



Delta Dental of New Jersey
New CDT Codes Effective January 1, 2011

Code	Nomenclature	Description	Benefit Plan Recommendations
D1352	preventive resin restoration in a moderate to high caries risk patient – permanent tooth	Conservative restoration of an active cavitated lesion in a pit or fissure that does not extend into dentin; includes placement of a sealant in any radiating non-carious fissures or pits.	Cover with the same age and frequency limitations that the group benefit plan has for sealants. For frequency limits, preventive resin restorations and sealants count against themselves and each other. Covered for the occlusal (biting) surface of first and second permanent molars only. Not covered if there is a previous restoration (filling) on the occlusal (biting) surface of the tooth. Not covered for members at low risk for caries.
D3354	pulpal regeneration – (completion of regenerative treatment in an immature permanent tooth with a necrotic pulp); does not include final restoration	Includes removal of intra-canal medication and procedures necessary to regenerate continued root development and necessary radiographs. This procedure includes placement of a seal at the coronal portion of the root canal system. Conventional root canal treatment is not performed.	Based on lack of longitudinal studies, unknown clinical significance of increased dentinal wall thickness, and unknown combined effects of medicaments used, this procedure is considered investigational and benefits are denied.
D5992	adjust maxillofacial prosthetic appliance, by report		Maxillofacial prosthetic services are not covered in dental benefit plans.
D5993	maintenance and cleaning of a maxillofacial prosthesis (extra or intraoral) other than required adjustments, by report	Maintenance and cleaning of a maxillofacial prosthesis.	Maxillofacial prosthetic services are not covered in dental benefit plans.

Code	Nomenclature	Description	Benefit Plan Recommendations
D6254	interim pontic	Pontic used as an interim restoration for a duration of less than six months when a final impression is not made to allow adequate time for healing or completion of definitive treatment planning. This is not a temporary pontic for routine prosthetic fixed partial denture restoration.	Temporary appliances are excluded benefits.
D6795	interim retainer crown	Retainer crown used as an interim restoration for a duration of less than six months when a final impression is not made to allow adequate time for healing or completion of definitive treatment planning. This is not a temporary retainer crown for routine prosthetic fixed partial denture restoration.	Temporary appliances are excluded benefits.
D7251	coronectomy – intentional partial tooth removal	Intentional partial tooth removal is performed when a neurovascular complication is likely if the entire impacted tooth is removed.	Benefited under individual consideration and only for documented probable neurovascular complications as proximity to mental foramen, inferior alveolar nerve, sinus, etc.. Benefit only under group contracts that cover removal of impacted teeth.
D7295	harvest of bone for use in autogenous grafting procedure	Reported in addition to those autogenous graft placement procedures that do not include harvesting of bone.	Covered only if the companion oral surgery procedure (D7955) is covered under the dental contract. (Note: very few plans cover D7955 as it is generally covered under medical plans.)