



**2020 Dental Codes that require Prior Authorization**  
Effective 1/1/2020

<b>CODES</b>	<b>DESCRIPTIONS</b>
	<b>PREVENTIVE</b>
D1510	space maintainer-fixed unilateral
D1516	space maintainer - fixed – bilateral maxillary
D1517	space maintainer-fixed-bilateral mandibular
D1520	space maintainer removable-unilateral
D1526	space maintainer removable-bilateral maxillary
D1527	space maintainer removable-bilateral mandibular
D1575	distal shoe space maintainer-fixed-unilateral
	<b>RESTORATIVE</b>
D2740	crown - porcelain/ ceramic substrate
D2750	crown - porcelain fused to high noble metal
D2751	crown - porcelain fused to predominantly base metal
D2752	crown - porcelain fused to noble metal
D2753	crown-porcelain fused to titanium and titanium alloys <b>EFFECTIVE 1/1/2020</b>
D2790	crown - full cast high noble metal
D2791	crown - full cast predominantly base metal
D2792	crown - full cast noble metal
D2794	crown - titanium
	<b>PROSTHODONTIC</b>
D5110	complete denture - maxillary
D5120	complete denture - mandibular
D5130	immediate denture - maxillary
D5140	immediate denture - mandibular
D5211	maxillary partial denture - resin base (including any conventional clasps, rests and teeth)
D5212	mandibular partial denture - resin base (including any conventional clasps, rests and teeth)
D5213	maxillary partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)
D5214	mandibular partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)
D5221	immediate maxillary partial denture – resin base (including any conventional clasps, rests and teeth)
D5222	immediate mandibular partial denture – resin base (including any conventional clasps, rests and teeth)
D5223	immediate maxillary partial denture – cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)
D5224	immediate mandibular partial denture – cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)
D5282	removable unilateral partial denture - one piece cast metal (including clasps and teeth) maxillary
D5283	removable unilateral partial denture-one piece cast metal (including clasps and teeth) mandibular
D5284	removable unilateral partial denture-one piece flexible base (including clasps and teeth) per quadrant <b>EFFECTIVE 1/1/2020</b>
D5286	removable unilateral partial denture-one piece resin (including clasps and teeth) per quadrant <b>EFFECTIVE 1/1/2020</b>
	<b>ORTHODONTIC</b>
D8010	limited orthodontic treatment of the primary dentition
D8020	limited orthodontic treatment of the transitional dentition
D8030	limited orthodontic treatment of the adolescent dentition
D8040	limited orthodontic treatment of the adult dentition
D8050	interceptive orthodontic treatment of the primary dentition
D8060	interceptive orthodontic treatment of the transitional dentition
D8070	comprehensive orthodontic treatment of the transitional dentition
D8080	comprehensive orthodontic treatment of the adolescent dentition
D8090	comprehensive orthodontic treatment of the adult dentition
D8210	removable appliance therapy (includes appliances for thumb sucking and tongue thrusting)
D8220	fixed appliance therapy (includes appliances for thumb sucking and tongue thrusting)



D8660	pre-orthodontic treatment examination to monitor growth and development	
D8670	periodic orthodontic treatment visit	
D8680	orthodontic retention (removal of appliances)	
D8690	orthodontic treatment (alternative billing to a contract fee)	
D8691	repair of orthodontic appliance	<b>REPLACED WITH D8969 AND D8967 1/1/2020</b>
D8696	repair of orthodontic appliance-maxillary	<b>EFFECTIVE 1/1/2020</b>
D8697	repair of orthodontic appliance-mandibular	<b>EFFECTIVE 1/1/2020</b>
D8692	replacement of lost or broken retainer	<b>REPLACED WITH D8703 AND D8704 1/1/2020</b>
D8703	replacement of lost or broken retainer-maxillary	<b>EFFECTIVE 1/1/2020</b>
D8704	replacement of lost or broken retainer-mandibular	<b>EFFECTIVE 1/1/2020</b>
D8693	re-cement or re-bond fixed retainer	<b>REPLACED WITH D8698 AND D8699 1/1/2020</b>
D8694	repair of fixed retainers, includes reattachment	<b>REPLACED WITH D8701 AND D8702 1/1/2020</b>
D8695	removal of fixed orthodontic appliances for reasons other than completion of treatment	
D8698	re-cement or re-bond fixed retainer-maxillary	<b>EFFECTIVE 1/1/2020</b>
D8699	re-cement or re-bond fixed retainer-mandibular	<b>EFFECTIVE 1/1/2020</b>
D8701	repair of fixed retainers includes reattachment-maxillary	<b>EFFECTIVE 1/1/2020</b>
D8702	repair of fixed retainers includes reattachment-mandibular	<b>EFFECTIVE 1/1/2020</b>
D8703	replacement of lost or broken retainer-maxillary	<b>EFFECTIVE 1/1/2020</b>
D8704	replacement of lost or broken retainer-mandibular	<b>EFFECTIVE 1/1/2020</b>
D8999	unspecified orthodontic procedure, by report	

All services listed require prior authorization. Prior authorizations need to be submitted with supportive documentation including clinical notes and radiographs.

Please refer to the dental matrix for all frequency and warranty limitations