

CDT-2024 — Detailed Changes for Dental HMO/Managed Care

Beginning January 1, 2024, all services provided must be submitted using the new CDT-2024 codes.

Additions & Deletions

Code	Copy Code	ADA/CDT Description	New EOB Wording	Applicable co-pay/ covered percentage, supplemental, specialist fee and base fee (METCO) based on codes appearing in your current Facility Reference Guide	MET, METCO Plans, including Non-Standard & Custom	HCR Plans	SGX Plans (CA, FL & TX Only) (Not Including HCR), SGC1028, SGC1029	SG Plans (CA, FL & TX Only)	All other DHMO group plans (NAM, Legacy, Custom, Non-Standard; are client specific, or not currently marketed)
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New Codes Effective 1/1/2024

D0396	D0470	3D printing of a 3D dental surface scan	3D PRINT DENTAL SURFACE SCAN	Same as D0470	Covered	Covered	Covered	Not Covered	Not Covered
D1301	D1701	immunization counseling	IMMUNIZATION COUNSELING	Same as D1701	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered
D2976	D2931	band stabilization – per tooth	BAND STABILIZATION PER TOOTH	25% of base fee, co-pay and supplemental or specialist fee of D2931	Covered if D2931 is Covered	Covered	Covered	Not Covered	Not Covered
D2989	D2940	excavation of a tooth resulting in the determination of non-restorability	EXCAVATION OF TOOTH	Same as D2940	Covered if D2940 is Covered	Covered	Covered	Not Covered	Not Covered
D2991	D2990	application of hydroxyapatite regeneration medicament – per tooth	HYDROXYAPATITE MEDICAMENT TOOTH	Same as D2990	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered
D6089	D2920	accessing and retorquing loose implant screw – per screw	RETORQUING IMPLANT SCREW TOOTH	Same as D2920	Covered if D2920 is Covered	Covered	Covered	Not Covered	Not Covered
D7284	D7286	excisional biopsy of minor salivary glands	EXCISIONAL BIOPSY SALIVARY GLAND	Same as D7286	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered
D7939	D7940	indexing for osteotomy using dynamic robotic assisted or dynamic navigation	OSTEOTOMY VIRTUAL GUIDANCE	Same as D7940	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered
D9938	D6985	fabrication of a custom removable clear plastic temporary aesthetic appliance	CLEAR TEMP AESTHETIC APPL FAB	Same as D6985	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered
D9939	D6985	placement of a custom removable clear plastic temporary aesthetic appliance	CLEAR TEMP AESTHETIC APPL PLACE	Same as D6985	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered

Additions & Deletions (continued)

Code	Copy Code	ADA/CDT Description	New EOB Wording	Applicable co-pay/ covered percentage, supplemental, specialist fee and base fee (METCO) based on codes appearing in your current Facility Reference Guide	MET, METCO Plans, including Non-Standard & Custom	HCR Plans	SGX Plans (CA, FL & TX Only) (Not Including HCR), SGC1028, SGC1029	SG Plans (CA, FL & TX Only)	All other DHMO group plans (NAM, Legacy, Custom, Non-Standard; are client specific, or not currently marketed)
D9954	D9946	fabrication and delivery of oral appliance therapy (OAT) morning repositioning device	ORAL APPLIANCE THERAPY DEVICE	25% of base fee, co-pay and supplemental or specialist fee of D9946	Covered if D9946 is Covered	Covered if D9946 is Covered	Covered	Not Covered	Not Covered
D9955	D9943	oral appliance therapy (OAT) titration visit	ORAL APPLIANCE THERAPY	Same as D9943	Covered if D9943 is Covered	Covered	Covered if D9943 is Covered	Not Covered	Not Covered
D9956	D9410	administration of home sleep apnea test	HOME SLEEP APNEA TEST	Same as D9410	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered
D9957	D9410	screening for sleep related breathing disorders	SCREEN SLEEP BREATHING DISORDER	Same as D9410	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered

Revision to Descriptions Effective 1/1/2024 (Including Schedule of Benefits)

Code	ADA/CDT Description	New EOB Wording
D5876	add metal substructure to acrylic full denture (per arch) Use of metal substructure in removable complete dentures without a framework	Metl subc to acr dent per arch
D2335	resin-based composite – four or more surfaces (anterior)	4 or more surf composite ant

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