

CDT CODE	CDT PROCEDURE DESCRIPTION	INFO OBTAINED	FINAL DETERMINATION
D3221	Pulpal debridement, primary and permanent teeth	1. Is important and used to alleviate severe pain at an emergency appt when the pt elects to save a tooth and dentist feels that endodontic therapy will be successful. 2. Good to use during emergency appt to get pt out of pain when there is not enough time to complete full root canal treatment. 3. Code is outside our scope. 4. Do not use this code and don't think it is necessary to cover.	Comes back as 50/50 on whether it is needed.
D3346	Retreatment of previous root canal therapy-anterior	1. Only time we do retreatment is when we think we can achieve a better result than the initial care. We seldom do retreatments, but is a nice option to have for pts. We have not done any retreatments on any clients over 60. 2. Retreatments are not warranted. We have not done any retreatments on any clients over 60. 3. Retreatments are not warranted. We have not done any retreatments on any clients over 60. 4. Retreatments are not warranted. We have not done any retreatments on any clients over 60. 5. Retreatments are not warranted. We have not done any retreatments on any clients over 60. 6. Retreatments are not warranted. We have not done any retreatments on any clients over 60. 7. Retreatments are not warranted. We have not done any retreatments on any clients over 60.	Majority of grantees feel that retreatments are not warranted - would recommend not to put into schedule A
D3347	Retreatment of previous root canal therapy-bicuspid		
D3348	Retreatment of previous root canal therapy-molar		
D4346	Scaling in presence of generalized or severe gingival inflammation-full mouth, after oral evaluation (see attached guide to reporting D4346)	1. Joan Eskens did more investigating and she withdraws her recommendation that we disallow use of this. She recommends that we add this code to the "menu". 2. From DentaQuest -This is a new code and it bridges the gap between a regular prophy and SRP. It does not require a PAR, and no documentation is needed to use or receive payment for this code. It does edit against similar codes. Providers can render this service more frequently if the member is high risk.	No recommendation either way
D9310	Consultation-Diagnostic service provided by dentist or physician other than requesting dentist or physician	1. Used this code 22 times through Medicaid. 2. We have used this code. For example, dentist A in clinic A did initial exam D0150 but wanted to get a second opinion about a periodontal condition, so dentist A sends pt to dentist B in clinic B. Dentist B uses D9310 to provide consultation (2nd opinion) for dentist A.	No recommendation either way
D9410	House Call	1. Don't ever use this code. 2. Don't ever use this code. 3. Don't ever use this code. 4. Don't ever use this code. 5. Don't ever use this code. 6. From DentaQuest -This code is billable under the child, adult, and DIDD plans, and is listed in the ORM under each plan. It can also be rendered by an RDH. We have never heard anything about this code from Providers.	All grantees that responded don't use this code and would recommend not to put into schedule A