

2023 CDT CODES UPDATE



Diagnostic

New	Description
D0372	Intraoral tomosynthesis - comprehensive series of radiographic images. A radiographic survey of the whole mouth intended to display the crowns and roots of all teeth, periapical areas, interproximal areas and alveolar bone including edentulous
D0373	Intraoral tomosynthesis - bitewing radiographic image
D0374	Intraoral tomosynthesis - periapical radiographic image
D0801	3D dental surface scan - direct
D0802	3D dental surface scan - indirect surface scan of a diagnostic cast
D0803	3D facial surface scan - direct
D0804	3D facial surface scan - indirect A surface scan of constructed facial features
D0387	Intraoral tomosynthesis - comprehensive series of radiographic images - image capture only. A radiographic survey of the whole mouth intended to display the crowns and roots of all the teeth, periapical areas, interproximal areas and alveolar bone including edentulous areas.
D0388	Intraoral tomosynthesis - bitewing radiographic image - image capture only
D0389	Intraoral tomosynthesis - periapical radiographic image - image capture only

Revisions

D0210	Intraoral - complete comprehensive series of radiographic images. A radiographic survey of the whole mouth, usually consisting of 14-22 periapical and posterior bitewing images or intended to display the crowns and roots of all teeth, periapical areas, <u>interproximal areas</u> , and alveolar bone <u>including edentulous areas</u> .
D0709	Intraoral - complete comprehensive series of radiographic images - image capture only. A radiographic survey of the whole mouth, usually consisting of 14-22 periapical and posterior bitewing images or intended to display the crowns and roots of all teeth, periapical areas, <u>interproximal areas</u> , and alveolar bone <u>including edentulous areas</u> .
D0393	virtual Treatment simulation using 3D image volume <u>or surface scan</u>. The use of 3D image volumes for <u>Virtual</u> simulation of treatment including, but not limited to, dental implant placement, <u>prosthetic reconstruction</u> , orthognathic surgery, and orthodontic tooth movement

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Deleted	
D0351	3D photographic image <small>This procedure is for diagnostic purposes. Not applicable for a CAD/CAM procedure</small>
D0704	3D photographic image – image capture only

Preventive

New	Description
D1781	vaccine administration - human papillomavirus - Dose 1
D1782	vaccine administration - human papillomavirus - Dose 2
D1783	vaccine administration - human papillomavirus - Dose 3

Endodontics

Revisions	
D3333	internal root repair of perforation defects <small>Non-surgical seal of perforation caused by resorption and/or decay but not iatrogenic by same provider. filing claim.</small>

Periodontics

New	Description
D4286	removal of non-resorbable barrier
Revisions	
D4240	gingival flap procedure, including root planing - four or more contiguous teeth bound spaces per quadrant. <small>A soft tissue flap is reflected or rescted to allow debridement of the root surface and the removal of granulation tissue. Osseous recontouring is not accomplished in conjunction with this procedure. May include open flap curettage, revers bevel flap surgery, modified Kirkland flap procedure, and modified Widman surgery. This procedure is performed in presence of mederate to deep probing depths, loss of attachment, need to maintain esthetics, need for increased access to the root surface and alveolar bone, or to determine the presence of a cracked tooth; or fractured root or external root resorption. Other procedures may required concurrent to D4240 and should be reported seperately using their own unique codes.</small>

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D4241	<p>gingival flap procedure, including root planing - one to three contagious teeth or tooth bound spaces per quadrant. A</p> <p>soft tissue flap is reflected or rescted to allow debridement of the root surface and the removal of granulation tissue. Osseous recontouring is not accomplished in conjunction with this procedure. May include open flap curettage, revers bevel flap surgery, modified Kirkland flap procedure, and modified Widman surgery. This procedure is performed in presence of mederate to deep probing depths, loss of attachment, need to maintain esthetics, need for increased access to the root surface and alveolar bone, or to determine the presence of a cracked tooth; <u>or</u> fractured root or external root resorption. Other procedures may required concurrent to D4240 and should be reported seperately using their own unique codes.</p>
D4266	<p>guided tissue regeneration, <u>natural teeth</u> - resorbable barrier, per site</p> <p>This procedure does not include flap entry and closure, or, when indicated, wound debridement, osseous contouring, bone replacement grafts, and placement of biologic materials to aid in osseous regeneration. This procedure can be used for periodontal <u>defects around natural teeth</u> and peri-implant defects.</p>
D4267	<p>guided tissue regeneration, <u>natural teeth</u> - non-resobable barrier, per site (includes membrane removal) This p</p> <p>include flap entry and closure, or, when indicated, wound debridement, osseous contouring, bone replacement grafts, and placement of biologic materials to aid in osseous regeneration. This procedure can be used for periodontal <u>defects around natural teeth</u> and peri-implant defects.</p>
D4355	<p>full mouth debridement to enable a comprehensive oral <u>periodontal</u> evaluation and diagnosis on a subsequent visit Full-mouth-</p> <p>debridement involves the preliminary removal of plaque and calculus that interferes with the ability of the dentist to preform a comprehensive oral evaluation. Not to be completed on the same day ass D0150, D0160, or D0180.</p>
D4921	<p>gingival irrigation <u>with a medical agent</u> - per quadrant</p> <p>Irregation of gingival pockets with a prescription medicinal agent. Not to be used to report use of over the counter (OTC) mouth rinses or non-invasive chemical</p>

Implant Services

New	Description
D6105	removal of implant body not requiring bone removal or flap elevation
D6106	<p>guided tissue regeneration - resorbable barrier, per implant This</p> <p>procedure does not include flap entry and closure, or, when indicated wound debridement, osseous contouring, bone replacement grafts, and placement of biologic materials to aid in osseous regeneration. this procedure is used for peri-implant defects and during implant placement.</p>

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D6107	guided tissue regeneration - non-resorbable barrier, per implant This procedure does not include flap entry and closure, or, when indicated wound debridement, osseous contouring, bone replacement grafts, and placement of biologic materials to aid in osseous regeneration. this procedure is used for peri-implant defects and during implant placement.
D6197	replacement if restorative material used to close an access opening of a screw-retained implant supported prosthesis, per implant.

Oral and Maxillary Surgery

New	Description
D7509	marsupialization of odontogenic cyst Surgical decompression of a large cyst lesion by creating a long-term open pocket or pouch.
D7956	guided tissue regeneration, edentulous area - resorbable barrier, per site This procedure does not include flap entry and closure, or, when indicated wound debridement, osseous contouring, bone replacement grafts, and placement of biologic materials to aid in osseous regeneration. this procedure is used for peri-implant defects and during implant placement.
D7957	guided tissue regeneration, edentulous area - non-resorbable barrier, per site This procedure does not include flap entry and closure, or, when indicated wound debridement, osseous contouring, bone replacement grafts, and placement of biologic materials to aid in osseous regeneration. this procedure is used for peri-implant defects and during implant placement.

Revisions

D7251	coronectomy - intentional partial tooth removal, <u>impacted teeth only</u>. Intentional partial tooth removal is performed when a neurovascular complication is likely if the entire impacted tooth is removed.
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Orthodontics

Revisions

D8000-D8999	All of the following orthodontic treatment codes may be used more than once for the treatment of a particular patient depending on the particular circumstance. A patient may require more than one interceptive procedure or more than one limited <u>or comprehensive</u> procedure depending on their particular problems.
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Adjunctive General Services

New	Description
D9953	<p>reline custom sleep apnea appliance (indirect) Resurface dentition side of appliance with new soft or hard base material as required to restore original form and function.</p>

Revisions

D9110	<p>palliative (emergency) treatment of dental pain —minor procedure — per visit Treatment that <u>relieves pain but is not curative; services provided do not have distinct procedure codes. This is typically reported on a "per visit" basis for emergency treatment of dental pain.</u></p>
D9450	<p>case presentation, subsequent to detailed and extensive treatment planning established patient. Not performed on same day as evaluation.</p>