



# Dental Health: Included Benefit

Dental Procedure Codes. A guide to assist with determining the estimated cost for services with your dental provider.

Code	Description of Service	Frequency
<b>Diagnostic (Exams or Preventive Oral Exams)</b>		
D0120	Periodic oral evaluation	Two (D0120, D0160, D0170) every 12 months, per patient
D0140	Limited oral evaluation	3 per 12 months not allowed with routine services
D0150	Comprehensive oral exam	One of (D0150, D0180) every 36 months, per provider or location. One of D0120, D0150, D0180 per 6 months per provider or location.
D0180	Comprehensive periodontal evaluation	
D0160	Extensive oral exam	Two (D0120, D0160, D0170) every 12 months, per patient
D0170	Re-evaluation-limited problem focused	
<b>Dental-X-rays</b>		
D0210	Intraoral-complete series	One of (D0210, D0330, D0277) every 36 months
D0277	Vertical bitewings - 7 to 8 radiographic images	
D0330	Panoramic radiographic image	
D0273	Bitewings- three radiographic images	One of (D0270, D0272, D027 3, D0274) every 12 months
D0270	Bitewing-single radiographic image	
D0272	Bitewings-two radiographic images	
D0274	Bitewings-four radiographic images	
D0220	Intraoral periapical-1st radiographic image	One of D0220, per date of service.
D0240	Intraoral occlusal radiographic image	Two per 24 months
D0230	Intraoral periapical-each additional radiographic image	
<b>Cleanings</b>		
D1110	Phrophylaxis-adult	Two of (D1110, D4346, D4910) every 12 months
D4346	Scaling in presence of generalized moderate or severe gingival inflammation, full mouth	
D4910	Periodontal maintenance procedures (following active therapy)	Four of D4910 every 12 months.
<b>Fluoride</b>		
D1206	Topical application of fluoride varnish	2 of (D1206, D1208, D9910) per 12 months
D1208	Topical application of fluoride	
D9110	Palliative (emergency) treatment of dental pain-minor procedure	Not allowed with anything other than D0140 and x-rays