



# CDT 2023 Procedure Code Changes

The American Dental Association (ADA) published the new procedure codes set for 2023. To order, contact the ADA at 800.947.4746 or visit [adacatalog.org](http://adacatalog.org). Changes in the CDT 2023 include: **22 additions, 2 deletions and 14 revisions.** The Code on Dental Procedures and Nomenclature is the national standard for reporting dental services and serves as the HIPAA standard code set. Any claim submitted electronically or on paper must use procedure codes from the current version of the CDT manual.

Please refer to Delta Dental of Kansas' Processing Policies and Procedures Reference Guide (PPRG) found in your dentist account at [DeltaDentalKS.com](http://DeltaDentalKS.com) for the most current and up to date procedure codes and descriptors with the corresponding National Processing Policies and submission requirements. These guidelines are given as standards of payment and should not be construed as standards of care.

## These codes are deleted after 12/31/2022:

- D0351 3D photographic image
- D0704 3D photographic image – image capture only

## These new codes are generally covered (effective 1/1/2023):

- D0372 intraoral tomosynthesis – comprehensive series of radiographic images
- D0373 intraoral tomosynthesis – bitewing radiographic image
- D0374 intraoral tomosynthesis – periapical radiographic image

## These new codes are generally denied unless covered by group contract (effective 1/1/2023):

*(If the benefit for a procedure/service is denied, the procedure/service is not a benefit of the patient's coverage and the approved amount is collectable from the patient.)*

- D0801 3D dental surface scan – direct
- D0802 3D dental surface scan – indirect
- D0803 3D facial surface scan – direct
- D0804 3D facial surface scan – indirect
- D1781 vaccine administration – human papillomavirus – Dose 1
- D1782 vaccine administration – human papillomavirus – Dose 2
- D1783 vaccine administration – human papillomavirus – Dose 3
- D6105 removal of implant body not requiring bone removal or flap elevation — *Please refer to the Dentist Handbook for additional benefits details.*
- D6106 guided tissue regeneration – resorbable barrier, per implant
- D6107 guided tissue regeneration – non-resorbable barrier, per implant
- D6197 replacement of restorative material used to close an access opening of a screw-retained implant supported prosthesis, per implant
- D7509 marsupialization of odontogenic cyst
- D7956 guided tissue regeneration, edentulous area – resorbable barrier, per site
- D7957 guided tissue regeneration, edentulous area – non-resorbable barrier, per site
- D9953 reline custom sleep apnea appliance (indirect)

## A separate fee is not billable to the patient for these new codes:

- D0387 intraoral tomosynthesis – comprehensive series of radiographic images – image capture only
- D0388 intraoral tomosynthesis – bitewing radiographic image – image capture only
- D0389 intraoral tomosynthesis – periapical radiographic image – image capture only
- D4286 removal of non-resorbable barrier

## Revisions for the following codes:

*(See section 2 of the 2023 CDT Code book, pgs. 87-102 for change details. Current processing policies remain in place. Reference the Delta Dental of Kansas Dentist Handbook for details.)*

- D0210 intraoral – comprehensive series of radiographic images
- D0709 intraoral – comprehensive series of radiographic images – image capture only
- D0393 virtual treatment simulation using 3D image volume or surface scan
- D3333 internal root repair of perforation defects
- D4240 gingival flap procedure, including root planing – four or more contiguous teeth or tooth bound spaces per quadrant
- D4241 gingival flap procedure, including root planing – one to three contiguous teeth or tooth bound spaces per quadrant
- D4266 guided tissue regeneration, natural teeth – resorbable barrier, per site
- D4267 guided tissue regeneration, natural teeth – non-resorbable barrier, per site
- D4355 full mouth debridement to enable a comprehensive periodontal evaluation and diagnosis on a subsequent visit
- D4921 gingival irrigation with a medicinal agent – per quadrant
- D7251 coronectomy – intentional partial tooth removal, impacted teeth only
- D9110 palliative treatment of dental pain – per visit
- D9450 case presentation, subsequent to detailed and extensive treatment planning
- D8000-8999 Category of Service Descriptor