

# Mutual of Omaha Insurance Company - List of Covered Dental Services

## MUTUAL DENTAL PREFERRED<sup>SM</sup> AND MUTUAL DENTAL PROTECTION<sup>SM</sup> INSURANCE POLICIES

CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
<b>D0120</b>	Periodic Oral Evaluation - Established Patient	Diagnostic and Preventive Services
<b>D0140</b>	Limited Oral Evaluation - Problem Focused	Diagnostic and Preventive Services
<b>D0150</b>	Comprehensive Oral Evaluation - New or Established Patient	Diagnostic and Preventive Services
<b>D0160</b>	Detailed and Extensive Oral Evaluation - Problem Focused, By Report	Diagnostic and Preventive Services
<b>D0170</b>	Re-Evaluation - Limited, Problem Focused (Established Patient; Not Post-Operative Visit)	Diagnostic and Preventive Services
<b>D0180</b>	Comprehensive Periodontal Evaluation - New or Established Patient	Major Services: Restorative
<b>D0190/ 191</b>	Patient Assessments	Diagnostic and Preventive Services
<b>D0210</b>	Intraoral - Complete Series of Radiographic Images	Diagnostic and Preventive Services
<b>D0220</b>	Intraoral - Periapical First Radiographic Image	Diagnostic and Preventive Services
<b>D0230</b>	Intraoral - Periapical Each Additional Radiographic Image	Diagnostic and Preventive Services
<b>D0240</b>	Intraoral - Occlusal Radiographic Image	Diagnostic and Preventive Services
<b>D0270</b>	Bitewing - Single Radiographic Image	Diagnostic and Preventive Services
<b>D0272</b>	Bitewings - Two Radiographic Images	Diagnostic and Preventive Services
<b>D0273</b>	Bitewings - Three Radiographic Images	Diagnostic and Preventive Services
<b>D0274</b>	Bitewings - Four Radiographic Images	Diagnostic and Preventive Services
<b>D0277</b>	Vertical Bitewings - 7 To 8 Radiographic Images	Diagnostic and Preventive Services
<b>D0330</b>	Panoramic Radiographic Image	Diagnostic and Preventive Services
<b>D0364</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0365</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0366</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0367</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0368</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0369</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0370</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0371</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic

CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
<b>D0372</b>	Intraoral tomosynthesis – comprehensive series of radiographic images	Diagnostic and Preventive Services
<b>D0373</b>	Intraoral tomosynthesis - bitewing – -radiographic image	Diagnostic and Preventive Services
<b>D0374</b>	Intraoral tomosynthesis - periapical radiographic image	Diagnostic and Preventive Services
<b>D0380</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0381</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0382</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0383</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0384</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0385</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0386</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0387</b>	Intraoral tomosynthesis – comprehensive series of radiographic images – capture only	Diagnostic and Preventive Services
<b>D0388</b>	Intraoral tomosynthesis bitewing – radiographic image - capture only	Diagnostic and Preventive Services
<b>D0389</b>	Intraoral tomosynthesis - periapical radiographic image – capture only	Diagnostic and Preventive Services
<b>D0391</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0393</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0394</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0395</b>	Cone Beam x-rays, used for Implants	Major Services: Fixed Prosthodontic
<b>D0460</b>	Pulp Vitality Tests	Diagnostic and Preventive Services

CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
<b>D0470</b>	Diagnostic Casts	Diagnostic and Preventive Services
<b>D0701</b>	panoramic radiographic image – image capture only	Diagnostic and Preventive Services
<b>D0702</b>	2-D cephalometric radiographic image – image capture only	Diagnostic and Preventive Services
<b>D0703</b>	2-D oral/facial photographic image obtained intra or extra– image capture only	Diagnostic and Preventive Services
<b>D0705</b>	Extra-oral posterior dental radiographic image – image capture only; Image	Diagnostic and Preventive Services
<b>D0706</b>	Intraoral – occlusal radiographic image – image capture only	Diagnostic and Preventive Services
<b>D0707</b>	Intraoral – periapical radiographic image – image capture only	Diagnostic and Preventive Services
<b>D0708</b>	Intraoral – bitewing radiographic image – image capture only	Diagnostic and Preventive Services
<b>D0709</b>	Intraoral – complete series of radiographic images – image capture only	Diagnostic and Preventive Services
<b>D1110</b>	Prophylaxis - Adult	Diagnostic and Preventive Services
<b>D2140</b>	Amalgam - One Surface, Primary or Permanent	Basic Services: Restorative
<b>D2150</b>	Amalgam - Two Surfaces, Primary or Permanent	Basic Services: Restorative
<b>D2160</b>	Amalgam - Three Surfaces, Primary Or Permanent	Basic Services: Restorative
<b>D2161</b>	Amalgam - Four Or More Surfaces, Primary or Permanent	Basic Services: Restorative
<b>D2330</b>	Resin-Based Composite - One Surface, Anterior	Basic Services: Restorative
<b>D2331</b>	Resin-Based Composite - Two Surfaces, Anterior	Basic Services: Restorative
<b>D2332</b>	Resin-Based Composite - Three Surfaces, Anterior	Basic Services: Restorative
<b>D2335</b>	Resin-Based Composite - Four Or More Surfaces or Involving Incisal Angle (Anterior)	Basic Services: Restorative
<b>D2390</b>	Resin-Based Composite Crown, Anterior	Basic Services: Restorative
<b>D2391</b>	Resin-Based Composite - One Surface, Posterior	Basic Services: Restorative
<b>D2392</b>	Resin-Based Composite - Two Surfaces, Posterior	Basic Services: Restorative
<b>D2393</b>	Resin-Based Composite - Three Surfaces, Posterior	Basic Services: Restorative
<b>D2394</b>	Resin-Based Composite - Four Or More Surfaces, Posterior	Basic Services: Restorative
<b>D2510</b>	Inlay - Metallic - One Surface	Major Services: Restorative
<b>D2520</b>	Inlay - Metallic - Two Surfaces	Major Services: Restorative

CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
<b>D2530</b>	Inlay - Metallic - Three Or More Surfaces	Major Services: Restorative
<b>D2542</b>	Onlay - Metallic - Two Surfaces	Major Services: Restorative
<b>D2543</b>	Onlay - Metallic - Three Surfaces	Major Services: Restorative
<b>D2544</b>	Onlay - Metallic - Four Or More Surfaces	Major Services: Restorative
<b>D2610</b>	Inlay - Porcelain/Ceramic - One Surface	Major Services: Restorative
<b>D2620</b>	Inlay - Porcelain/Ceramic - Two Surfaces	Major Services: Restorative
<b>D2630</b>	Inlay - Porcelain/Ceramic - Three Or More Surfaces	Major Services: Restorative
<b>D2642</b>	Onlay - Porcelain/Ceramic - Two Surfaces	Major Services: Restorative
<b>D2643</b>	Onlay - Porcelain/Ceramic - Three Surfaces	Major Services: Restorative
<b>D2644</b>	Onlay - Porcelain/Ceramic - Four Or More Surfaces	Major Services: Restorative
<b>D2650</b>	Inlay - Resin-Based Composite - One Surface	Major Services: Restorative
<b>D2651</b>	Inlay - Resin-Based Composite - Two Surfaces	Major Services: Restorative
<b>D2652</b>	Inlay - Resin-Based Composite - Three Or More Surfaces	Major Services: Restorative
<b>D2662</b>	Onlay - Resin-Based Composite - Two Surfaces	Major Services: Restorative
<b>D2663</b>	Onlay - Resin-Based Composite - Three Surfaces	Major Services: Restorative
<b>D2664</b>	Onlay - Resin-Based Composite - Four Or More Surfaces	Major Services: Restorative
<b>D2710</b>	Crown - Resin-Based Composite (Indirect)	Major Services: Restorative
<b>D2712</b>	Crown - ¾ Resin-Based Composite (Indirect)	Major Services: Restorative
<b>D2740</b>	Crown - Porcelain/Ceramic Substrate	Major Services: Restorative
<b>D2750</b>	Crown - Porcelain Fused to High Noble Metal	Major Services: Restorative
<b>D2751</b>	Crown - Porcelain Fused to Predominantly Base Metal	Major Services: Restorative
<b>D2752</b>	Crown - Porcelain Fused to Noble Metal	Major Services: Restorative
<b>D2753</b>	Crown - Porcelain Fused to Titanium and Titanium Alloys	Major Services: Restorative
<b>D2780</b>	Crown - 3/4 Cast High Noble Metal	Major Services: Restorative
<b>D2781</b>	Crown - 3/4 Cast Predominantly Base Metal	Major Services: Restorative
<b>D2782</b>	Crown - 3/4 Cast Noble Metal	Major Services: Restorative

CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
D2783	Crown - 3/4 Porcelain/Ceramic	Major Services: Restorative
D2790	Crown - Full Cast High Noble Metal	Major Services: Restorative
D2791	Crown - Full Cast Predominantly Base Metal	Major Services: Restorative
D2792	Crown - Full Cast Noble Metal	Major Services: Restorative
D2794	Crown - Titanium	Major Services: Restorative
D2910	Re-Cement or Re-Bond Inlay, Onlay, Veneer or Partial Coverage Restoration	Major Services: Restorative
D2915	Re-Cement or Re-Bond Indirectly Fabricated or Prefabricated Post and Core	Major Services: Restorative
D2920	Re-Cement or Re-Bond Crown	Major Services: Restorative
D2921	Reattachment of Tooth Fragment, Incisal Edge or Cusp	Major Services: Restorative
D2929	Prefabricated Porcelain/Ceramic Crown – Primary Tooth	Major Services: Restorative
D2930	Prefabricated Stainless Steel Crown - Primary Tooth	Major Services: Restorative
D2931	Prefabricated Porcelain/Ceramic Crown - Permanent Tooth	Major Services: Restorative
D2932	Prefabricated Resin Crown	Major Services: Restorative
D2933	Prefabricated Stainless Steel Crown with Resin Window	Major Services: Restorative
D2934	Prefabricated Esthetic Coated Stainless Steel Crown - Primary Tooth	Major Services: Restorative
D2940	Protective Restoration	Major Services: Restorative
D2950	Core Buildup, Including Any Pins When Required	Major Services: Restorative
D2951	Pin Retention - Per Tooth, In Addition to Restoration	Major Services: Restorative
D2952	Post and Core in Addition to Crown, Indirectly Fabricated	Major Services: Fixed Prosthodontic
D2953	Each Additional Indirectly Fabricated Post - Same Tooth	Major Services: Fixed Prosthodontic
D2954	Prefabricated Post and Core in Addition to Crown	Major Services: Fixed Prosthodontic
D2957	Each Additional Prefabricated Post - Same Tooth	Major Services: Fixed Prosthodontic
D2971	Additional Procedures to Construct New Crown Under Existing Partial Denture Framework	Major Services: Restorative
D3220	Therapeutic Pulpotomy (Excluding Final Restoration) - Removal of Pulp Coronal to the Dentinocemental Junction	Major Services: Endodontic
D3221	Pulpal Debridement, Primary and Permanent Teeth	Major Services: Endodontic
D3222	Partial Pulpotomy Permanent Tooth	Major Services: Endodontic

CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
<b>D3230</b>	Pulpal Therapy (Resorbable Filling) - Anterior, Primary Tooth (Excluding Final Restoration)	Major Services: Endodontic
<b>D3240</b>	Pulpal Therapy (Resorbable Filling) - Posterior, Primary Tooth (Excluding Final Restoration)	Major Services: Endodontic
<b>D3310</b>	Endodontic Therapy, Anterior Tooth (Excluding Final Restoration)	Major Services: Endodontic
<b>D3320</b>	Endodontic Therapy, Bicuspid Tooth (Excluding Final Restoration)	Major Services: Endodontic
<b>D3330</b>	Endodontic Therapy, Molar (Excluding Final Restoration)	Major Services: Endodontic
<b>D3332</b>	Incomplete Endodontic Therapy; Inoperable, Unrestorable Or Fractured Tooth	Major Services: Endodontic
<b>D3333</b>	Internal Root Repair of Perforation Defects	Major Services: Endodontic
<b>D3346</b>	Retreatment of Previous Root Canal Therapy - Anterior	Major Services: Endodontic
<b>D3347</b>	Retreatment of Previous Root Canal Therapy - Bicuspid	Major Services: Endodontic
<b>D3348</b>	Retreatment of Previous Root Canal Therapy - Molar	Major Services: Endodontic
<b>D3351</b>	Apexification/Recalcification – Initial Visit (Apical Closure / Calcific Repair of Perforations, Root Resorption, Etc.)	Major Services: Endodontic
<b>D3410</b>	Apicoectomy - Anterior	Major Services: Endodontic
<b>D3421</b>	Apicoectomy - Bicuspid (First Root)	Major Services: Endodontic
<b>D3425</b>	Apicoectomy - Molar (First Root)	Major Services: Endodontic
<b>D3426</b>	Apicoectomy (Each Additional Root)	Major Services: Endodontic
<b>D3430</b>	Retrograde Filling - Per Root	Major Services: Endodontic
<b>D3431</b>	Biologic Materials Aid Tissue Regeneration	Major Services: Endodontic
<b>D3432</b>	Guided Tissue Regen/Resorbable Barrier	Major Services: Endodontic
<b>D3450</b>	Root Amputation - Per Root	Major Services: Endodontic
<b>D3471</b>	Surgical Repair of Root Resorption (Anterior)	Major Services: Endodontic
<b>D3472</b>	Surgical Repair of Root Resorption (Premolar)	Major Services: Endodontic
<b>D3473</b>	Surgical Repair of Root Resorption (Molar)	Major Services: Endodontic
<b>D3501</b>	Surgical Exposure of Root Surface without Apicoectomy (Anterior)	Major Services: Endodontic
<b>D3502</b>	Surgical Exposure of Root Surface without Apicoectomy (Premolar)	Major Services: Endodontic
<b>D3503</b>	Surgical Exposure of Root Surface without Apicoectomy (Molar)	Major Services: Endodontic
<b>D3920</b>	Hemisection (Including Any Root Removal), Not Including Root Canal Therapy	Major Services: Endodontic

CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
D3921	Decoronation or Submergence of an Erupted Tooth	Basic Services: Routine and Restorative
D3950	Canal Prep & Fitting of Dowel or Post	Major Services: Endodontic
D4210	Gingivectomy or Gingivoplasty - Four Or More Contiguous Teeth or Tooth Bounded Spaces Per Quadrant	Major Services: Surgical Periodontic
D4211	Gingivectomy or Gingivoplasty - One to Three Contiguous Teeth or Tooth Bounded Spaces Per Quadrant	Major Services: Surgical Periodontic
D4212	Gingivectomy Per Tooth	Major Services: Surgical Periodontic
D4240	Gingival Flap Procedure, Including Root Planing - Four or More Contiguous Teeth or Tooth Bounded Spaces Per Quadrant	Major Services: Surgical Periodontic
D4241	Gingival Flap Procedure, Including Root Planing - One to Three Contiguous Teeth or Tooth Bounded Spaces Per Quadrant	Major Services: Surgical Periodontic
D4245	Apically Positioned Flap	Major Services: Surgical Periodontic
D4249	Clinical Crown Lengthening – Hard Tissue	Major Services: Surgical Periodontic
D4260	Osseous Surgery (Including Elevation of a Full Thickness Flap and Closure) – Four or More Contiguous Teeth Or Tooth	Major Services: Oral Surgery
D4261	Osseous Surgery (Including Elevation of a Full Thickness Flap and Closure) – One To Three Contiguous Teeth Or Tooth	Major Services: Oral Surgery
D4263	Bone Replacement Graft - First Site in Quadrant	Major Services: Surgical Periodontic
D4264	Bone Replacement Graft - Each Additional Site in Quadrant	Major Services: Surgical Periodontic
D4265	Biologic Materials	Major Services: Surgical Periodontic
D4266	Guided Tissue Regeneration - Resorbable Barrier, Per Site	Major Services: Surgical Periodontic
D4267	Guided Tissue Regeneration - Nonresorbable Barrier, Per Site (Includes Membrane Removal)	Major Services: Surgical Periodontic
D4270	Pedicle Soft Tissue Graft Procedure	Major Services: Surgical Periodontic
D4273	Subepithelial Connective Tissue Graft Procedures, Per Tooth	Major Services: Surgical Periodontic
D4275	Soft Tissue Allograft	Major Services: Surgical Periodontic
D4276	Combined Connective Tissue and Double Pedicle Graft, Per Tooth	Major Services: Surgical Periodontic
D4277	Free Soft Tissue Graft Procedure (Including Donor Site Surgery), First Tooth or Edentulous Tooth Position in Graft	Major Services: Surgical Periodontic
D4278	Free Soft Tissue Graft Procedure (Including Donor Site Surgery), Each Additional Contiguous Tooth or Edentulous Tooth Position	Major Services: Surgical Periodontic
D4286	Removal of non-resorbable barrier	Major Services: Surgical Periodontic
D4341	Periodontal Scaling and Root Planing - Four Or More Teeth Per Quadrant	Major Services: Non-Surgical Periodontic
D4342	Periodontal Scaling and Root Planing - One to Three Teeth Per Quadrant	Major Services: Non-Surgical Periodontic
D4355	Full Mouth Debridement to Enable Comprehensive Evaluation And Diagnosis	Major Services: Non-Surgical Periodontic

CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
D4910	Periodontal Maintenance	Major Services: Non-Surgical Periodontic
D5110	Complete Denture - Maxillary	Major Services: Removal Prosthodontic
D5120	Complete Denture - Mandibular	Major Services: Removal Prosthodontic
D5130	Immediate Denture - Maxillary	Major Services: Removal Prosthodontic
D5140	Immediate Denture - Mandibular	Major Services: Removal Prosthodontic
D5211	Maxillary Partial Denture - Resin Base (Including Any Conventional Clasps, Rests and Teeth)	Major Services: Removal Prosthodontic
D5212	Mandibular Partial Denture - Resin Base (Including Any Conventional Clasps, Rests and Teeth)	Major Services: Removal Prosthodontic
D5213	Maxillary Partial Denture - Cast Metal Framework with Resin Denture Bases (Including Any Conventional Clasps, Rests and	Major Services: Removal Prosthodontic
D5214	Mandibular Partial Denture - Cast Metal Framework with Resin Denture Bases (Including Any Conventional Clasps, Rests and	Major Services: Removal Prosthodontic
D5221	Immediate Maxillary Partial Denture – Resin Base (Including Any Conventional Clasps, Rests and Teeth)	Major Services: Removal Prosthodontic
D5222	Immediate Mandibular Partial Denture – Resin Base (Including Any Conventional Clasps, Rests and Teeth)	Major Services: Removal Prosthodontic
D5225	Maxillary Partial Denture - Flexible Base (Including Any Clasps, Rests and Teeth)	Major Services: Removal Prosthodontic
D5226	Mandibular Partial Denture - Flexible Base (Including Any Clasps, Rests and Teeth)	Major Services: Removal Prosthodontic
D5227	Immediate Maxillary Partial Denture – Flexible Base	Major Services: Removal Prosthodontic
D5228	Immediate Mandibular Partial Denture – Flexible Base	Major Services: Removal Prosthodontic
D5282	Remov Unilateral Partial Cast Maxillary	Major Services: Removal Prosthodontic
D5283	Remov Unilateral Partial Cast-Mandibular	Major Services: Removal Prosthodontic
D5284	Removable Unilateral Partial Denture - One Piece Flexible Base (Per Quad)	Major Services: Removal Prosthodontic
D5286	Removable Unilateral Partial Denture - One Piece Cast Resin (Per Quad)	Major Services: Removal Prosthodontic
D5410	Adjust Complete Denture - Maxillary	Major Services: Removal Prosthodontic
D5411	Adjust Complete Denture - Mandibular	Major Services: Removal Prosthodontic
D5421	Adjust Partial Denture - Maxillary	Major Services: Removal Prosthodontic
D5422	Adjust Partial Denture - Mandibular	Major Services: Removal Prosthodontic
D5510	Repair Broken Complete Denture Base	Major Services: Removal Prosthodontic



CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
D5520	Replace Missing Or Broken Teeth - Complete Denture (Each Tooth)	Major Services: Removal Prosthodontic
D5610	Repair Resin Denture Base	Major Services: Removal Prosthodontic
D5620	Repair Cast Framework	Major Services: Removal Prosthodontic
D5630	Repair Or Replace Broken Clasp	Major Services: Removal Prosthodontic
D5640	Replace Broken Teeth - Per Tooth	Major Services: Removal Prosthodontic
D5650	Add Tooth To Existing Partial Denture	Major Services: Removal Prosthodontic
D5660	Add Clasp To Existing Partial Denture	Major Services: Removal Prosthodontic
D5670	Replace All Teeth And Acrylic On Cast Metal Framework (Maxillary)	Major Services: Removal Prosthodontic
D5671	Replace All Teeth And Acrylic On Cast Metal Framework (Mandibular)	Major Services: Removal Prosthodontic
D5710	Rebase Complete Maxillary Denture	Major Services: Removal Prosthodontic
D5711	Rebase Complete Mandibular Denture	Major Services: Removal Prosthodontic
D5720	Rebase Maxillary Partial Denture	Major Services: Removal Prosthodontic
D5721	Rebase Mandibular Partial Denture	Major Services: Removal Prosthodontic
D5725	Rebase Hybrid Prosthesis	Major Services: Removal Prosthodontic
D5730	Reline Complete Maxillary Denture (Chairside)	Major Services: Removal Prosthodontic
D5731	Reline Complete Mandibular Denture (Chairside)	Major Services: Removal Prosthodontic
D5740	Reline Maxillary Partial Denture (Chairside)	Major Services: Removal Prosthodontic
D5741	Reline Mandibular Partial Denture (Chairside)	Major Services: Removal Prosthodontic
D5750	Reline Complete Maxillary Denture (Laboratory)	Major Services: Removal Prosthodontic
D5751	Reline Complete Mandibular Denture (Laboratory)	Major Services: Removal Prosthodontic
D5760	Reline Maxillary Partial Denture (Laboratory)	Major Services: Removal Prosthodontic
D5761	Reline Mandibular Partial Denture (Laboratory)	Major Services: Removal Prosthodontic
D5765	Soft Liner for Complete or Partial Removable Denture - Indirect	Major Services: Removal Prosthodontic
D5850	Tissue Conditioning, Maxillary	Major Services: Surgical Periodontic

CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
<b>D5851</b>	Tissue Conditioning, Mandibular	Major Services: Surgical Periodontic
<b>D5863</b>	Overdenture – Complete Maxillary	Major Services: Removal Prosthodontic
<b>D5864</b>	Overdenture – Partial Maxillary	Major Services: Removal Prosthodontic
<b>D5865</b>	Overdenture – Complete Mandibular	Major Services: Removal Prosthodontic
<b>D5866</b>	Overdenture – Partial Mandibular	Major Services: Removal Prosthodontic
<b>D6010</b>	Surgical Placement of Implant Body: Endosteal Implant	Major Services: Fixed Prosthodontic
<b>D6040</b>	Epoosteal Implant	Major Services: Fixed Prosthodontic
<b>D6050</b>	Transosteal Implant	Major Services: Fixed Prosthodontic
<b>D6055</b>	Connecting Bar – Implant Supported or Abutment Supported	Major Services: Fixed Prosthodontic
<b>D6056</b>	Prefabricated Abutment – Includes Modification and Placement	Major Services: Fixed Prosthodontic
<b>D6057</b>	Custom Fabricated Abutment – Includes Placement	Major Services: Fixed Prosthodontic
<b>D6058</b>	Abutment Supported Porcelain/Ceramic Crown	Major Services: Fixed Prosthodontic
<b>D6059</b>	Abutment Supported Porcelain Fused to Metal Crown (High Noble Metal)	Major Services: Fixed Prosthodontic
<b>D6060</b>	Abutment Supported Porcelain Fused to Metal Crown (Predominantly Base Metal)	Major Services: Fixed Prosthodontic
<b>D6061</b>	Abutment Supported Porcelain Fused to Metal Crown (Noble Metal)	Major Services: Fixed Prosthodontic
<b>D6062</b>	Abutment Supported Cast Metal Crown (High Noble Metal)	Major Services: Fixed Prosthodontic
<b>D6063</b>	Abutment Supported Cast Metal Crown (Predominantly Base Metal)	Major Services: Fixed Prosthodontic
<b>D6064</b>	Abutment Supported Cast Metal Crown (Noble Metal)	Major Services: Fixed Prosthodontic
<b>D6065</b>	Implant Supported Porcelain/Ceramic Crown	Major Services: Fixed Prosthodontic
<b>D6066</b>	Implant Supported Porcelain Fused to Metal Crown (Titanium, Titanium Alloy, High Noble Metal)	Major Services: Fixed Prosthodontic
<b>D6067</b>	Implant Supported Metal Crown (Titanium, Titanium Alloy, High Noble Metal)	Major Services: Fixed Prosthodontic
<b>D6068</b>	Abutment Supported Retainer for Porcelain/Ceramic Fpd	Major Services: Fixed Prosthodontic
<b>D6069</b>	Abutment Supported Retainer for Porcelain Fused to Metal Fpd (High Noble Metal)	Major Services: Fixed Prosthodontic
<b>D6070</b>	Abutment Supported Retainer for Porcelain Fused to Metal Fpd (Predominantly Base Metal)	Major Services: Fixed Prosthodontic
<b>D6071</b>	Abutment Supported Retainer for Porcelain Fused to Metal Fpd (Noble Metal)	Major Services: Fixed Prosthodontic

CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
D6072	Abutment Supported Retainer for Cast Metal Fpd (High Noble Metal)	Major Services: Fixed Prosthodontic
D6073	Abutment Supported Retainer for Cast Metal Fpd (Predominantly Base Metal)	Major Services: Fixed Prosthodontic
D6074	Abutment Supported Retainer for Cast Metal Fpd (Noble Metal)	Major Services: Fixed Prosthodontic
D6075	Implant Supported Retainer for Ceramic Fpd	Major Services: Fixed Prosthodontic
D6076	Implant Supported Retainer for Porcelain Fused to Metal FPD (Titanium, Titanium Alloy, Or High Noble Metal)	Major Services: Fixed Prosthodontic
D6077	Implant Supported Retainer for Cast Metal Fpd (Titanium, Titanium Alloy, Or High Noble Metal)	Major Services: Fixed Prosthodontic
D6082	Implant Supported Crown – Porcelain Fused to Base Alloys	Major Services: Fixed Prosthodontic
D6083	Implant Supported Crown – Porcelain Fused to Noble Alloys	Major Services: Fixed Prosthodontic
D6084	Implant Supported Crown – Porcelain Fused to Titanium and Titanium Alloys	Major Services: Fixed Prosthodontic
D6086	Implant Supported Crown – Predominantly Base Alloys	Major Services: Fixed Prosthodontic
D6087	Implant Supported Crown – Noble Alloys	Major Services: Fixed Prosthodontic
D6088	Implant Supported Crown – Titanium and Titanium Alloys	Major Services: Fixed Prosthodontic
D6092	Re-Cement or Re-Bond Implant/Abutment Supported Crown	Basic Services: Routine and Restorative
D6093	Re-Cement Or Re-Bond Implant/Abutment Supported Fixed Partial Denture	Basic Services: Routine and Restorative
D6094	Abutment Supported Crown - (Titanium)	Major Services: Fixed Prosthodontic
D6097	Abutment Supported Crown – Porcelain Fused to Titanium and Titanium Alloys	Major Services: Fixed Prosthodontic
D6098	Implant Supported Retainer for Metal FPD – Predominantly Base Alloys	Major Services: Fixed Prosthodontic
D6099	Implant Supported Retainer for Metal FPD – Noble Alloys	Major Services: Fixed Prosthodontic
D6100	Implant removal	Major Services: Fixed Prosthodontic
D6105	removal of implant body not requiring bone removal nor flap elevation	Major Services: Fixed Prosthodontic
D6106	guided tissue regeneration – resorbable barrier, per implant	Major Services: Surgical Periodontic
D6107	guided tissue regeneration – non-resorbable barrier, per implant	Major Services: Surgical Periodontic
D6110	Implant /Abutment Supported Removable Denture for Edentulous Arch – Maxillary	Major Services: Removal Prosthodontic
D6111	Implant /Abutment Supported Removable Denture for Edentulous Arch – Mandibular	Major Services: Removal Prosthodontic
D6112	Implant /Abutment Supported Removable Denture for Partially Edentulous Arch – Maxillary	Major Services: Removal Prosthodontic
D6113	Implant /Abutment Supported Removable Denture for Partially Edentulous Arch – Mandibular	Major Services: Removal Prosthodontic

CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
D6114	IMP/ABUTMT Supp Fixed Full Dent-Maxillary	Major Services: Fixed Prosthodontic
D6115	IMP/ABUTMT Supp Fixed Full Dent-Mandiblr	Major Services: Fixed Prosthodontic
D6116	IMP/ABUTMT Supp Fix Partial Dent-Maxillary	Major Services: Fixed Prosthodontic
D6117	IMP/ABUTMT Supp Fix Partial Dent-Mandibulr	Major Services: Fixed Prosthodontic
D6120	Implant Supported Retainer – Porcelain Fused to Titanium and Titanium Alloys	Major Services: Fixed Prosthodontic
D6121	Implant Supported Retainer – Porcelain Fused to Predominantly Base Alloys	Major Services: Fixed Prosthodontic
D6122	Implant Supported Retainer for FPD – Porcelain Fused to Noble Alloys	Major Services: Fixed Prosthodontic
D6123	Implant Supported Retainer for Metal FPD – Titanium and Titanium Alloys	Major Services: Fixed Prosthodontic
D6194	Abutment Supported Retainer Crown For FPD (Titanium)	Major Services: Fixed Prosthodontic
D6195	Abutment Supported Retainer – Porcelain Fused to Titanium and Titanium Alloys	Major Services: Fixed Prosthodontic
D6198	Remove Interim Implant Component	Major Services: Fixed Prosthodontic
D6205	Pontic - Indirect Resin Based Composite	Major Services: Fixed Prosthodontic
D6210	Pontic - Cast High Noble Metal	Major Services: Fixed Prosthodontic
D6211	Pontic - Cast Predominantly Base Metal	Major Services: Fixed Prosthodontic
D6212	Pontic - Cast Noble Metal	Major Services: Fixed Prosthodontic
D6214	Pontic - Titanium	Major Services: Fixed Prosthodontic
D6220	Pontic - Porcelain Fused to High Noble Metal	Major Services: Fixed Prosthodontic
D6241	Pontic - Porcelain Fused to Predominantly Base Metal	Major Services: Fixed Prosthodontic
D6242	Pontic - Porcelain Fused to Noble Metal	Major Services: Fixed Prosthodontic
D6243	Pontic - Porcelain Fused to Titanium and Titanium Alloys	Major Services: Fixed Prosthodontic
D6245	Pontic - Porcelain/Ceramic	Major Services: Fixed Prosthodontic
D6250	Pontic - Resin with High Noble Metal	Major Services: Fixed Prosthodontic
D6251	Pontic - Resin with Predom Base Metal	Major Services: Fixed Prosthodontic
D6252	Pontic – Resin with Noble Metal	Major Services: Fixed Prosthodontic
D6545	Retainer - Cast Metal for Resin Bonded Fixed Prosthesis	Major Services: Fixed Prosthodontic
D6548	Retainer - Porcelain/Ceramic for Resin Bonded Fixed Prosthesis	Major Services: Fixed Prosthodontic

CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
<b>D6549</b>	Resin Retainer – For Resin Bonded Fixed Prosthesis	Major Services: Fixed Prosthodontic
<b>D6600</b>	Inlay - Porcelain/Ceramic, Two Surfaces	Major Services: Restorative
<b>D6601</b>	Inlay - Porcelain/Ceramic, Three Or More Surfaces	Major Services: Restorative
<b>D6602</b>	Inlay - Cast High Noble Metal, Two Surfaces	Major Services: Restorative
<b>D6603</b>	Inlay - Cast High Noble Metal, Three Or More Surfaces	Major Services: Restorative
<b>D6604</b>	Inlay - Cast Predominantly Base Metal, Two Surfaces	Major Services: Restorative
<b>D6605</b>	Inlay - Cast Predominantly Base Metal, Three Or More Surfaces	Major Services: Restorative
<b>D6606</b>	Inlay - Cast Noble Metal, Two Surfaces	Major Services: Restorative
<b>D6607</b>	Inlay - Cast Noble Metal, Three Or More Surfaces	Major Services: Restorative
<b>D6608</b>	Onlay - Porcelain/Ceramic, Two Surfaces	Major Services: Restorative
<b>D6609</b>	Onlay - Porcelain/Ceramic, Three Or More Surfaces	Major Services: Restorative
<b>D6610</b>	Onlay - Cast High Noble Metal, Two Surfaces	Major Services: Restorative

CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
D6611	Onlay - Cast High Noble Metal, Three Or More Surfaces	Major Services: Restorative
D6612	Onlay - Cast Predominantly Base Metal, Two Surfaces	Major Services: Restorative
D6613	Onlay - Cast Predominantly Base Metal, Three Or More Surfaces	Major Services: Restorative
D6614	Onlay - Cast Noble Metal, Two Surfaces	Major Services: Restorative
D6615	Onlay - Cast Noble Metal, Three Or More Surfaces	Major Services: Restorative
D6624	Inlay - Titanium	Major Services: Restorative
D6634	Onlay - Titanium	Major Services: Restorative
D6710	Crown - Indirect Resin Based Composite	Major Services: Restorative
D6720	Retainer Crown -Resin + High Noble Metal	Major Services: Oral Surgery
D6721	Retainer Crown -Resin + Pred Base Metal	Major Services: Oral Surgery
D6722	Retainer Crown - Resin with Nobel Metal	Major Services: Oral Surgery
D6740	Crown - Porcelain/Ceramic	Major Services: Restorative
D6750	Crown - Porcelain Fused to High Noble Metal	Major Services: Restorative
D6751	Crown - Porcelain Fused to Predominantly Base Metal	Major Services: Restorative
D6752	Crown - Porcelain Fused to Noble Metal	Major Services: Restorative
D6753	Retainer Crown – Porcelain Fused to Titanium and Titanium Alloys	Major Services: Restorative
D6780	Crown - 3/4 Cast High Noble Metal	Major Services: Restorative
D6781	Crown - 3/4 Cast Predominantly Base Metal	Major Services: Restorative
D6782	Crown - 3/4 Cast Noble Metal	Major Services: Restorative
D6783	Crown - 3/4 Porcelain/Ceramic	Major Services: Restorative
D6784	Retainer Crown - 3/4 Titanium and Titanium Alloys	Major Services: Restorative
D6790	Crown - Full Cast High Noble Metal	Major Services: Restorative
D6791	Crown - Full Cast Predominantly Base Metal	Major Services: Restorative
D6792	Crown - Full Cast Noble Metal	Major Services: Restorative
D6794	Crown - Titanium	Major Services: Restorative
D6930	Re-Cement Or Re-Bond Fixed Partial Denture	Major Services: Restorative

CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
<b>D7111</b>	Extraction, Coronal Remnants - Deciduous Tooth	Basic Services: Routine and Restorative
<b>D7140</b>	Extraction, Erupted Tooth Or Exposed Root (Elevation And/Or Forceps Removal)	Basic Services: Routine and Restorative
<b>D7210</b>	Surgical Removal Of Erupted Tooth Requiring Removal Of Bone And/Or Sectioning Of Tooth, And Including Elevation Of	Major Services: Oral Surgery
<b>D7220</b>	Removal Of Impacted Tooth - Soft Tissue	Major Services: Oral Surgery
<b>D7230</b>	Removal Of Impacted Tooth - Partially Bony	Major Services: Oral Surgery
<b>D7240</b>	Removal Of Impacted Tooth - Completely Bony	Major Services: Oral Surgery
<b>D7241</b>	Removal Of Impacted Tooth - Completely Bony, With Unusual Surgical Complications	Major Services: Oral Surgery
<b>D7250</b>	Surgical Removal Of Residual Tooth Roots (Cutting Procedure)	Major Services: Oral Surgery
<b>D7251</b>	Coronectomy – Intentional Partial Tooth Removal	Major Services: Oral Surgery
<b>D7260</b>	Oroantral Fistula Closure	Major Services: Oral Surgery
<b>D7261</b>	Primary Closure of a Sinus Perforation	Major Services: Oral Surgery
<b>D7270</b>	Tooth Reimplantation and/or Stabilization of Accidentally Evulsed or Displaced Tooth	Major Services: Oral Surgery
<b>D7282</b>	Mobilization of Tooth to Aid Eruption	Major Services: Oral Surgery
<b>D7285</b>	Incisional Biopsy Of Oral Tissue-Hard (Bone, Tooth)	Major Services: Oral Surgery
<b>D7286</b>	Incisional Biopsy Of Oral Tissue-Soft	Major Services: Oral Surgery
<b>D7288</b>	Brush Biopsy - Transepithelial Sample Collection	Major Services: Oral Surgery
<b>D7290</b>	Surgical Repositioning of Teeth	Major Services: Oral Surgery
<b>D7291</b>	Trasseptal Fiberotomy	Major Services: Oral Surgery
<b>D7310</b>	Alveoplasty in Conjunction with Extractions - Four Or More Teeth or Tooth Spaces, Per Quadrant	Major Services: Oral Surgery
<b>D7311</b>	Alveoplasty in Conjunction with Extractions - One to Three Teeth or Tooth Spaces, Per Quadrant	Major Services: Oral Surgery
<b>D7320</b>	Alveoplasty Not in Conjunction with Extractions - Four Or More Teeth or Tooth Spaces, Per Quadrant	Major Services: Oral Surgery
<b>D7321</b>	Alveoplasty Not in Conjunction with Extractions - One To Three Teeth or Tooth Spaces, Per Quadrant	Major Services: Oral Surgery
<b>D7410</b>	Radical Excision-Up To 1.25 CM (BENIGN)	Major Services: Oral Surgery
<b>D7411</b>	Radical Excision-Greater Than 1.25 CM(BENIGN)	Major Services: Oral Surgery

CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
D7412	Radical Excision, Complicated (Benign)	Major Services: Oral Surgery
D7413	Radical Excision - Up To 1.25 CM	Major Services: Oral Surgery
D7414	Radical Excision – Greater Than 1.25 CM	Major Services: Oral Surgery
D7415	Radical Excision - Complicated	Major Services: Oral Surgery
D7440	Excision of Malignant Tumor - To 1.25 CM	Major Services: Oral Surgery
D7441	Excision of Malignant Tumor Over 1.25 CM	Major Services: Oral Surgery
D7450	Remove Odontogenic Cyst - Up To 1.25 CM	Major Services: Oral Surgery
D7451	Remove Odontogenic Cyst - Over 1.25 CM	Major Services: Oral Surgery
D7460	Remove Nonodontogenic Cyst Up To 1.25 CM	Major Services: Oral Surgery
D7461	Remove Nonodontogenic Cyst Over 1.25 CM	Major Services: Oral Surgery
D7465	Electrosurgery, Chemotherapy, Cryotherapy	Major Services: Oral Surgery
D7471	Removal of Lateral Exostosis (Maxilla or Mandible)	Major Services: Oral Surgery
D7472	Removal of Torus Palatinus	Major Services: Oral Surgery
D7473	Removal of Torus Mandibularis	Major Services: Oral Surgery
D7485	Removal of Torus Mandibularis	Major Services: Oral Surgery
D7509	Marsupialization of odontogenic cyst	Major Services: Oral Surgery
D7510	Incision and Drainage of Abscess - Intraoral Soft Tissue	Major Services: Oral Surgery
D7511	Incision and Drainage of Abscess - Intraoral Soft Tissue - Complicated (Includes Drainage of Multiple Fascial Spaces)	Major Services: Oral Surgery
D7520	Incision and Drainage of Abscess - Extraoral Soft Tissue	Major Services: Oral Surgery
D7521	Incision and Drainage of Abscess - Extraoral Soft Tissue - Complicated (Includes Drainage Of Multiple Fascial Spaces)	Major Services: Oral Surgery
D7956	Guided tissue regeneration, <b>edentulous</b> area – resorbable barrier, per site	Major Services: Oral Surgery
D7957	Guided tissue regeneration, <b>edentulous</b> area – non-resorbable barrier, per site	Major Services: Oral Surgery
D7961	Buccal/Labial Frenulectomy	Major Services: Oral Surgery
D7962	Lingual Frenulectomy	Major Services: Oral Surgery
D7963	Frenuloplasty	Major Services: Oral Surgery
D7970	Excision of Hyperplastic Tissue - Per Arch	Major Services: Oral Surgery



CDT CODE	Description	Mutual Dental Preferred Policy DNT2
		Mutual Dental Protection Policy DNT5
<b>D7971</b>	Excision of Pericoronal Gingiva	Major Services: Oral Surgery
<b>D7972</b>	Surgical Reduction of Fibrous Tuberosity	Major Services: Oral Surgery
<b>D9110</b>	Palliative (Emergency) Treatment of Dental Pain - Minor Procedure	Basic Services: Adjunctive General
<b>D9120</b>	Fixed Partial Denture Sectioning	Major Services: Fixed Prosthodontic
<b>D9222</b>	General Anesthesia - Deep Sedation/First 15 Minutes	Major Services: Adjunctive General
<b>D9223</b>	General Anesthesia – Deep Sedation Additional 15 Minutes	Major Services: Adjunctive General
<b>D9239</b>	IV Anesthesia/Conscious Sedation – First 15 Minutes	Major Services: Adjunctive General
<b>D9243</b>	IV Anesthesia/Conscious Sedation – 15 Minutes	Major Services: Adjunctive General
<b>D9310</b>	Consultation - Diagnostic Service Provided by Dentist Or Physician Other Than Requesting Dentist Or Physician	Major Services: Adjunctive General
<b>D9450</b>	Case Presentation, Detailed Treatment Plan	Major Services: Adjunctive General

Mutual Dental Preferred and Mutual Dental Protection insurance policies are underwritten by Mutual of Omaha Insurance Company, 3300 Mutual of Omaha Plaza, Omaha, NE 68175, 1-800-775-1000, [mutualofomaha.com](http://mutualofomaha.com).

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