

NC Medicaid Dental Reimbursement Rates**Rural Health Centers****Effective Date: January 1, 2022****Taxonomies: 261QR1300X Specialty: 075**

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

Refer to the NC Medicaid and Health Choice Clinical Coverage Policies on the DHB website.

<https://medicaid.ncdhhs.gov/providers/clinical-coverage-policies/dental-program-clinical-coverage-policies>

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| CDT Code | Description | Medicaid Rate |
|-----------------|--|----------------------|
| D0120 | Periodic oral evaluation - established patient | 27.52 |
| D0140 | Limited oral evaluation - problem focused | 39.23 |
| D0145 | Oral evaluation for a patient under three years of age and counseling with primary caregiver | 38.01 |
| D0150 | Comprehensive oral evaluation - new or established patient | 47.60 |
| D0160 | Detailed and extensive oral evaluation - problem focused, by report | 72.84 |
| D0170 | Re-evaluation - limited, problem focused (established patient; not post-operative visit) | 30.66 |
| D0210 | Intraoral - complete series of radiographic images | 76.60 |
| D0220 | Intraoral - periapical first radiographic image | 15.91 |
| D0230 | Intraoral - periapical each additional radiographic image | 12.84 |
| D0240 | Intraoral - occlusal radiographic image | 17.05 |
| D0250 | Extraoral - 2D projection radiographic image created using a stationary radiation source, and detector | 22.96 |
| D0270 | Bitewing - single radiographic image | 12.10 |
| D0272 | Bitewings - two radiographic images | 19.75 |
| D0273 | Bitewings - three radiographic images | 26.95 |
| D0274 | Bitewings - four radiographic images | 34.23 |
| D0310 | Sialography | 106.02 |
| D0320 | Temporomandibular joint arthrogram, including injection | 216.15 |
| D0330 | Panoramic radiographic image | 63.22 |
| D0340 | 2D cephalometric radiographic image - acquisition, measurement and analysis | 55.91 |
| D0414 | Laboratory processing of microbial specimen to include culture and sensitivity studies, preparation and transmission of written report | 53.53 |
| D0470 | Diagnostic casts | 45.65 |
| D0473 | Accession of tissue, gross and microscopic examination, preparation and transmission of written report | 53.53 |
| D0999 | TELEPHONIC PATIENT ENCOUNTER, AUDIO ONLY | 22.00 |
| D1110 | Prophylaxis - adult | 40.66 |
| D1120 | Prophylaxis - child | 29.03 |
| D1206 | Topical application of fluoride varnish | 16.78 |
| D1208 | Topical application of fluoride - excluding varnish | 17.64 |

| CDT Code | Description | Medicaid Rate |
|-----------------|---|----------------------|
| D1351 | Sealant - per tooth | 30.49 |
| D1354 | Interim caries arresting medicament application - per tooth | 11.00 |
| D1355 | CARIES PREVENT MED APP PER TOOTH | 10.48 |
| D1510 | Space maintainer - fixed - unilateral | 203.75 |
| D1516 | Space maintainer - fixed - bilateral, maxillary | 285.25 |
| D1517 | Space maintainer - fixed - bilateral, mandibular | 285.25 |
| D1575 | Distal shoe space maintainer - fixed - unilateral | 203.75 |
| D2140 | Amalgam - one surface, primary or permanent | 75.78 |
| D2150 | Amalgam - two surfaces, primary or permanent | 96.02 |
| D2160 | Amalgam - three surfaces, primary or permanent | 111.17 |
| D2161 | Amalgam - four or more surfaces, primary or permanent | 122.38 |
| D2330 | Resin-based composite - one surface, anterior | 70.31 |
| D2331 | Resin-based composite - two surfaces, anterior | 86.87 |
| D2332 | Resin-based composite - three surfaces, anterior | 102.69 |
| D2335 | Resin-based composite - four or more surfaces or involving incisal angle (anterior) | 130.08 |
| D2390 | Resin-based composite crown, anterior | 184.91 |
| D2391 | Resin-based composite - one surface, posterior | 81.09 |
| D2392 | Resin-based composite - two surfaces, posterior | 107.59 |
| D2393 | Resin-based composite - three surfaces, posterior | 130.86 |
| D2394 | Resin-based composite - four or more surfaces, posterior | 158.55 |
| D2930 | Prefabricated stainless steel crown - primary tooth | 153.95 |
| D2931 | Prefabricated stainless steel crown - permanent tooth | 165.56 |
| D2932 | Prefabricated resin crown | 180.87 |
| D2933 | Prefabricated stainless steel crown with resin window | 201.72 |
| D2934 | Prefabricated esthetic coated stainless steel crown - primary tooth | 201.72 |
| D2940 | Protective restoration | 42.44 |
| D2949 | Restorative foundation for an indirect restoration | Manually Priced! |
| D2950 | Core buildup, including any pins when required | 104.83 |
| D2951 | Pin retention - per tooth, in addition to restoration | 25.45 |
| D3220 | Therapeutic pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of medicament | 86.53 |
| D3222 | Partial pulpotomy for apexogenesis - permanent tooth with incomplete root development | 86.53 |
| D3230 | Pulpal therapy (resorbable filling) - anterior, primary tooth (excluding final restoration) | 152.81 |
| D3240 | Pulpal therapy (resorbable filling) - posterior, primary tooth (excluding final restoration) | 203.75 |
| D3310 | Endodontic therapy, anterior tooth (excluding final restoration) | 302.58 |
| D3320 | Endodontic therapy, premolar tooth (excluding final restoration) | 357.59 |
| D3330 | Endodontic therapy, molar (excluding final restoration) | 437.36 |
| D3351 | Apexification/recalcification - initial visit (apical closure/calcific repair of perforations, root resorption, etc.) | 152.00 |
| D3352 | Apexification/recalcification - interim medication replacement | 110.59 |
| D3353 | Apexification/recalcification - final visit (includes completed root canal therapy - apical closure/calcific repair of perforations, root resorption, etc.) | 221.19 |
| D3355 | Pulpal regeneration - initial visit | Manually Priced! |

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|-----------------|--|----------------------|
| D3356 | Pulpal regeneration - interim medication replacement | Manually Priced! |
| D3357 | Pulpal regeneration - completion of treatment | Manually Priced! |
| D3410 | Apicoectomy - anterior | 285.85 |
| D4210 | Gingivectomy or gingivoplasty - four or more contiguous teeth or tooth bound spaces per quadrant | 273.37 |
| D4211 | Gingivectomy or gingivoplasty - one to three contiguous teeth or tooth bound spaces per quadrant | 101.52 |
| D4240 | Gingival flap procedure, including root planing - four or more contiguous teeth or tooth bound spaces per quadrant | 322.15 |
| D4241 | Gingival flap procedure, including root planing - one to three contiguous teeth or tooth bound spaces per quadrant | 272.23 |
| D4341 | Periodontal scaling and root planing - four or more teeth per quadrant | 107.27 |
| D4342 | Periodontal scaling and root planing - one to three teeth per quadrant | 62.40 |
| D4346 | Scaling in presence of generalized moderate or severe gingival inflammation - full mouth, after oral evaluation | 40.66 |
| D4355 | Full mouth debridement to enable comprehensive evaluation and diagnosis on a subsequent visit | 71.89 |
| D4910 | Periodontal maintenance | 54.55 |
| D5110 | Complete denture - maxillary | 624.01 |
| D5120 | Complete denture - mandibular | 624.01 |
| D5130 | Immediate denture - maxillary | 676.92 |
| D5140 | Immediate denture - mandibular | 697.85 |
| D5211 | Maxillary partial denture - resin base (including retentive/clasping materials, rests, and teeth) | 462.76 |
| D5212 | Mandibular partial denture - resin base (including retentive/clasping materials, rests, and teeth) | 462.76 |
| D5410 | Adjust complete denture - maxillary | 33.95 |
| D5411 | Adjust complete denture - mandibular | 33.95 |
| D5421 | Adjust partial denture - maxillary | 33.95 |
| D5422 | Adjust partial denture - mandibular | 33.95 |
| D5511 | Repair broken complete denture base, mandibular | 82.32 |
| D5512 | Repair broken complete denture base, maxillary | 82.32 |
| D5520 | Replace missing or broken teeth - complete denture (each tooth) | 69.39 |
| D5611 | Repair resin partial denture base, mandibular | 82.32 |
| D5612 | Repair resin partial denture base, maxillary | 82.32 |
| D5621 | Repair cast partial framework, mandibular | 111.83 |
| D5622 | Repair cast partial framework, maxillary | 111.83 |
| D5630 | Repair or replace broken retentive/clasping materials - per tooth | 157.91 |
| D5640 | Replace broken teeth - per tooth | 69.89 |
| D5650 | Add tooth to existing partial denture | 84.85 |
| D5660 | Add clasp to existing partial denture - per tooth | 127.35 |
| D5730 | Reline complete maxillary denture (chairside) | 144.77 |
| D5731 | Reline complete mandibular denture (chairside) | 144.77 |
| D5740 | Reline maxillary partial denture (chairside) | 142.27 |
| D5741 | Reline mandibular partial denture (chairside) | 146.67 |
| D5750 | Reline complete maxillary denture (laboratory) | 184.21 |
| D5751 | Reline complete mandibular denture (laboratory) | 184.21 |
| D5760 | Reline maxillary partial denture (laboratory) | 179.72 |
| D5761 | Reline mandibular partial denture (laboratory) | 179.72 |

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|-----------------|---|----------------------|
| D5876 | Add metal substructure to acrylic full denture (per arch) | 82.32 |
| D6985 | Pediatric partial denture, fixed | 365.92 |
| D7111 | Extraction, coronal remnants - primary tooth | 55.01 |
| D7140 | Extraction, erupted tooth or exposed root (elevation and/or forceps removal) | 67.79 |
| D7210 | Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap, in indicated | 116.55 |
| D7220 | Removal of impacted tooth - soft tissue | 132.58 |
| D7230 | Removal of impacted tooth - partially bony | 177.11 |
| D7240 | Removal of impacted tooth - completely bony | 206.31 |
| D7241 | Removal of impacted tooth - completely bony, with unusual surgical complications | 247.57 |
| D7250 | Removal of residual tooth roots (cutting procedure) | 127.08 |
| D7251 | Coronectomy - intentional partial tooth removal | Manually Priced! |
| D7260 | Oroantral fistula closure | 418.92 |
| D7270 | Tooth re-implantation and/or stabilization of accidentally evulsed or displaced tooth | 225.56 |
| D7280 | Surgical access of an unerupted tooth | 202.99 |
| D7283 | Placement of device to facilitate eruption of impacted tooth | 228.31 |
| D7285 | Incisional biopsy of oral tissue - hard (bone, tooth) | 150.27 |
| D7286 | Incisional biopsy of oral tissue - soft | 115.42 |
| D7288 | Brush biopsy - transepithelial sample collection | 115.42 |
| D7295 | Harvest of bone for use in autogenous grafting procedure | Manually Priced! |
| D7310 | Alveoloplasty in conjunction with extractions - four or more teeth or tooth spaces, per quadrant | 109.82 |
| D7311 | Alveoloplasty in conjunction with extractions - one to three teeth or tooth spaces, per quadrant | 102.69 |
| D7320 | Alveoloplasty not in conjunction with extractions - four or more teeth or tooth spaces, per quadrant | 160.24 |
| D7321 | Alveoloplasty not in conjunction with extractions - one to three teeth or tooth spaces, per quadrant | 143.77 |
| D7340 | Vestibuloplasty - ridge extension (secondary epithelialization) | 576.17 |
| D7350 | Vestibuloplasty - ridge extension (including soft tissue grafts, muscle reattachment, revision of soft tissue attachment and management of hypertrophied and hyperplastic tissue) | 1,067.42 |
| D7410 | Excision of benign lesion up to 1.25 cm | 172.29 |
| D7411 | Excision of benign lesion greater than 1.25 cm | 225.64 |
| D7412 | Excision of benign lesion, complicated | 306.72 |
| D7413 | Excision of malignant lesion up to 1.25 cm | 255.26 |
| D7414 | Excision of malignant lesion greater than 1.25 cm | 373.63 |
| D7415 | Excision of malignant lesion, complicated | 447.73 |
| D7440 | Excision of malignant tumor - lesion diameter up to 1.25 cm | 205.85 |
| D7441 | Excision of malignant tumor - lesion diameter greater than 1.25 cm | 367.60 |
| D7450 | Removal of benign odontogenic cyst or tumor - lesion diameter up to 1.25 cm | 195.56 |
| D7451 | Removal of benign odontogenic cyst or tumor - lesion diameter greater than 1.25 cm | 250.62 |
| D7460 | Removal of benign nonodontogenic cyst or tumor - lesion diameter up to 1.25 cm | 259.94 |

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|-----------------|---|----------------------|
| D7461 | Removal of benign nonodontogenic cyst or tumor - lesion diameter greater than 1.25 cm | 389.25 |
| D7465 | Destruction of lesion(s) by physical or chemical method, by report | 149.26 |
| D7471 | Removal of lateral exostosis (maxilla or mandible) | 240.81 |
| D7472 | Removal of torus palatinus | 279.55 |
| D7473 | Removal of torus mandibularis | 278.05 |
| D7485 | Reduction of osseous tuberosity | 250.59 |
| D7490 | Radical resection of maxilla or mandible | 3,265.37 |
| D7510 | Incision and drainage of abscess - intraoral soft tissue | 118.44 |
| D7520 | Incision and drainage of abscess - extraoral soft tissue | 262.57 |
| D7530 | Removal of foreign body from mucosa, skin or subcutaneous alveolar tissue | 134.78 |
| D7540 | Removal of reaction producing foreign bodies, musculoskeletal system | 257.32 |
| D7550 | Partial ostectomy/sequestrectomy for removal of non-vital bone | 335.04 |
| D7560 | Maxillary sinusotomy for removal of tooth fragment or foreign body | 420.97 |
| D7610 | Maxilla - open reduction (teeth immobilized, if present) | 1,685.44 |
| D7620 | Maxilla - closed reduction (teeth immobilized, if present) | 1,324.16 |
| D7630 | Mandible - open reduction (teeth immobilized, if present) | 1,660.74 |
| D7640 | Mandible - closed reduction (teeth immobilized, if present) | 1,304.60 |
| D7650 | Malar and/or zygomatic arch - open reduction | 1,506.86 |
| D7660 | Malar and/or zygomatic arch - closed reduction | 1,280.42 |
| D7670 | Alveolus - closed reduction, may include stabilization of teeth | 523.90 |
| D7680 | Facial bones - complicated reduction with fixation and multiple surgical approaches | 2,529.44 |
| D7710 | Maxilla - open reduction | 1,775.50 |
| D7720 | Maxilla - closed reduction | 1,292.76 |
| D7730 | Mandible - open reduction | 1,801.23 |
| D7740 | Mandible - closed reduction | 1,394.67 |
| D7750 | Malar and/or zygomatic arch - open reduction | 1,588.17 |
| D7760 | Malar and/or zygomatic arch - closed reduction | 1,758.00 |
| D7770 | Alveolus - open reduction stabilization of teeth | 1,029.27 |
| D7780 | Facial bones - complicated reduction with fixation and multiple approaches | 3,029.16 |
| D7810 | Open reduction of dislocation | 1,644.27 |
| D7820 | Closed reduction of dislocation | 200.71 |
| D7830 | Manipulation under anesthesia | 263.49 |
| D7840 | Condylectomy | 2,126.99 |
| D7850 | Surgical discectomy, with/without implant | 2,143.98 |
| D7858 | Joint reconstruction | 1,471.60 |
| D7860 | Arthrotomy | 656.06 |
| D7865 | Arthroplasty | 1,108.72 |
| D7870 | Arthrocentesis | 136.38 |
| D7872 | Arthroscopy - diagnosis, with or without biopsy | 510.27 |
| D7873 | Arthroscopy - lavage and lysis of adhesions | 607.33 |
| D7910 | Suture of recent small wounds up to 5 cm | 183.73 |
| D7911 | Complicated suture - up to 5 cm | 285.46 |
| D7912 | Complicated suture - greater than 5 cm | 354.29 |
| D7920 | Skin graft (identify defect covered, location and type of graft) | 940.25 |

| CDT Code | Description | Medicaid Rate |
|-----------------|--|----------------------|
| D7940 | Osteoplasty - for orthognathic deformities | 1,529.61 |
| D7941 | Osteotomy - mandibular rami | 3,997.85 |
| D7943 | Osteotomy - mandibular rami with bone graft; includes obtaining the graft | 3,681.94 |
| D7944 | Osteotomy - segmented or subapical | 3,058.08 |
| D7945 | Osteotomy - body of mandible | 3,176.05 |
| D7946 | LeFort I (maxilla - total) | 3,725.05 |
| D7947 | LeFort I (maxilla - segmented) | 3,765.32 |
| D7948 | LeFort II or LeFort III (osteoplasty of facial bones for midface hypoplasia or retrusion) - without bone graft | 4,311.48 |
| D7949 | LeFort II or LeFort III - with bone graft | 4,951.79 |
| D7961 | BUCCAL/LABIAL FRENECTOMY | 179.70 |
| D7962 | LINGUAL FRENECTOMY | 179.70 |
| D7950 | Osseous, osteoperiosteal, or cartilage graft of the mandible or maxilla - autogenous or nonautogenous, by report | 1,057.58 |
| D7955 | Repair of maxillofacial soft and/or hard tissue defect | 1,349.91 |
| D7963 | Frenuloplasty | 296.26 |
| D7971 | Excision of pericoronal gingiva | 163.01 |
| D7972 | Surgical reduction of fibrous tuberosity | 283.05 |
| D7979 | Non-surgical sialolithotomy | Manually Priced! |
| D7980 | Surgical sialolithotomy | 335.21 |
| D7981 | Excision of salivary gland, by report | 592.37 |
| D7982 | Sialodochoplasty | 641.75 |
| D7983 | Closure of salivary fistula | 422.00 |
| D7990 | Emergency tracheotomy | 476.04 |
| D7991 | Coronoidectomy | 1,513.03 |
| D8070 | Comprehensive orthodontic treatment of the transitional dentition (banding) | Manually Priced! |
| D8070 | Comprehensive orthodontic treatment of the transitional dentition (periodic orthodontic treatment visit) | Manually Priced! |
| D8080 | Comprehensive orthodontic treatment of the adolescent dentition | 873.57 |
| D8670 | Periodic orthodontic treatment visit | 102.69 |
| D8680 | Orthodontic retention (removal of appliances, construction and placement of retainer(s)) | Manually Priced! |
| D9110 | Palliative (emergency) treatment of dental pain - minor procedure | 45.42 |
| D9222 | Deep sedation/general anesthesia - first 15 minutes | 74.10 |
| D9223 | Deep sedation/general anesthesia - each subsequent 15 minute increment | 74.10 |
| D9230 | Inhalation of nitrous oxide/analgesia, anxiolysis | 45.85 |
| D9239 | Intravenous moderate (conscious) sedation/analgesia - first 15 minutes | 75.36 |
| D9243 | Intravenous moderate (conscious) sedation/analgesia - each subsequent 15 minute increment | 75.36 |
| D9410 | House/extended care facility call | 79.87 |
| D9420 | Hospital or ambulatory surgical center call | 126.28 |
| D9440 | Office visit - after regularly scheduled hours | 64.33 |
| D9610 | Therapeutic parenteral drug, single administration | 38.60 |
| D9612 | Therapeutic parenteral drugs, two or more administrations, different medications | 61.90 |

| CDT Code | Description | Medicaid Rate |
|----------|--|------------------|
| D9613 | Infiltration of sustained released therapeutic drug - single or multiple sites | Manually Priced! |
| D9995 | Teledentistry - synchronous; real-time encounter | 62.50 |
| D9996 | TELEDENTISTRY - ASYNCHRONOUS | 22.00 |

Providers should always bill their usual and customary charges. Please use the monthly NC