior, primary tooth (excluding final restoration)	185.23
D3310	Endodontic therapy, anterior tooth (excluding final restoration)	275.07
D3320	Endodontic therapy, bicuspid tooth (excluding final restoration)	325.08
D3330	Endodontic therapy, molar (excluding final restoration)	397.60
D3351	Apexification/recalcification/pulpal regeneration - initial visit	134.03
D3352	Apexification/recalcification/pulpal regeneration - interim medication replacement	97.52
D3353	Apexification/recalcification - final visit	195.05
D3410	Apicoectomy/periradicular surgery - anterior	252.06
D4210	Gingivectomy or gingivoplasty - four or more contiguous teeth per quadrant	241.06
D4211	Gingivectomy or gingivoplasty - one to three contiguous teeth per quadrant	89.52
D4240	Gingival flap procedure, including root planing - four or more contiguous teeth per quadrant	284.07
D4241	Gingival flap procedure, including root planing - one to three contiguous teeth per quadrant	240.06
D4341	Periodontal scaling and root planing - four or more contiguous teeth per quadrant	97.52
D4342	Periodontal scaling and root planing - one to three teeth per quadrant	56.73
D4355	Full mouth debridement to enable comprehensive evaluation and diagnosis	65.35
D4910	Periodontal maintenance	48.10

D5110	Complete denture - maxillary	567.28
D5120	Complete denture - mandibular	567.28
D5130	Immediate denture - maxillary	615.38
D5140	Immediate denture - mandibular	615.38
D5211	Maxillary partial denture - resin base	420.69
D5212	Mandibular partial denture - resin base	420.69
D5410	Adjust complete denture - maxillary	30.86
D5411	Adjust complete denture - mandibular	30.86
D5421	Adjust partial denture - maxillary	30.86
D5422	Adjust partial denture - mandibular	30.86
D5510	Repair broken complete denture base	74.84
D5520	Replace missing or broken teeth - complete denture (each tooth)	63.08
D5610	Repair resin denture base	74.84
D5620	Repair cast framework	101.66
D5630	Repair or replace broken clasp	143.55
D5640	Replace broken teeth - per tooth	63.54
D5650	Add tooth to existing partial denture	77.14
D5660	Add clasp to existing partial denture	115.77
D5730	Reline complete maxillary denture (chairside)	131.61
D5731	Reline complete mandibular denture (chairside)	131.61
D5740	Reline maxillary partial denture (chairside)	129.34
D5741	Reline mandibular partial denture (chairside)	129.34
D5750	Reline complete maxillary denture (laboratory)	167.46
D5751	Reline complete mandibular denture (laboratory)	167.46
D5760	Reline maxillary partial denture (laboratory)	163.38
D5761	Reline mandibular partial denture (laboratory)	163.38
D6985	Pediatric partial denture, fixed	332.65
D7111	Extraction, coronal remnants - deciduous tooth	50.01
D7140	Extraction, erupted tooth or exposed root	61.63
D7210	Surgical removal of erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated	105.95
D7220	Removal of impacted tooth - soft tissue	120.53
D7230	Removal of impacted tooth - partially bony	161.01
D7240	Removal of impacted tooth - completely bony	187.55
D7241	Removal of impacted tooth - completely bony, with unusual surgical complications	225.06
D7250	Surgical removal of residual tooth roots (cutting procedure)	115.53
D7260	Oroantral fistula closure	369.41
D7270	Tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth	205.05
D7280	Surgical access of an unerupted tooth	184.54
D7283	Placement of device to facilitate eruption of impacted tooth	207.55
D7285	Biopsy of oral tissue - hard (bone, tooth)	132.51
D7286	Biopsy of oral tissue - soft (all others)	104.93
D7288	Brush biopsy - transepithelial sample collection	104.93
D7310	Alveoloplasty in conjunction with extractions - four or more tooth spaces, per quadrant	99.84

D7311	Alveoloplasty in conjunction with extractions - one to three tooth spaces, per quadrant	93.35
D7320	Alveoloplasty not in conjunction with extractions - four or more tooth spaces, per quadrant	145.67
D7321	Alveoloplasty not in conjunction with extractions - one to three tooth spaces, per quadrant	130.70
D7340	Vestibuloplasty - ridge extension (secondary epithelialization)	508.08
D7350	Vestibuloplasty - ridge extension (including soft tissue grafts)	941.27
D7410	Excision of benign lesion up to 1.25 cm	156.63
D7411	Excision of benign lesion greater than 1.25 cm	205.13
D7412	Excision of benign lesion, complicated	270.47
D7413	Excision of malignant lesion up to 1.25 cm	225.09
D7414	Excision of malignant lesion greater than 1.25 cm	329.47
D7415	Excision of malignant lesion, complicated	394.82
D7440	Excision of malignant tumor - lesion diameter up to 1.25 cm	181.53
D7441	Excision of malignant tumor - lesion diameter greater than 1.25 cm	324.15
D7450	Removal of benign odontogenic cyst or tumor - lesion diameter up to 1.25 cm	172.45
D7451	Removal of benign odontogenic cyst or tumor - lesion diameter greater than 1.25 cm	221.00
D7460	Removal of benign nonodontogenic cyst or tumor - lesion diameter up to 1.25 cm	229.22
D7461	Removal of benign nonodontogenic cyst or tumor - lesion diameter greater than 1.25 cm	343.24
D7465	Destruction of lesion(s) by physical or chemical method, by report	135.69
D7471	Removal of lateral exostosis (maxilla or mandible)	218.92
D7472	Removal of torus palatinus	254.14
D7473	Removal of torus mandibularis	252.77
D7485	Surgical reduction of osseous tuberosity	227.81
D7490	Radical resection of mandible with bone graft	2,879.46
D7510	Incision and drainage of abscess - intraoral soft tissue	107.67
D7520	Incision and drainage of abscess - extraoral soft tissue	231.54
D7530	Removal of foreign body from mucosa, skin or subcutaneous alveolar tissue	122.53
D7540	Removal of reaction producing foreign bodies, musculoskeletal system	226.91
D7550	Partial ostectomy/sequestrectomy for removal of non-vital bone	295.44
D7560	Maxillary sinusotomy for removal of tooth fragment or foreign body	371.22
D7610	Maxilla - open reduction (teeth immobilized, if present)	1,486.25
D7620	Maxilla - closed reduction (teeth immobilized, if present)	1,167.67
D7630	Mandible - open reduction (teeth immobilized, if present)	1,464.47
D7640	Mandible - closed reduction (teeth immobilized, if present)	1,150.42
D7650	Malar and/or zygomatic arch - open reduction	1,328.77
D7660	Malar and/or zygomatic arch - closed reduction	1,129.10
D7670	Alveolus - closed reduction, may include stabilization of teeth	461.98
D7680	Facial bones - complicated reduction with fixation and multiple surgical approaches	2,230.51
D7710	Maxilla - open reduction	1,565.67
D7720	Maxilla - closed reduction	1,139.98
D7730	Mandible - open reduction	1,588.36

D7740	Mandible - closed reduction	1,229.84
D7750	Malar and/or zygomatic arch - open reduction	1,400.48
D7760	Malar and/or zygomatic arch - closed reduction	1,550.23
D7770	Alveolus - open reduction stabilization of teeth	907.63
D7780	Facial bones - complicated reduction with fixation and multiple surgical approaches	2,671.17
D7810	Open reduction of dislocation	1,449.95
D7820	Closed reduction of dislocation	176.99
D7830	Manipulation under anesthesia	232.35
D7840	Condylectomy	1,875.62
D7850	Surgical discectomy, with/without implant	1,890.60
D7858	Joint reconstruction	1,297.69
D7860	Arthrotomy	578.53
D7865	Arthroplasty	977.69
D7870	Arthrocentesis	120.26
D7872	Arthroscopy - diagnosis, with or without biopsy	449.96
D7873	Arthroscopy - surgical: lavage and lysis of adhesions	535.56
D7910	Suture of recent small wounds up to 5 cm	162.02
D7911	Complicated suture - up to 5 cm	251.72
D7912	Complicated suture - greater than 5 cm	312.42
D7920	Skin graft	829.13
D7940	Osteoplasty - for orthognathic deformities	1,348.83
D7941	Osteotomy - mandibular rami	3,525.38
D7943	Osteotomy - mandibular rami with bone graft; includes obtaining the graft	3,246.80
D7944	Osteotomy - segmented or subapical	2,696.67
D7945	Osteotomy - body of mandible	2,800.70
D7946	LeFort I (maxilla - total)	3,284.82
D7947	LeFort I (maxilla - segmented)	3,320.33
D7948	LeFort II or LeFort III - without bone graft	3,801.94
D7949	LeFort II or LeFort III - with bone graft	4,366.58
D7950	Osseous, osteoperiosteal, or cartilage graft of the mandible or maxilla	932.60
D7955	Repair of maxillofacial soft and hard tissue defect	1,190.37
D7960	Frenulectomy - also known as frenectomy or frenotomy - separate procedure not incidental to another procedure	171.54
D7963	Frenuloplasty	261.25
D7971	Excision of pericoronal gingiva	148.19
D7972	Surgical reduction of fibrous tuberosity	249.60
D7980	Sialolithotomy	295.60
D7981	Excision of salivary gland, by report	522.36
D7982	Sialodochoplasty	565.91
D7983	Closure of salivary fistula	372.13
D7990	Emergency tracheotomy	419.78
D7991	Coronoidectomy	1,334.22
D8080	Comprehensive orthodontic treatment of the adolescent dentition	794.15
D8670	Periodic orthodontic treatment visit (as part of contract)	93.35
D9110	Palliative (emergency) treatment of dental pain - minor procedure	41.29
D9220	Deep sedation/general anesthesia - first 30 minutes	144.54

D9221	Deep sedation/general anesthesia - each additional 15 minutes	61.52
D9230	Inhalation of nitrous oxide/anxiolysis, analgesia	41.68
D9241	Intravenous conscious sedation/analgesia - first 30 minutes	150.04
D9242	Intravenous conscious sedation/analgesia - each additional 15 minutes	57.51
D9410	House/extended care facility call	72.61
D9420	Hospital or ambulatory surgical center call	114.80
D9440	Office visit - after regularly scheduled hours	56.73
D9610	Therapeutic parenteral drug, single administration	34.04
D9612	Therapeutic parenteral drugs, two or more administrations, different medications	56.27
D9630	Other drugs and/or medicaments, by report	14.74

Providers should always bill their usual and customary charges. Please use the monthly NC Medicaid Bulletins for additions, changes, and deletion to this schedule.