#### County of San Diego, Health and Human Service Agency Ryan White Primary Care Medical Care

#### Allowable Dental Services List

The following dental services may be billed to the Ryan White Primary Care when provided to enrolled Ryan White Primary Care Pool patients. HIV positive patients in need of dental services not specifically listed below should be referred to the Specialty Care Coordinator at AIDS Healthcare Foundation.

Service description restrictions are described on Page 2 of this document.

Code         Service Description           D0120         Periodic oral evaluation           D0140         Limited oral evaluation - problem focused           D0150         Comprehensive oral evaluation           D0210         Intraoral - complete series (including bitewings)           D0220         Intraoral periapical, single, first film           D0230         Intraoral periapical, single, additional files (10 maximum)           D0272         Bitewings - 2 films 1           D0330         Panoramic film 2           D1110         Prophylaxis - adult           D2140         Amalgam, one surface, primary or permanent tooth           D2150         Amalgam, noe surfaces, primary or permanent tooth           D2150         Amalgam, three surfaces, primary or permanent tooth           D2160         Amalgam, four or more surfaces, primary or permanent tooth           D2331         Resin-based composite – one surface, anterior           D2332         Resin-based composite – two surfaces, anterior           D2333         Resin-based composite – two surfaces, anterior           D2334         Resin-based composite – two surfaces, posterior           D2391         Resin-based composite – two surfaces, posterior           D2392         Resin-based composite – three surfaces, posterior           D2393 <t< th=""><th>Ser</th><th colspan="3">Service description restrictions are described on Page 2 of this document.</th></t<>	Ser	Service description restrictions are described on Page 2 of this document.		
D0140 Limited oral evaluation - problem focused D0150 Comprehensive oral evaluation D0210 Intraoral - complete series (including bitewings) D0220 Intraoral - periapical, single, first film D0230 Intraoral periapical, single, additional files (10 maximum) D0272 Bitewings - 2 films 1 D0274 Bitewings - 4 films 1 D0330 Panoramic film 2 D1110 Prophylaxis – adult D2140 Amalgam, one surface, primary or permanent tooth D2150 Amalgam, two surfaces, primary or permanent tooth D2160 Amalgam, three surfaces, primary or permanent tooth D2161 Amalgam, four or more surfaces, primary or permanent tooth D2330 Resin-based composite – one surface, anterior D2331 Resin-based composite – two surfaces, anterior D2332 Resin-based composite – three surfaces, anterior D2335 Resin-based composite – two surfaces, posterior D2391 Resin-based composite – two surfaces, posterior D2392 Resin-based composite – two surfaces, posterior D2393 Resin-based composite – two surfaces, posterior D2394 Resin-based composite – two surfaces, posterior D2395 Resin-based composite – four or more surfaces, posterior D2396 Resin-based composite – three surfaces, posterior D2397 Resin-based composite – four or more surfaces, posterior D2398 Resin-based composite – four or more surfaces, posterior D2399 Resin-based composite – four or more surfaces, posterior D2391 Resin-based composite – four or more surfaces, posterior D2391 Resin-based composite – four or more surfaces, posterior D2393 Resin-based composite – four or more surfaces, posterior D2391 Resin-based composite – four or more surfaces, posterior D2392 Resin-based composite – four or more surfaces, posterior D2393 Resin-based composite – four or more surfaces, posterior D2394 Resin-based composite – four or more surfaces, posterior D2395 Core build-up, including pins when required D2950 Core build-up, including pins when required D2951 Pin retention D2952 Cast post and core, indirectly fabricated D2954 Prefabricated post and core in addition to crown D3431 Generalized periodontal scaling. Therapeutic	Code	Service Description		
D0150 Comprehensive oral evaluation D0210 Intraoral - complete series (including bitewings) D0220 Intraoral - periapical, single, first film D0230 Intraoral periapical, single, additional files (10 maximum) D0272 Bitewings - 2 films 1 D0274 Bitewings - 4 films 1 D0330 Panoramic film 2 D1110 Prophylaxis – adult D2140 Amalgam, one surface, primary or permanent tooth D2150 Amalgam, two surfaces, primary or permanent tooth D2160 Amalgam, three surfaces, primary or permanent tooth D2161 Amalgam, four or more surfaces, primary or permanent tooth D2330 Resin-based composite – one surface, anterior D2331 Resin-based composite – three surfaces, anterior D2332 Resin-based composite – four or more surfaces, anterior D2333 Resin-based composite – two surfaces, posterior D2391 Resin-based composite – two surfaces, posterior D2392 Resin-based composite – two surfaces, posterior D2393 Resin-based composite – three surfaces, posterior D2394 Resin-based composite – four or more surfaces, posterior D2395 Resin-based composite – three surfaces, posterior D2396 Recement inlay D2970 Recement inlay D2980 Recement crown D2950 Core build-up, including pins when required D2951 Pin retention D2952 Cast post and core, indirectly fabricated D2954 Prefabricated post and core in addition to crown D4341 Generalized periodontal scaling. Therapeutic, not prophylactic. D4342 Localized periodontal scaling. Therapeutic, not prophylactic. D4345 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D0120	Periodic oral evaluation		
D0210 Intraoral - complete series (including bitewings)  D0220 Intraoral - periapical, single, first film  D0230 Intraoral periapical, single, first film  D0272 Bitewings - 2 films 1  D0274 Bitewings - 2 films 1  D0330 Panoramic film 2  D1110 Prophylaxis – adult  D2140 Amalgam, one surface, primary or permanent tooth  D2150 Amalgam, two surfaces, primary or permanent tooth  D2160 Amalgam, three surfaces, primary or permanent tooth  D2330 Resin-based composite – one surface, anterior  D2331 Resin-based composite – two surfaces, anterior  D2332 Resin-based composite – four or more surfaces, anterior  D2333 Resin-based composite – four or more surfaces, anterior  D2331 Resin-based composite – one surface, posterior  D2332 Resin-based composite – two surfaces, posterior  D2333 Resin-based composite – two surfaces, posterior  D2391 Resin-based composite – to surface, posterior  D2392 Resin-based composite – three surfaces, posterior  D2393 Resin-based composite – three surfaces, posterior  D2394 Resin-based composite – four or more surfaces, posterior  D2910 Recement inlay  D2920 Recement crown  D2950 Core build-up, including pins when required  D2951 Pin retention  D2952 Cast post and core, indirectly fabricated  D2954 Prefabricated post and core in addition to crown  D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4345 Full mouth debridement 5, 6, 7  D4910 Periodontal Maintenance Procedures 8, 9  D5110 Complete Denture - Maxillary 10	D0140	Limited oral evaluation - problem focused		
D0220 Intraoral - periapical, single, first film  D0230 Intraoral periapical, single, additional files (10 maximum)  D0272 Bitewings - 2 films 1  D0274 Bitewings - 4 films 1  D0330 Panoramic film 2  D1110 Prophylaxis – adult  D2140 Amalgam, one surface, primary or permanent tooth  D2150 Amalgam, two surfaces, primary or permanent tooth  D2160 Amalgam, two surfaces, primary or permanent tooth  D2161 Amalgam, four or more surfaces, primary or permanent tooth  D2331 Resin-based composite – one surface, anterior  D2332 Resin-based composite – two surfaces, anterior  D2333 Resin-based composite – four or more surfaces, anterior  D2331 Resin-based composite – four or more surfaces, anterior  D2392 Resin-based composite – two surfaces, posterior  D2393 Resin-based composite – two surfaces, posterior  D2394 Resin-based composite – three surfaces, posterior  D2395 Resin-based composite – four or more surfaces, posterior  D2396 Recement inlay  D2970 Recement crown  D2980 Core build-up, including pins when required  D2981 Pin retention  D2982 Cast post and core, indirectly fabricated  D2983 Prefabricated post and core in addition to crown  D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4342 Localized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement 5.6,7  D4910 Periodontal Maintenance Procedures 8,9  D5110 Complete Denture - Maxillary 10	D0150	Comprehensive oral evaluation		
D0230 Intraoral periapical, single, additional files (10 maximum)  D0272 Bitewings - 2 films 1  D0274 Bitewings - 4 films 1  D0330 Panoramic film 2  D1110 Prophylaxis – adult  D2140 Amalgam, one surface, primary or permanent tooth  D2150 Amalgam, two surfaces, primary or permanent tooth  D2160 Amalgam, three surfaces, primary or permanent tooth  D2161 Amalgam, four or more surfaces, primary or permanent tooth  D2330 Resin-based composite – one surface, anterior  D2331 Resin-based composite – two surfaces, anterior  D2332 Resin-based composite – three surfaces, anterior  D2333 Resin-based composite – four or more surfaces, anterior  D2391 Resin-based composite – two surfaces, posterior  D2392 Resin-based composite – two surfaces, posterior  D2393 Resin-based composite – three surfaces, posterior  D2394 Resin-based composite – four or more surfaces, posterior  D2395 Recement inlay  D2900 Recement inlay  D2910 Recement crown  D2950 Core build-up, including pins when required  D2951 Pin retention  D2952 Cast post and core, indirectly fabricated  D2954 Prefabricated post and core in addition to crown  D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement 5.6.7  D4910 Periodontal Maintenance Procedures 8.9  D5110 Complete Denture - Maxillary 10	D0210	Intraoral - complete series (including bitewings)		
D0272 Bitewings - 2 films <sup>1</sup> D0274 Bitewings - 4 films <sup>1</sup> D0330 Panoramic film <sup>2</sup> D1110 Prophylaxis – adult  D2140 Amalgam, one surface, primary or permanent tooth  D2150 Amalgam, two surfaces, primary or permanent tooth  D2160 Amalgam, three surfaces, primary or permanent tooth  D2161 Amalgam, four or more surfaces, primary or permanent tooth  D2330 Resin-based composite – one surface, anterior  D2331 Resin-based composite – two surfaces, anterior  D2332 Resin-based composite – three surfaces, anterior  D2335 Resin-based composite – four or more surfaces, anterior  D2391 Resin-based composite – two surfaces, posterior  D2392 Resin-based composite – two surfaces, posterior  D2393 Resin-based composite – three surfaces, posterior  D2394 Resin-based composite – three surfaces, posterior  D2395 Resin-based composite – three surfaces, posterior  D2396 Resin-based composite – four or more surfaces, posterior  D2900 Recement inlay  D2920 Recement crown  D2950 Core build-up, including pins when required  D2951 Pin retention  D2952 Cast post and core, indirectly fabricated  D2954 Prefabricated post and core in addition to crown  D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D0220	Intraoral - periapical, single, first film		
D0274 Bitewings - 4 films <sup>1</sup> D0330 Panoramic film <sup>2</sup> D1110 Prophylaxis – adult D2140 Amalgam, one surface, primary or permanent tooth D2150 Amalgam, two surfaces, primary or permanent tooth D2160 Amalgam, three surfaces, primary or permanent tooth D2161 Amalgam, four or more surfaces, primary or permanent tooth D2330 Resin-based composite – one surface, anterior D2331 Resin-based composite – two surfaces, anterior D2332 Resin-based composite – three surfaces, anterior D2335 Resin-based composite – four or more surfaces, anterior D2391 Resin-based composite – two surfaces, posterior D2392 Resin-based composite – two surfaces, posterior D2393 Resin-based composite – two surfaces, posterior D2393 Resin-based composite – two surfaces, posterior D2394 Resin-based composite – four or more surfaces, posterior D2910 Recement inlay D2920 Recement crown D2950 Core build-up, including pins when required D2951 Pin retention D2952 Cast post and core, indirectly fabricated D2954 Prefabricated post and core in addition to crown D4341 Generalized periodontal scaling. Therapeutic, not prophylactic. D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D0230	Intraoral periapical, single, additional files (10 maximum)		
D0330 Panoramic film <sup>2</sup> D1110 Prophylaxis – adult D2140 Amalgam, one surface, primary or permanent tooth D2150 Amalgam, two surfaces, primary or permanent tooth D2160 Amalgam, three surfaces, primary or permanent tooth D2161 Amalgam, four or more surfaces, primary or permanent tooth D2330 Resin-based composite – one surface, anterior D2331 Resin-based composite – two surfaces, anterior D2332 Resin-based composite – three surfaces, anterior D2335 Resin-based composite – four or more surfaces, anterior D2391 Resin-based composite – one surface, posterior D2392 Resin-based composite – two surfaces, posterior D2393 Resin-based composite – three surfaces, posterior D2394 Resin-based composite – three surfaces, posterior D2395 Recement inlay D2900 Recement inlay D2910 Recement crown D2950 Core build-up, including pins when required D2951 Pin retention D2952 Cast post and core, indirectly fabricated D2954 Prefabricated post and core in addition to crown D4341 Generalized periodontal scaling. Therapeutic, not prophylactic. D4342 Localized periodontal scaling. Therapeutic, not prophylactic. D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D0272	Bitewings - 2 films <sup>1</sup>		
D1110 Prophylaxis – adult D2140 Amalgam, one surface, primary or permanent tooth D2150 Amalgam, two surfaces, primary or permanent tooth D2160 Amalgam, three surfaces, primary or permanent tooth D2161 Amalgam, four or more surfaces, primary or permanent tooth D2330 Resin-based composite – one surface, anterior D2331 Resin-based composite – two surfaces, anterior D2332 Resin-based composite – four or more surfaces, anterior D2335 Resin-based composite – four or more surfaces, anterior D2391 Resin-based composite – one surface, posterior D2392 Resin-based composite – two surfaces, posterior D2393 Resin-based composite – three surfaces, posterior D2394 Resin-based composite – four or more surfaces, posterior D2910 Recement inlay D2920 Recement crown D2950 Core build-up, including pins when required D2951 Pin retention D2952 Cast post and core, indirectly fabricated D2954 Prefabricated post and core in addition to crown D4341 Generalized periodontal scaling. Therapeutic, not prophylactic. D4342 Localized periodontal scaling. Therapeutic, not prophylactic. D4355 Full mouth debridement 5,6,7 D4910 Periodontal Maintenance Procedures 8,9 D5110 Complete Denture - Maxillary 10	D0274	Bitewings - 4 films <sup>1</sup>		
D2140 Amalgam, one surface, primary or permanent tooth D2150 Amalgam, two surfaces, primary or permanent tooth D2160 Amalgam, three surfaces, primary or permanent tooth D2161 Amalgam, four or more surfaces, primary or permanent tooth D2330 Resin-based composite – one surface, anterior D2331 Resin-based composite – two surfaces, anterior D2332 Resin-based composite – three surfaces, anterior D2335 Resin-based composite – four or more surfaces, anterior D2391 Resin-based composite – one surface, posterior D2392 Resin-based composite – two surfaces, posterior D2393 Resin-based composite – two surfaces, posterior D2394 Resin-based composite – three surfaces, posterior D2910 Recement inlay D2920 Recement crown D2950 Core build-up, including pins when required D2951 Pin retention D2952 Cast post and core, indirectly fabricated D2954 Prefabricated post and core in addition to crown D4341 Generalized periodontal scaling. Therapeutic, not prophylactic. D4342 Localized periodontal scaling. Therapeutic, not prophylactic. D4355 Full mouth debridement 5,6,7 D4910 Periodontal Maintenance Procedures 8,9 D5110 Complete Denture - Maxillary 10	D0330	Panoramic film <sup>2</sup>		
D2150 Amalgam, two surfaces, primary or permanent tooth D2160 Amalgam, three surfaces, primary or permanent tooth D2161 Amalgam, four or more surfaces, primary or permanent tooth D2330 Resin-based composite – one surface, anterior D2331 Resin-based composite – two surfaces, anterior D2332 Resin-based composite – three surfaces, anterior D2335 Resin-based composite – four or more surfaces, anterior D2391 Resin-based composite – one surface, posterior D2392 Resin-based composite – two surfaces, posterior D2393 Resin-based composite – three surfaces, posterior D2394 Resin-based composite – four or more surfaces, posterior D2910 Recement inlay D2920 Recement crown D2950 Core build-up, including pins when required D2951 Pin retention D2952 Cast post and core, indirectly fabricated D2954 Prefabricated post and core in addition to crown D4341 Generalized periodontal scaling. Therapeutic, not prophylactic. D4342 Localized periodontal scaling. Therapeutic, not prophylactic. D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D1110	Prophylaxis – adult		
D2160 Amalgam, three surfaces, primary or permanent tooth D2161 Amalgam, four or more surfaces, primary or permanent tooth D2330 Resin-based composite – one surface, anterior D2331 Resin-based composite – two surfaces, anterior D2332 Resin-based composite – three surfaces, anterior D2335 Resin-based composite – four or more surfaces, anterior D2391 Resin-based composite – one surface, posterior D2392 Resin-based composite – two surfaces, posterior D2393 Resin-based composite – three surfaces, posterior D2394 Resin-based composite – four or more surfaces, posterior D2910 Recement inlay D2920 Recement crown D2950 Core build-up, including pins when required D2951 Pin retention D2952 Cast post and core, indirectly fabricated D2954 Prefabricated post and core in addition to crown D4341 Generalized periodontal scaling. Therapeutic, not prophylactic. D4342 Localized periodontal scaling. Therapeutic, not prophylactic. D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D2140	Amalgam, one surface, primary or permanent tooth		
D2161 Amalgam, four or more surfaces, primary or permanent tooth D2330 Resin-based composite – one surface, anterior D2331 Resin-based composite – two surfaces, anterior D2332 Resin-based composite – three surfaces, anterior D2335 Resin-based composite – four or more surfaces, anterior D2391 Resin-based composite – one surface, posterior D2392 Resin-based composite – two surfaces, posterior D2393 Resin-based composite – three surfaces, posterior D2394 Resin-based composite – four or more surfaces, posterior D2910 Recement inlay D2920 Recement crown D2950 Core build-up, including pins when required D2951 Pin retention D2952 Cast post and core, indirectly fabricated D2954 Prefabricated post and core in addition to crown D4341 Generalized periodontal scaling. Therapeutic, not prophylactic. D4342 Localized periodontal scaling. Therapeutic, not prophylactic. D4355 Full mouth debridement 5.6.7 D4910 Periodontal Maintenance Procedures 8.9 D5110 Complete Denture - Maxillary 10	D2150	Amalgam, two surfaces, primary or permanent tooth		
D2330 Resin-based composite – one surface, anterior  D2331 Resin-based composite – two surfaces, anterior  D2332 Resin-based composite – three surfaces, anterior  D2335 Resin-based composite – four or more surfaces, anterior  D2391 Resin-based composite – one surface, posterior  D2392 Resin-based composite – two surfaces, posterior  D2393 Resin-based composite – three surfaces, posterior  D2394 Resin-based composite – four or more surfaces, posterior  D2395 Recement inlay  D2910 Recement inlay  D2920 Recement crown  D2950 Core build-up, including pins when required  D2951 Pin retention  D2952 Cast post and core, indirectly fabricated  D2954 Prefabricated post and core in addition to crown  D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4342 Localized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D2160	Amalgam, three surfaces, primary or permanent tooth		
D2331 Resin-based composite – two surfaces, anterior  D2332 Resin-based composite – three surfaces, anterior  D2335 Resin-based composite – four or more surfaces, anterior  D2391 Resin-based composite – one surface, posterior  D2392 Resin-based composite – two surfaces, posterior  D2393 Resin-based composite – three surfaces, posterior  D2394 Resin-based composite – four or more surfaces, posterior  D2910 Recement inlay  D2920 Recement crown  D2950 Core build-up, including pins when required  D2951 Pin retention  D2952 Cast post and core, indirectly fabricated  D2954 Prefabricated post and core in addition to crown  D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4342 Localized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D2161	Amalgam, four or more surfaces, primary or permanent tooth		
D2332 Resin-based composite – three surfaces, anterior  D2335 Resin-based composite – four or more surfaces, anterior  D2391 Resin-based composite – one surface, posterior  D2392 Resin-based composite – two surfaces, posterior  D2393 Resin-based composite – three surfaces, posterior  D2394 Resin-based composite – four or more surfaces, posterior  D2910 Recement inlay  D2920 Recement crown  D2950 Core build-up, including pins when required  D2951 Pin retention  D2952 Cast post and core, indirectly fabricated  D2954 Prefabricated post and core in addition to crown  D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4342 Localized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D2330	Resin-based composite – one surface, anterior		
D2335 Resin-based composite – four or more surfaces, anterior  D2391 Resin-based composite – one surface, posterior  D2392 Resin-based composite – two surfaces, posterior  D2393 Resin-based composite – three surfaces, posterior  D2394 Resin-based composite – four or more surfaces, posterior  D2910 Recement inlay  D2920 Recement crown  D2950 Core build-up, including pins when required  D2951 Pin retention  D2952 Cast post and core, indirectly fabricated  D2954 Prefabricated post and core in addition to crown  D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4342 Localized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement 5, 6, 7  D4910 Periodontal Maintenance Procedures 8, 9  D5110 Complete Denture - Maxillary 10	D2331	Resin-based composite – two surfaces, anterior		
D2391 Resin-based composite – one surface, posterior D2392 Resin-based composite – two surfaces, posterior D2393 Resin-based composite – three surfaces, posterior D2394 Resin-based composite – four or more surfaces, posterior D2910 Recement inlay D2920 Recement crown D2950 Core build-up, including pins when required D2951 Pin retention D2952 Cast post and core, indirectly fabricated D2954 Prefabricated post and core in addition to crown D4341 Generalized periodontal scaling. Therapeutic, not prophylactic. D4342 Localized periodontal scaling. Therapeutic, not prophylactic. D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D2332	Resin-based composite – three surfaces, anterior		
D2392 Resin-based composite – two surfaces, posterior D2393 Resin-based composite – three surfaces, posterior D2394 Resin-based composite – four or more surfaces, posterior D2910 Recement inlay D2920 Recement crown D2950 Core build-up, including pins when required D2951 Pin retention D2952 Cast post and core, indirectly fabricated D2954 Prefabricated post and core in addition to crown D4341 Generalized periodontal scaling. Therapeutic, not prophylactic. D4342 Localized periodontal scaling. Therapeutic, not prophylactic. D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D2335	Resin-based composite – four or more surfaces, anterior		
D2393 Resin-based composite – three surfaces, posterior  D2394 Resin-based composite – four or more surfaces, posterior  D2910 Recement inlay  D2920 Recement crown  D2950 Core build-up, including pins when required  D2951 Pin retention  D2952 Cast post and core, indirectly fabricated  D2954 Prefabricated post and core in addition to crown  D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4342 Localized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D2391	Resin-based composite – one surface, posterior		
D2394 Resin-based composite – four or more surfaces, posterior  D2910 Recement inlay  D2920 Recement crown  D2950 Core build-up, including pins when required  D2951 Pin retention  D2952 Cast post and core, indirectly fabricated  D2954 Prefabricated post and core in addition to crown  D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4342 Localized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D2392	Resin-based composite – two surfaces, posterior		
D2910 Recement inlay  D2920 Recement crown  D2950 Core build-up, including pins when required  D2951 Pin retention  D2952 Cast post and core, indirectly fabricated  D2954 Prefabricated post and core in addition to crown  D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4342 Localized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D2393	Resin-based composite – three surfaces, posterior		
D2920 Recement crown  D2950 Core build-up, including pins when required  D2951 Pin retention  D2952 Cast post and core, indirectly fabricated  D2954 Prefabricated post and core in addition to crown  D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4342 Localized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D2394	Resin-based composite – four or more surfaces, posterior		
D2950 Core build-up, including pins when required  D2951 Pin retention  D2952 Cast post and core, indirectly fabricated  D2954 Prefabricated post and core in addition to crown  D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4342 Localized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D2910	Recement inlay		
D2951 Pin retention  D2952 Cast post and core, indirectly fabricated  D2954 Prefabricated post and core in addition to crown  D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4342 Localized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D2920	Recement crown		
D2952 Cast post and core, indirectly fabricated  D2954 Prefabricated post and core in addition to crown  D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4342 Localized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D2950	Core build-up, including pins when required		
D2954 Prefabricated post and core in addition to crown  D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4342 Localized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D2951	Pin retention		
D4341 Generalized periodontal scaling. Therapeutic, not prophylactic.  D4342 Localized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D2952	Cast post and core, indirectly fabricated		
D4342 Localized periodontal scaling. Therapeutic, not prophylactic.  D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D2954	Prefabricated post and core in addition to crown		
D4355 Full mouth debridement <sup>5, 6, 7</sup> D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D4341	Generalized periodontal scaling. Therapeutic, not prophylactic.		
D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D4342			
D4910 Periodontal Maintenance Procedures <sup>8, 9</sup> D5110 Complete Denture - Maxillary <sup>10</sup>	D4355			
D5110 Complete Denture - Maxillary 10	D4910			
D5120 Complete Denture - Mandibular <sup>10</sup>	D5110			
	D5120	Complete Denture - Mandibular 10		

# County of San Diego, Health and Human Service Agency Ryan White Primary Care Medical Care

### Allowable Dental Services List

Code	Service Description
D5211	Maxillary Partial Denture, resin base <sup>10</sup>
D5212	Mandibular Partial Denture, resin base <sup>10</sup>
D5510	Repair broken complete denture base
D5520	Repair missing or broken teeth - complete denture
D6930	Recement fixed partial denture
D7111	Extraction, coronal remnants - deciduous teeth
D7140	Extraction, erupted tooth or exposed root
D7210	Removal of erupted tooth, surgical
D7220	Remove impacted tooth – soft tissue
D7230	Remove impacted tooth – partial bony
D7240	Remove impacted tooth – completely bony
D7241	Remove impacted tooth – unusual surgical complication
D7250	Surgical removal residual tooth roots (cutting procedure)
D7260	Oroantral fistula closure
D7261	Primary closure of a sinus perforation
D7285	Biopsy of oral tissue - hard
D7286	Biopsy of oral tissue - soft
D7310	Alveoplasty with extractions – per quadrant
D7320	Alveoplasty (no extractions) – per quadrant
D7471	Removal of lateral exostosis (maxilla or mandible)
D7472	Removal of torus palatinus
D7473	Removal of torus mandibularis
D7510	Incision and drainage of abscess - intraoral soft tissue
D7510	Incision and drainage of abscess, intraoral
D7971	Excision pericoronal gingiva
D9110	Palliative (Emergency) treatment of dental pain, minor
D9630	Antibacterial (Peridex) mouth rinse – on formulary
D9930	Postoperative visit, complications (e.g., osteitis)

Foo	Footnotes (Restrictions)		
1.	Once annually		
2.	Once every 3 years		
3.	Each quad limited to once every 24 months		
4.	Periodontal procedures on the same date of service are not covered for any combination of the following codes: D1110, D1120, D4210, D4240, D4260, D4341, D4910		
5.	Debridement allowed once every three years (provided D1110, D4910, D4341, have not been done within the last three years)		
6.	Debridement is not a substitute for difficult prophylaxis		

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### Allowable Dental Services List

7.	Not allowed on the same day as D1110, D4910 or D4341
8.	Limit 2 within 12 months
9.	Requires history of periodontal therapy (D4210, D4211, D4240, D4260, D4341
	[except D4249 and D4355])
10.	Once every 5 years