

The following general benefit category information and administrative rules apply to our group and individual dental products.

Please use **MyDentalCoverage** to verify eligibility, benefits and claims information. If your patient's coverage is not found on MyDentalCoverage, you should continue to use **Availity Essentials**. The member's benefit booklet includes a complete list of excluded services.

Note: Employer groups can define their own dental benefits and may not follow standard administrative rules. If frequency limits are not listed in the member's benefit booklet, the service is allowed without limitations.

Contract category	Service		
Preventive (includes diagnostic and preventive)	Exam	Fluoride	Prophy/Cleaning
	Space maintainer	Sealant	X-ray
Basic	Amalgam/Composite filling	Extraction	Debridement
	General anesthesia	IV sedation	Periodontal maintenance
	Periodontal scaling and root planing	Root canal	Crown lengthening
Major	Bridges	Buildups	Crowns
	Dentures and partials	Implants	Inlay/Onlay

## Category of coverage for common Current Dental Terminology (CDT) codes

Adjunctive services	
CDT code	Category
D9219	No benefit
D9222, D9223	Basic
D9230	No benefit
D9239, D9243	Basic
D9248	Basic
D9310	No benefit
D9311, D9932-D9935, D9944-D9946, D9961, D9990-D9994	No benefit

Diagnostic services	
CDT code	Category
D0120-D0180	Preventive
D0210	Preventive
D0220, D0230	Preventive
D0270-D0277	Preventive
D0330	Preventive
D0351	No benefit
D0364-D0371	No benefit
D0380-D0386, D0391, D0393-D0395	No benefit
D0411, D0412, D0414, D0460	No benefit
D0431	No benefit
D0600-D0605	No benefit

Endodontic Services	
CDT code	Category
D3110	Basic
D3120	No benefit
D3220, D3230, D3240	Basic
D3310, D3320, D3330, D3346-D3348, D3355, D3357	Basic
D3410, D3421, D3425, D3426, D3428, D3429, D3471-D3473, D3501-D3503	Basic

Implant services	
CDT code	Category
D6010, D6013	Major
D6011, D6040, D6050	No benefit
D6058-D6099, D6120-D6123, D6195	Major
D6081, D6085, D6101-D6104, D6191-D6192	No benefit





Oral surgery services	
CDT code	Category
D7111, D7140, D7210-D7241	Basic
D7285, D7286	Basic
D7950, D7953	Basic

Note: Oral surgery procedures include local anesthesia and post-surgical care.

Periodontal services	
CDT code	Category
D4210-D4212	Basic
D4249	Basic
D4263, D4265, D4273	Basic
D4277, D4278	Basic
D4341, D4342	Basic
D4355	Basic
D4381, D4921	No benefit
D4910	Basic

Preventive services	
CDT code	Category
D1110, D4346	Preventive
D1120	Preventive
D1206	Preventive
D1208	Preventive
D1351-D1355	Preventive
D1510, D1516, D1517, D1520, D1526, D1527, D1575	Preventive

Prosthetic services	
CDT code	Category
D5110-D5140	Major
D5211-D5286, D5863-D5866, D5876	Major
D5810-D5821, D5995-D5996	No benefit

Note: Prosthetic appliances are not covered under the missing tooth clause.



Restorative s	services
CDT code	Category
D2140-D2335, D2391-D2394	Basic
D2510-D2664	Major
D2950, D2952-D2954, D2957	Major
D2951	No benefit
D2390, D2710-D2794	Major
D2799, D2928, D2949	Major
D2929	Basic
D2930-D2931	Major
D2960-D2962	No benefit
D2981-D2983	No benefit
D2921, D2990, D2941	Basic

## **Orthodontic services**

Orthodontia benefits are included with some dental products. Check the member's benefits using Availity Essentials to determine whether they have orthodontic coverage, including any benefit limitations, such as:

- Age
- Benefit maximums
- Waiting periods and any credits that may apply to dental services

Claims for orthodontia services will be processed according to the member's benefits regardless of how frequently the services are billed (monthly or quarterly).

## **Urgent palliative treatment**

Emergency palliative treatment for pain relief is eligible as long as no other restorative procedure is billed for the same date of service. These services are processed under the basic/restorative benefit. Individual dental plans may include a waiting period for all basic and major services, including emergency palliative services.

## **Notes:**

- For injury to teeth benefits, refer to the benefits and the exclusions sections of the member's benefits booklet.
- Fillings or crowns are not reduced to the least costly alternative unless specified in the member's benefits booklet.
- Dental services are paid based on the prep date, not the seat date, unless otherwise specified in the member's benefits booklet.
- General anesthesia is allowed for the extraction of partially or completely bony impacted teeth and for services performed on children age six and under based on our Dental Policy #35, Reimbursement for Dental Anesthesia Procedures under the medical contract.

Learn more about submitting claims and receiving payment at asurisdental.com.

