Final Report of March 2025 Code Maintenance Committee Meeting Decisions

Page 1 of 38

Part 1 – Editorial Actions requested by CMC member organizations

Approved on Consent Calendar

The following Editorial Action requests were on the CMC consent calendar and accepted as presented for inclusion in *CDT 2025*.

Inventory E1 -

D5520 replace missing or broken teeth - complete denture (each tooth) - per tooth

Inventory E2 -

D5640 replace missing or broken teeth – partial denture – per tooth

Inventory E3 -

D5650 add tooth to existing partial denture - per tooth

Inventory E4 -

D6051 placement of interim implant abutment placement

A healing cap is not an interim abutment.

Final Report of March 2025 Code Maintenance Committee Meeting Decisions

Page 2 of 38

Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 01a – 01g (as Submitted / CMC voice consensus to vote on 01a – 01g together)

#01a –

Dxxxx intraoral – analysis of a first periapical radiographic image aided by artificial intelligence (AI)

A licensed dentist utilizes artificial intelligence (AI) dental radiology algorithms to analyze a first periapical intraoral radiographic image. The AI dental radiology algorithms are programed to identify dental anatomy and pathologies to assist the dentist in diagnosing and educating patients

#01b –

Dxxxx intraoral – analysis of each additional periapical radiographic image aided by artificial intelligence (AI)

A licensed dentist utilizes artificial intelligence (AI) dental radiology algorithms to analyze each additional periapical intraoral radiographic image. The AI dental radiology algorithms are programed to identify dental anatomy and pathologies to assist the dentist in diagnosing and educating patients.

#01c -

Dxxxx intraoral – artificial intelligence processing of bitewing first radiographic image

Artificial intelligence (AI) processing of dental x-rays used to identify dental anatomy and pathologies.

#01d –

Dxxxx intraoral – artificial intelligence processing of two bitewing radiographic images

Artificial intelligence (AI) processing of dental x-rays used to identify dental anatomy and pathologies.

#01e -

Dxxxx intraoral – artificial intelligence processing of four bitewing radiographic images

Artificial intelligence (AI) processing of dental x-rays used to identify dental anatomy and pathologies.

#01f -

Dxxxx intraoral – analysis of a complete series of radiographic images aided by artificial intelligence (AI)

A licensed dentist utilizes artificial intelligence (AI) dental radiology algorithms to analyze a complete series of intraoral radiographic images. The AI dental radiology algorithms are programed to identify dental anatomy and pathologies to assist the dentist in diagnosing and educating patients

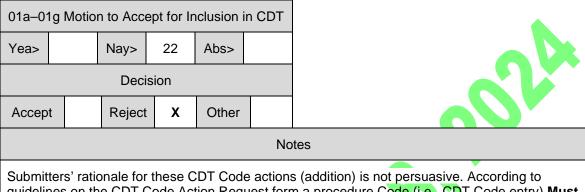


#01g –

Dxxxx artificial intelligence (AI) assisted dental image analysis

(No descriptor)

Code Maintenance Committee Action:



guidelines on the CDT Code Action Request form a procedure Code (i.e., CDT Code entry) **Must** – 1. Be clear, unambiguous, and specify a discrete procedure. These procedures are reportable with an appropriate current CDT image capture with interpretation or interpretation and report only codes.

Inventory #: 02a through 7b (as Submitted / CMC voice consensus to vote on 02a – 07b together)

#02a –

D9239 intravenous moderate (conscious) sedation/analgesia – first 15 minutes

Anesthesia time begins when the doctor administering the anesthetic agent initiates the anesthesia and non-invasive monitoring protocol and remains in continuous attendance of the patient. Anesthesia services are considered completed when the patient may be safely left under the observation of trained personnel and the doctor may safely leave the room to attend to other patients or duties.

The level of anesthesia is determined by the anesthesia provider's documentation of the anesthetic effects on the central nervous system and not dependent on the route of administration.

#02b –

D9243 intravenous moderate (conscious) sedation/analgesia – each subsequent 15 minute increment

(No descriptor)

#02c –

D9239 <u>continual titration of</u> intravenous moderate (conscious) sedation /analgesia – first 15 minutes, <u>or any portion thereof</u>

Anesthesia time begins when the doctor administering the anesthetic agent initiates the appropriate anesthesia and non-invasive monitoring protocol and remains in continuous attendance of the patient. Anesthesia services are time is considered complete when the patient may be safely left under the observation of trained personnel and the doctor may safely leave the room to attend to other patients or duties. The level of anesthesia is determined by the anesthesia provider's gualified dentist's/ surgeon's intended depth of anesthesia and supported by documentation of the anesthetic effects upon the central nervous system. and It is not dependent upon the route of administration.

#02d –

D9243 <u>continual titration of intravenous</u> moderate (conscious) sedation /analgesia – each subsequent 15 minute increment, <u>or any portion thereof</u>

(No descriptor)

#03a –

D9248 non-intravenous conscious sedation - moderate

This includes non-IV minimal and moderate sedation. A medically controlled state of depressed consciousness while maintaining the patient's airway, protective reflexes and the ability to respond to stimulation or verbal commands. It

includes non-intravenous administration of sedative and/or analgesic agent(s) and appropriate monitoring.

The level of anesthesia is determined by the anesthesia provider's documentation of the anesthetic's effects upon the central nervous system and not dependent upon the route of administration.

#03b –

Dxxxx non-intravenous conscious sedation – minimal

A medically controlled state of depressed consciousness while maintaining the patient's airway, protective reflexes and the ability to respond to stimulation or verbal commands. It includes non-intravenous administration of sedative and/or analgesic agent(s) and appropriate monitoring.

The level of anesthesia is determined by the anesthesia provider's documentation of the anesthetic's effects upon the central nervous system and not dependent upon the route of administration

#03c -

D9248 <u>administration of non-readily titratable (such as enteral)</u> non-intravenous conscious minimal / moderate sedation

This Includes non-IV minimal and moderate sedation.

A medically controlled state of depressed consciousness while maintaining the patient's airway, protective reflexes and the ability to respond to stimulation or verbal commands. It includes non-intravenous administration of sedative and / or analgesic agent(s) and appropriate monitoring.

The level of anesthesia is determined by the anesthesia provider's documentation of the anesthetic's effects upon the central nervous system and not dependent upon route of administration.



Some sedative agents may not be continually titratable due to the nature of their pharmacology or their route of administration (such as the enteral route or certain parenteral routes such as intranasal). These drugs may be given as a single dose or divided dose. Nitrous oxide may be co-administered. Due to sedation being a continuum and the safety margin needed for this procedure, the level of sedation is not entirely based on the effects on the central nervous system. Minimal sedation may be achieved by the administration of a drug, either singly or in divided doses, to achieve the desired clinical effect, not to exceed the maximum recommended dose (MRD). If multiple drugs are administered or a drug exceeding the maximum recommended dose during a single appointment, it is considered to be moderate sedation. The procedure includes the appropriate monitoring per level of sedation.

Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 5 of 38

Part 2 – Substantive Actions from any interested individual or organization

#04a –

D9222 <u>continual titration of</u> deep sedation / general anesthesia – first 15 minutes, or any potion thereof

Anesthesia time begins when the doctor administering the anesthetic agent initiates the appropriate anesthesia and non-invasive monitoring protocol and remains in continuous attendance of the patient. Anesthesia services are-time is considered complete when the patient may be safely left under the observation of trained personnel and the doctor may safely leave the room to attend to other patients or duties. The level of anesthesia is determined by the anesthesia provider's qualified dentist's/ surgeon's/ anesthesia provider's intended depth of anesthesia and supported by documentation of the anesthetic effects upon the central nervous system. and-<u>It is not dependent upon the route of administration</u>.

#04b –

D9223 <u>continual titration of</u> deep sedation / general anesthesia – each subsequent 15 minute increment, or any potion thereof

(No descriptor)

#05 –

D9230 administration of inhalational of nitrous oxide / for analgesia /minimal sedation, anxiolysis

(No Descriptor)

#06a –

Dxxxx administration of general anesthesia, separate provider – first 15 minutes, or any portion thereof

Anesthesia time begins when the anesthesia provider, not involved in the procedure, administering the anesthetic agent initiates the appropriate anesthesia and non-invasive monitoring protocol and remains in continuous attendance of the patient. Anesthesia time is considered completed when the patient may be safely left under the observation of trained personnel and the anesthesia provider may safely leave the room to attend to other patients or duties.

#06b –

Dxxxx administration of general anesthesia, separate provider – each subsequent 15 minutes, or any portion thereof

(No descriptor)

#07a –

Dxxxx monitored anesthesia care - first 15 minutes, or any portion thereof



Monitored anesthesia care (MAC) is a type of anesthesia service in which an anesthesia provider, not involved in the procedure, continually monitors and supports the patient's vital functions; diagnoses and treats clinical problems that may occur; administers sedative, anxiolytic, or analgesic medications if needed; and converts to general anesthesia if required. The provider must have the ability and training to provide general anesthesia if necessary.

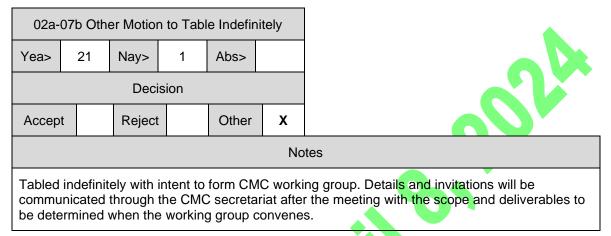
Anesthesia time begins when the anesthesia provider, not involved in the procedure, administering the anesthetic agent initiates the appropriate anesthesia and non-invasive monitoring protocol and remains in continuous attendance of the patient. Anesthesia time is considered completed when the patient may be safely left under the observation of trained personnel and the anesthesia provider may safely leave the room to attend to other patients or duties.

Inventory #: 07b -

Dxxxx monitored anesthesia care - each subsequent 15 minutes, or any portion thereof

(No descriptor)

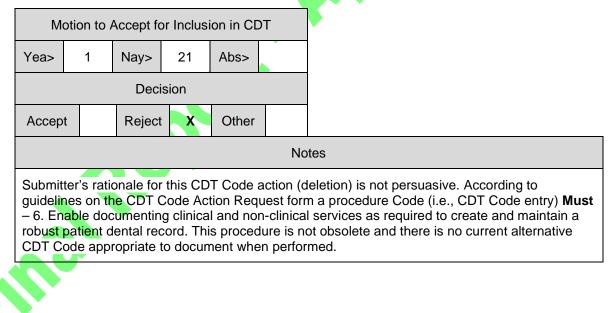
Code Maintenance Committee Action:



Inventory #: 08 (as Submitted)

D3910 surgical procedure for isolation of tooth with rubber dam

None

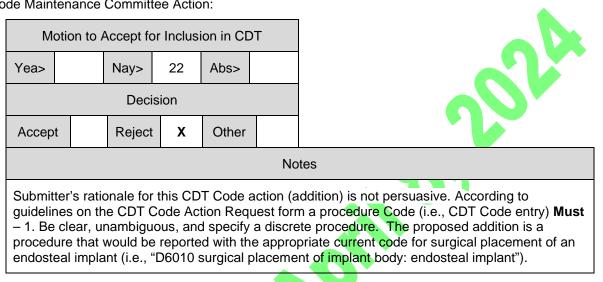


Inventory #: 09 (as Submitted)

Dxxxx surgical placement of eccentric (non-round implant post) shaped implant body: endosteal implant

Eccentric osteotomy necessary for pressed non screwed placement of non-round dental implant post within the mandible or maxilla.

Code Maintenance Committee Action:

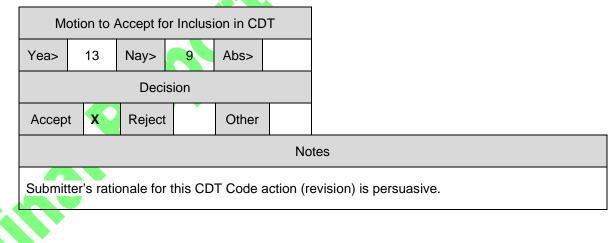


Inventory #: 10a (as Amended)

D0801 3D dental intraoral surface scan – direct

A surface scan of any aspect of the intraoral anatomy.





Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 8 of 38

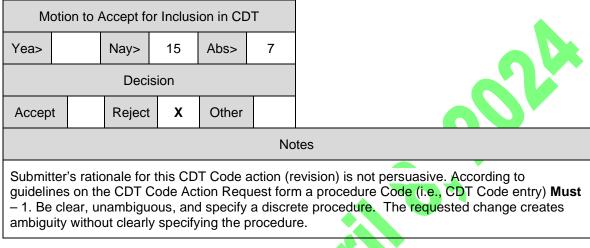
Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 10b (as Submitted)

D0802 3D dental_oral_surface scan – indirect

A surface scan of a diagnostic cast.

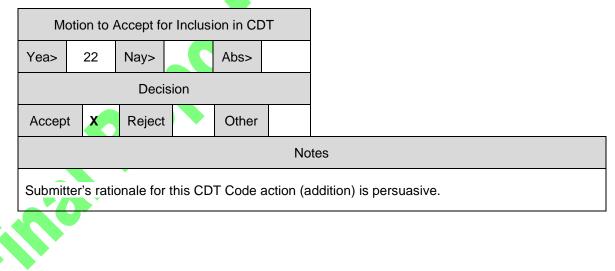
Code Maintenance Committee Action:



Inventory #: 11 (as Amended)

Dxxxx partial extraction for immediate implant placement

Sectioning the root of a tooth vertically, then extracting the palatal portion of the root. The buccal section of the root is retained in order to stabilize the buccal plate prior to immediate implant placement. Also known as the Socket Shield Technique.



Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 9 of 38 Part 2 – Substantive Actions from any interested individual or organization

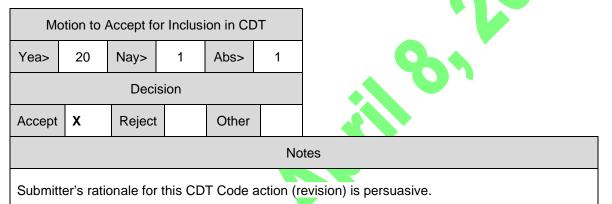
Inventory #: 12 (as Amended)

D0160 detailed and extensive oral evaluation - problem focused, by report

A detailed and extensive problem focused evaluation entails extensive diagnostic and cognitive modalities based on the findings of a comprehensive oral evaluation. Integration of more extensive diagnostic modalities to develop a treatment plan for a specific problem is required. The condition requiring this type of evaluation should be described and documented.

Examples of conditions requiring this type of evaluation may include dentofacial anomalies, complicated perio-prosthetic conditions, complex temporomandibular dysfunction, facial pain of unknown origin, <u>sleep related breathing disorders</u>, conditions requiring multi-disciplinary consultation, etc.

Code Maintenance Committee Action:

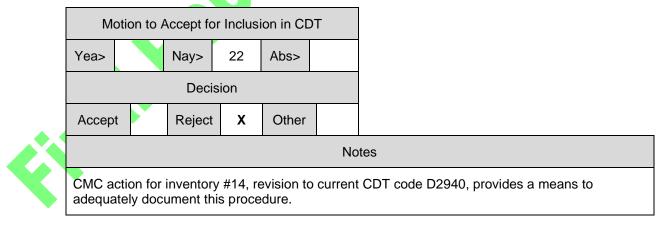


Inventory #: 13a (as Submitted)

Dxxxx placement of temporary filling to create seal which allows endodontic therapy

(No descriptor)

#13a and 13b were taken out of order and addressed after #15.



Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 10 of 38 Part 2 – Substantive Actions from any interested individual or organization

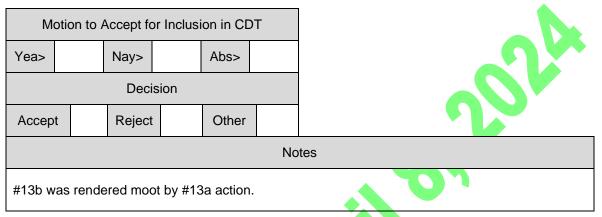
Inventory #: 13b (as Submitted)

Dxxxx removal of temporary filling which created seal to allow endodontic therapy

(No descriptor)

#13a and 13b were taken out of order and addressed after #15.

Code Maintenance Committee Action:

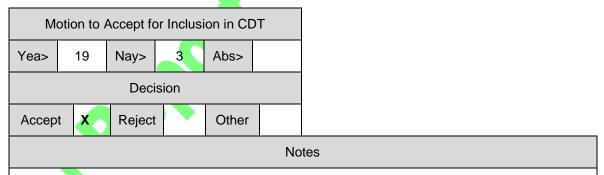


Inventory #: 14 (as Substituted)

D2940 placement of interim direct restoration protective restoration

Direct placement of a restorative material to protect tooth and/or tissue form. This procedure may be used to relieve pain, promote healing, manage caries, create a seal for endodontic isolation, or prevent further deterioration until definitive treatment can be rendered. Not to be used for endodontic access closure, or as a base or liner under restoration.

Code Maintenance Committee Action:



As described, #14 procedure and intended result could be reported with D2940 if that procedure code entry's nomenclature and descriptor were revised. #14 was substituted with the action to revise D2940.

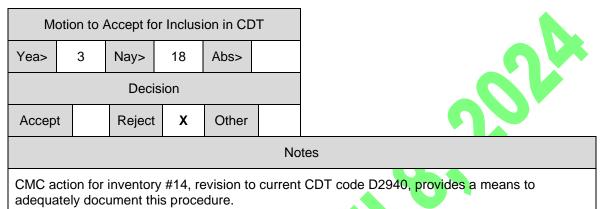
Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 11 of 38 Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 15 (as Submitted)

D2941 interim therapeutic restoration - primary dentition

Placement of an adhesive restorative material following caries debridement by hand or other method for the management of carly childhood caries. Not considered a definitive restoration.

Code Maintenance Committee Action:



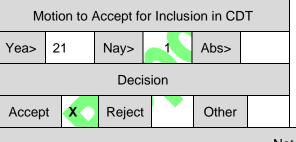
Inventory #: 15b (floor motion)

A motion on the floor to delete D2941 was made after #14 action to revise D2940 and was accepted and #15 action to revise D2941 was rejected.

D2941 interim therapeutic restoration - primary dentition

Placement of an adhesive restorative material following caries debridement by hand or other method for the management of early childhood caries. Not considered a definitive restoration.

Code Maintenance Committee Action:



Notes

CMC action for inventory #14, revision to current CDT code D2940, provides a means to adequately document this procedure.

Inventory #: 16 (as Submitted)

Dxxxx caries detection and assessment of incipient decay with an optical agent

Chemical or biological optical agent used to detect and assess initial caries lesions, including assessment of lesion activity; does not include only the traditional visual/tactile exam

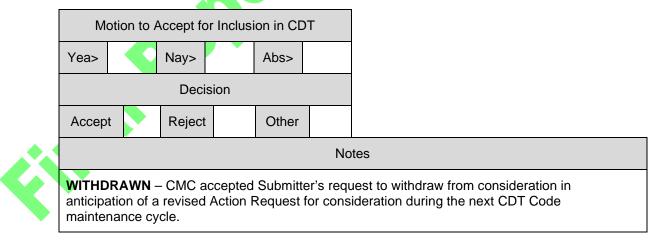
Code Maintenance Committee Action:

Ма	tion to A	Accept fo	r Inclusi	on in CD						
Yea>		Nay>	22	Abs>						
		Decis	sion							
Accept		Reject	x	Other						
	Notes									
guidelin – 1. Be procedu procedu	Submitter's rationale for this CDT Code action (addition) is not persuasive. According to guidelines on the CDT Code Action Request form a procedure Code (i.e., CDT Code entry) Must – 1. Be clear, unambiguous, and specify a discrete procedure. The proposed addition is a procedure that would be documented with the current CDT code "D0600 non-ionizing diagnostic procedure capable of quantifying, monitoring, and recording changes in structure of enamel, dentin, and cementum".									

Inventory #: 17a (as Submitted)

D9947 custom sleep apnea appliance fabrication and delivery of a custom sleep apnea appliance

None-This procedure includes but is not limited to delivery of a mandibular advancement device, or any other custom sleep apnea appliances or devices that do not have their own unique CDT codes.



Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 13 of 38

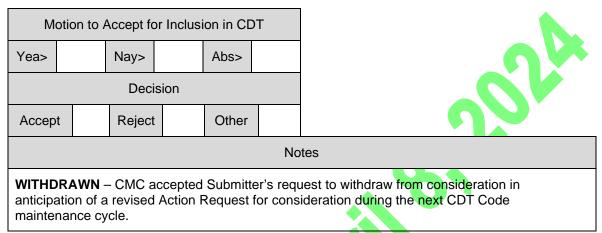
Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 17b (as Submitted)

Dxxxx fabrication of a custom sleep apnea appliance

Advancement device, or any other custom sleep apnea appliances or devices that do not have their own unique CDT codes.

Code Maintenance Committee Action:

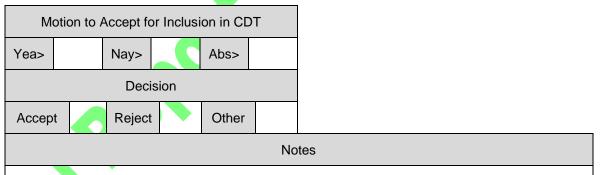


Inventory #: 18a (as Submitted)

D9954 fabrication and delivery of oral appliance therapy (OAT) morning repositioning device

<u>Delivery of device</u> for use immediately after removing a mandibular advancement device to aid in relieving muscle/jaw pain and occlusal changes.

Code Maintenance Committee Action:



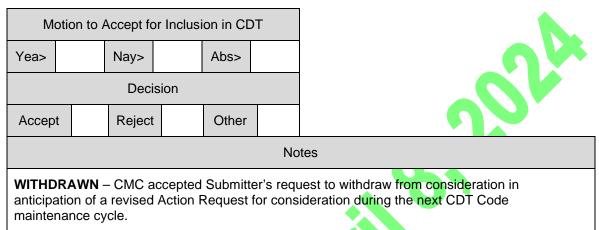
WITHDRAWN – CMC accepted Submitter's request to withdraw from consideration in anticipation of a revised Action Request for consideration during the next CDT Code maintenance cycle.

Inventory #: 18b (as Submitted)

Dxxxx fabrication of oral appliance therapy (OAT) morning repositioning device

Fabrication of device to aid in relieving muscle/jaw pain and occlusal changes after use of a mandibular advancement device.

Code Maintenance Committee Action:



Inventory #: 19 (as Submitted)

D0150 comprehensive oral evaluation - new or established patient

Used by a general dentist and/or a specialist when evaluating a patient comprehensively. This applies to new patients; established patients who have had a significant change in health conditions or other unusual circumstances, by report, or established patients who have been absent from active treatment for three or more years. It This procedure is a thorough evaluation of a patient's and recording of the extraoral and intraoral hard and soft tissues that includes:

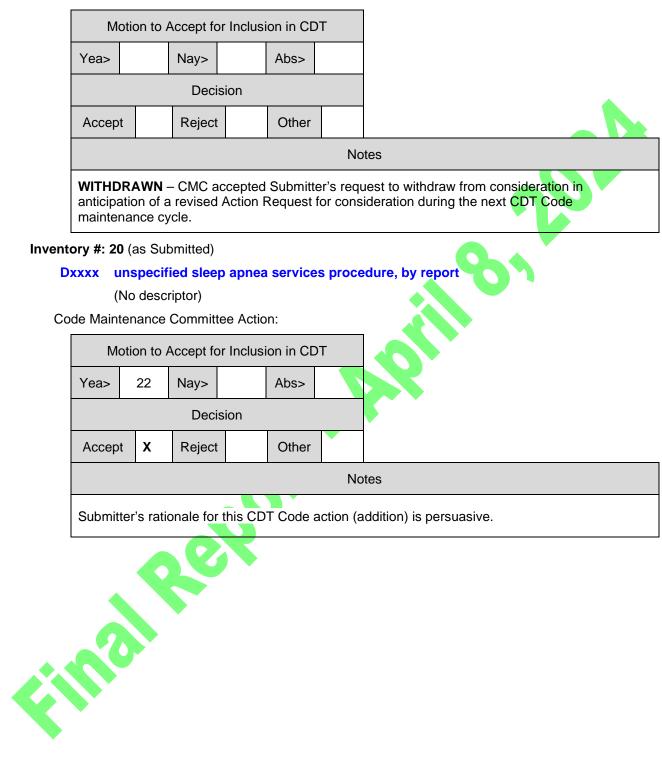
- signs or symptoms of oral cancer
- presence of dental caries, missing or unerupted teeth, restorations, prostheses
- occlusal relationships
- periodontal probing and charting
- a general health assessment
- <u>a medical history update</u>

The comprehensive oral evaluation's findings are documented in the patient's dental record.



It may require interpretation of information acquired through additional diagnostic procedures. Additional diagnostic procedures <u>delivered as part of the comprehensive oral evaluation are</u> should be reported separately with their own unique codes, or the appropriate "unspecified procedure, by report" code.

This includes an evaluation for oral cancer, the evaluation and recording of the patient's dental and medical history and a general health assessment. It may include the evaluation and recording of dental caries, missing or unerupted teeth, restorations, existing prostheses, occlusal relationships, periodontal conditions (including periodontal screening and/or charting), hard and soft tissue anomalies, etc.



Inventory #: 21 (as Amended)

D6011 surgical access to an implant body (second stage implant surgery)

This procedure, also known as second stage implant surgery, involves removal of tissue that covers the implant body so that a fixture of any type can be placed, or an existing fixture be replaced with another. Examples of fixtures include but are not limited to healing caps, abutments shaped to help contour the gingival margins or the final restorative prosthesis.

Code Maintenance Committee Action:

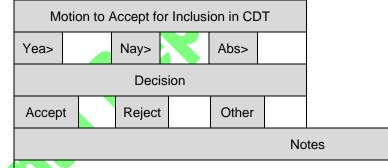
М	otion to	Accept fo	or Inclus	ion in CE							
Yea>	20	Nay>	1	Abs>	1						
		Deci	sion								
Accep	t X	Reject		Other							
	Notes										
Submit	Submitter's rationale for this CDT Code action (revision) is persuasive.										

Inventory #: 22 (as Submitted)

D6198 remove interim implant component

Removal of implant component (e.g., interim abutment; provisional implant crown) originally placed for a specific clinical purpose and period of time determined by the dentist

Code Maintenance Committee Action:



WITHDRAWN – CMC accepted Submitter's request to withdraw from consideration in anticipation of a revised Action Request for consideration during the next CDT Code maintenance cycle.

Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 17 of 38

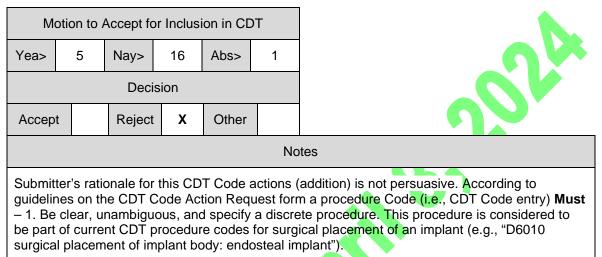
Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 23a (as Amended)

Dxxxx placement of a healing cap on an implant

Not to be used for replacing the healing cap after it was removed to obtain an impression, perform a scan, check tissue healing, or measure contours.

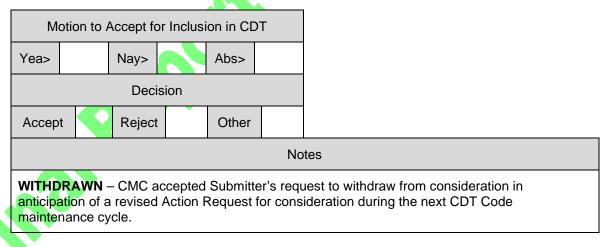
Code Maintenance Committee Action:



Inventory #: 23b (as Submitted)

Dxxxx removal of a healing cap on an implant

(No descriptor)



Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 18 of 38

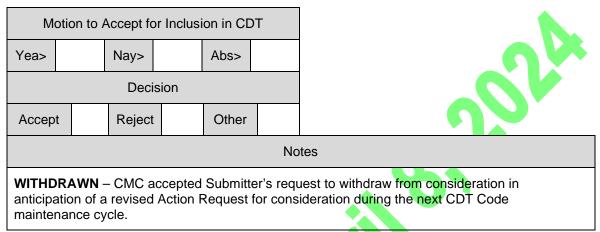
Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 24a (as Submitted)

Dxxxx fabrication of interim retainer for an implant supported fixed partial denture

Fixture fabricated to enable further treatment or completion of diagnosis as necessary prior to a final impression for the definitive prosthesis.

Code Maintenance Committee Action:

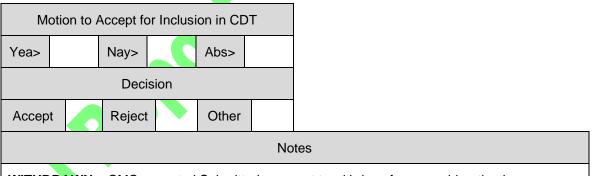


Inventory #: 24b (as Submitted)

Dxxxx placement of interim retainer for an implant supported fixed partial denture

Fixture placed to enable further treatment or completion of diagnosis as necessary prior to final impression for the definitive prosthesis.

Code Maintenance Committee Action:



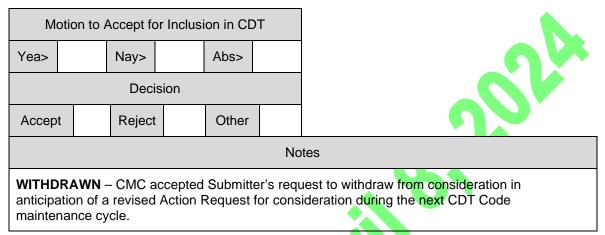
WITHDRAWN – CMC accepted Submitter's request to withdraw from consideration in anticipation of a revised Action Request for consideration during the next CDT Code maintenance cycle.

Inventory #: 24c (as Submitted)

Dxxxx removal of interim retainer for an implant supported fixed partial denture

Removal of fixture to enable final impression required for fabrication of the definitive prosthesis.

Code Maintenance Committee Action:

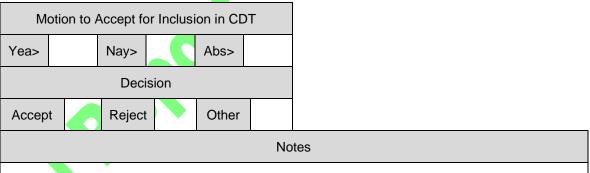


Inventory #: 24d (as Submitted)

Dxxxx fabrication of interim retainer for an abutment supported fixed partial denture

Fixture fabricated to enable further treatment or completion of diagnosis as necessary prior to final impression for the definitive prosthesis.

Code Maintenance Committee Action:



WITHDRAWN – CMC accepted Submitter's request to withdraw from consideration in anticipation of a revised Action Request for consideration during the next CDT Code maintenance cycle.

Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 20 of 38

Part 2 – Substantive Actions from any interested individual or organization

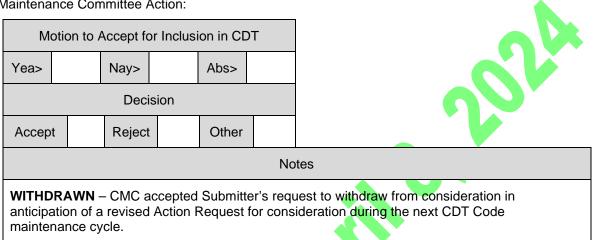
Inventory #: 24e (as Submitted)

placement of interim retainer for an abutment supported fixed partial denture Dxxxx

Fixture placed to enable further treatment or completion of diagnosis as necessary prior to final impression for the definitive prosthesis.

(No descriptor)

Code Maintenance Committee Action:

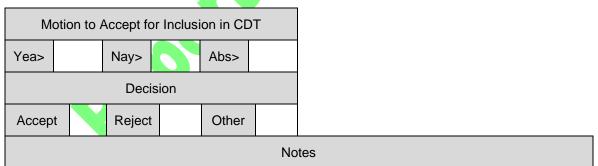


Inventory #: 24f (as Submitted)

removal of interim retainer for an abutment supported fixed partial denture Dxxxx

Removal of fixture to enable final impression required for fabrication of the definitive prosthesis.

Code Maintenance Committee Action:



WITHDRAWN - CMC accepted Submitter's request to withdraw from consideration in anticipation of a revised Action Request for consideration during the next CDT Code maintenance cycle.

Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 21 of 38

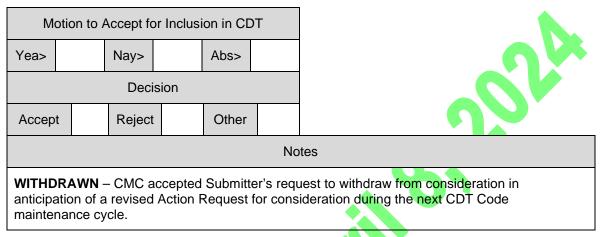
Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 25a (as Submitted)

Dxxxx fabrication of interim implant supported crown

Fixture fabricated to enable further treatment or completion of diagnosis as necessary prior to final impression for the definitive prosthesis.

Code Maintenance Committee Action:

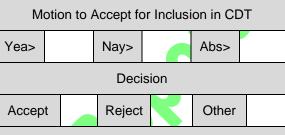


Inventory #: 25b (as Submitted)

D6085 placement of interim implant supported crown

(No descriptor)

Code Maintenance Committee Action:



Notes

WITHDRAWN – CMC accepted Submitter's request to withdraw from consideration in anticipation of a revised Action Request for consideration during the next CDT Code maintenance cycle.



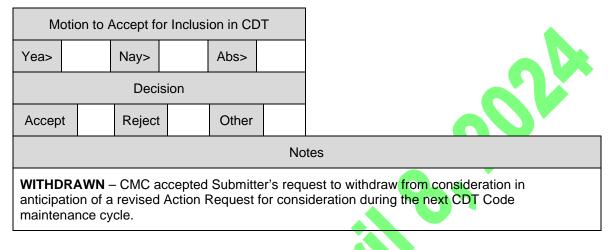
Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 22 of 38 Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 25c (as Submitted)

Dxxxx removal of an interim implant supported crown

(No descriptor)

Code Maintenance Committee Action:

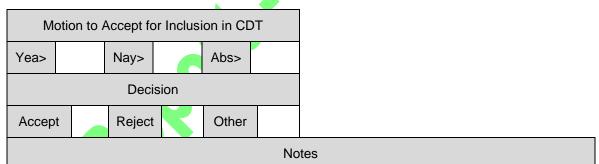


Inventory #: 25d (as Submitted)

Dxxxx fabrication of interim abutment supported crown

Fixture fabricated to enable further treatment or completion of diagnosis as necessary prior to final impression for the definitive prosthesis.

Code Maintenance Committee Action:



WITHDRAWN – CMC accepted Submitter's request to withdraw from consideration in anticipation of a revised Action Request for consideration during the next CDT Code maintenance cycle.



Final Report of March 2025 Code Maintenance Committee Meeting Decisions

Page 23 of 38

Part 2 - Substantive Actions from any interested individual or organization

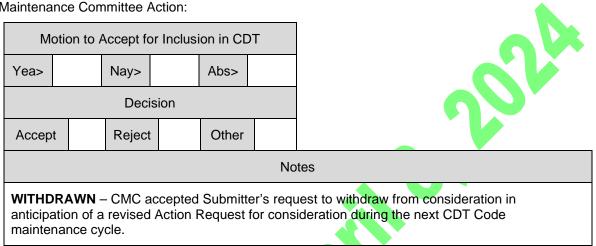
Inventory #: 25e (as Submitted)

placement of interim abutment supported crown Dxxxx

Fixture placed to enable further treatment or completion of diagnosis as necessary prior to final impression for the definitive prosthesis.

(No descriptor)

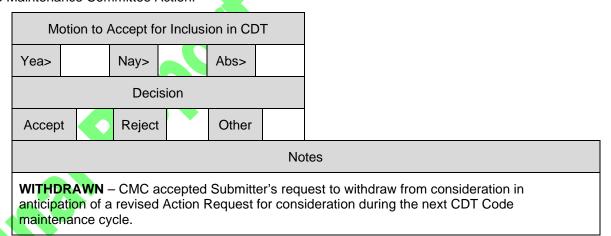
Code Maintenance Committee Action:



Inventory #: 25f (as Submitted)

Dxxxx removal of an interim abutment supported crown

(No descriptor)

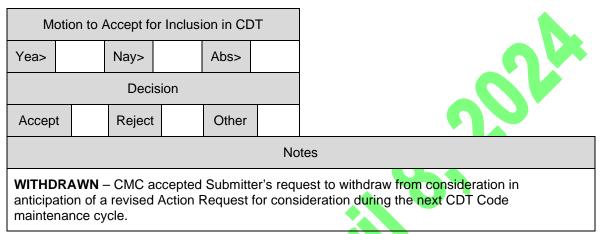


Inventory #: 26a (as Submitted)

Dxxxx fabrication of an interim implant/abutment supported fixed denture for edentulous arch

(No descriptor)

Code Maintenance Committee Action:

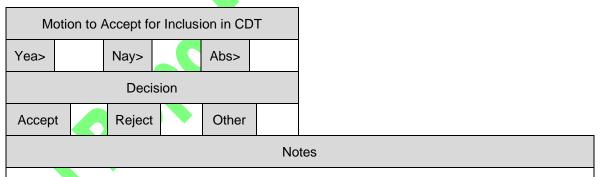


Inventory #: 26b (as Submitted)

Dxxxx removal of an interim implant/abutment supported fixed denture for edentulous arch

(No descriptor)

Code Maintenance Committee Action:



WITHDRAWN – CMC accepted Submitter's request to withdraw from consideration in anticipation of a revised Action Request for consideration during the next CDT Code maintenance cycle.

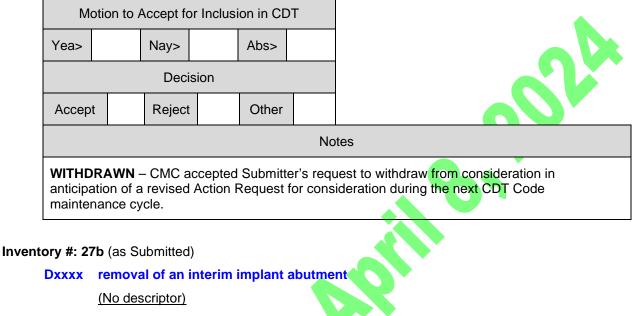
Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 25 of 38 Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 27a (as Submitted)

Dxxxx fabrication of an interim implant abutment

(No descriptor)

Code Maintenance Committee Action:



Code Maintenance Committee Action:

Moti	on to A	ccept fo	r Inclus	ion in CI	*						
Yea>		Nay>		Abs>							
		Deci	sion								
Accept		Reject		Other							
					No	tes					
anticipati	WITHDRAWN – CMC accepted Submitter's request to withdraw from consideration in anticipation of a revised Action Request for consideration during the next CDT Code maintenance cycle.										

#28a (as Submitted)

Dxxxx removal of interim implant body requiring bone removal or flap elevation: endosteal

Removal of implant body originally placed for a specific clinical purpose and limited period of time determined by the dentist.

Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 26 of 38

Part 2 – Substantive Actions from any interested individual or organization

#28b (as Submitted)

Dxxxx removal of interim implant body not requiring bone removal or flap elevation: endosteal

Removal of implant body originally placed for a specific clinical purpose and limited period of time determined by the dentist.

#29a (as Amended)

D6100 surgical removal of implant body requiring bone removal or flap elevation: endosteal implant

#29b (as Amended)

D6105 removal of implant body not requiring bone removal or flap elevation: endosteal implant

#29c (as Amended)

Dxxxx removal of implant body requiring bone removal: endosteal mini implant

(No descriptor)

#29d (as Amended)

Dxxxx removal of implant body not requiring bone removal: endosteal mini implant

(No descriptor)

#29e (as Submitted)

Dxxxx removal of implant body requiring bone removal or flap elevation: eposteal implant

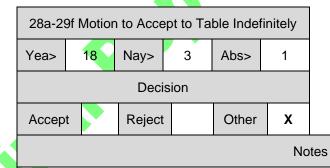
(No descriptor)

#29f (as Submitted)

Dxxxx removal of implant body requiring bone removal or flap elevation: transosteal implant

(No descriptor)

Code Maintenance Committee Action:



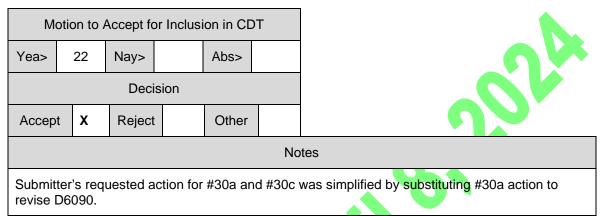
Tabled indefinitely with intent to form CMC working group. Details and invitations will be communicated through the CMC secretariat after the meeting with the scope and deliverables to be determined when the working group convenes.

Inventory #: 30a (as Substituted)

D6090 repair of implant/abutment supported prosthesis, by report

This procedure involves the repair or replacement of any part of the implant supported prosthesis.

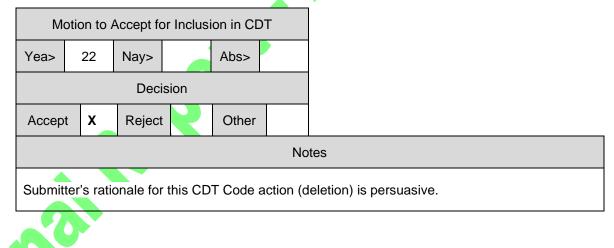
Code Maintenance Committee Action:



Inventory #: 30b (as Submitted)

D6095 repair implant abutment, by report

This procedure involves the repair or replacement of any part of the implant abutment.

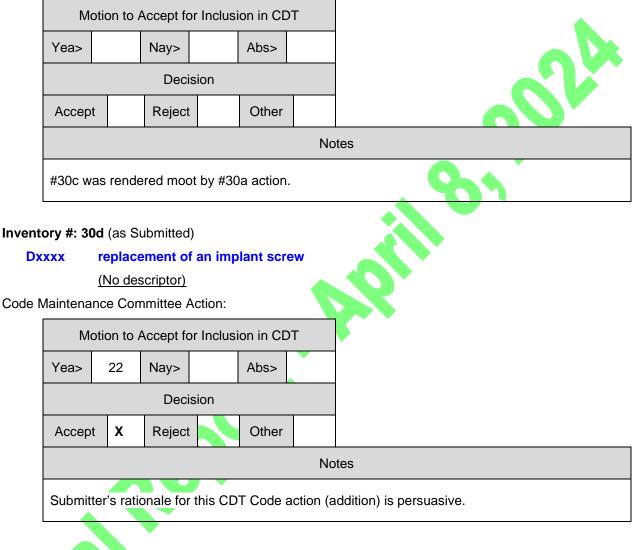


Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 28 of 38 Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 30c (as Submitted)

Dxxxx repair of implant/abutment supported prosthesis to restore form and function

(No descriptor)





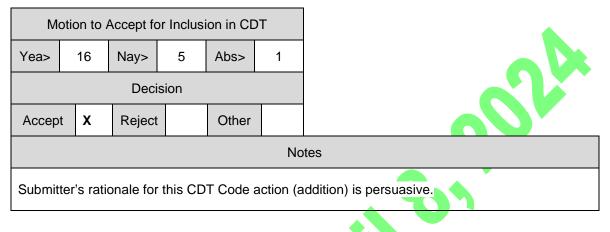
Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 29 of 38 Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 31 (as Amended)

Dxxxx removal of an indirect restoration on a natural tooth

Not to be used for a temporary or provisional restoration.

Code Maintenance Committee Action:

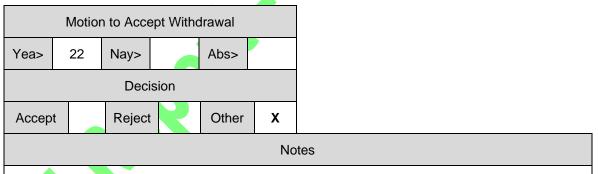


Inventory #: 32 (as Submitted)

Dxxxx air polishing therapy

Bacterial decontamination/reduction whereby pathogenic bacteria are targeted, disabled, and/or destroyed at a microscopic level to reduce bacterial load, minimize inflammatory response, and promote healing.

Code Maintenance Committee Action:



Submitter supported withdrawal during observer comment. A motion to withdraw from consideration was made by CMC member. CMC accepted the motion to withdraw from consideration.

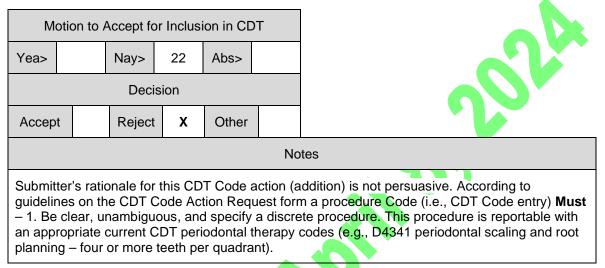


Inventory #: 33 (as Submitted)

Dxxxx ozone therapy

Bacterial decontamination/reduction whereby pathogenic bacteria are targeted, disabled, and/or destroyed at a microscopic level to reduce bacterial load, minimize inflammatory response, and promote healing.

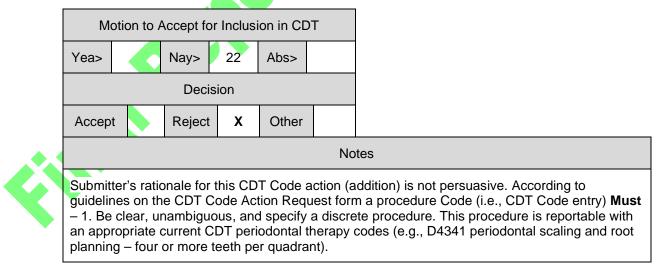
Code Maintenance Committee Action:



Inventory #: 34a (as Submitted)

Dxxxx photonic light energy therapy

Bacterial decontamination/reduction whereby pathogenic bacteria are targeted, disabled, and/or destroyed at a microscopic level to reduce bacterial load, minimize inflammatory response, and promote healing.



Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 31 of 38 Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 34b (as Amended)

Dxxxx photobiomodulation therapy

The use of low-dose light treatment with a laser, LED, or broad-band light, to alleviate pain or inflammation, modulate the immune response, and promote tissue healing or regeneration.

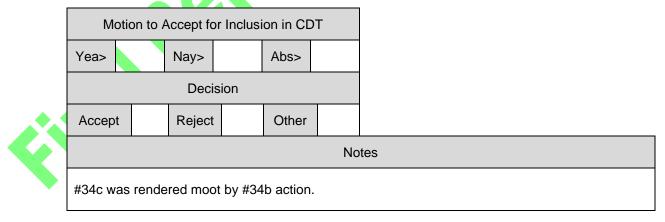
Code Maintenance Committee Action:

Мо	otion to /	Accept fo	r Inclusi	on in CD	Т					
Yea>	6	Nay>	15	Abs>	1					
		Decis	sion							
Accept	t	Reject	x	Other						
	Notes									
Submitter's rationale for this CDT Code action (addition) is not persuasive. According to guidelines on the CDT Code Action Request form a procedure Code (i.e., CDT Code entry) Must – 1. Be clear, unambiguous, and specify a discrete procedure. This procedure is reportable with current CDT code "D9130 temporomandibular joint dysfunction – non-invasive physical therapies" and a procedure Code Must – 2. Describe the procedure's action (e.g., fabrication; delivery; repair).										

Inventory #: 34c (as Submitted)

Dxxxx photobiomodulation therapy - each subsequent 15 minute increment

Additional 15 minute increment of Photobiomodulation Therapy at the same appointment after the first 15 minute administration of Photobiomodulation Therapy. (The use of low-dose light treatment with a laser, LED, or broad-band light, to alleviate pain or inflammation, modulate the immune response, and promote tissue healing or regeneration.



Inventory #: 35a (as Amended)

D6080 implant maintenance procedures when <u>a full arch fixed hybrid prosthesis is</u> prostheses are removed and reinserted, including cleansing of <u>prostheses</u> prostheses and abutments.

This procedure includes active debriding of the implant(s) and examination of all aspects of the implant system(s), including the occlusion and stability of the superstructure. The patient is also instructed in thorough daily cleansing of the implant(s). This is not a per implant code and is indicated for implant supported fixed prostheses.

Code Maintenance Committee Action:

M	otion	n to A	т							
Yea>	19	9	Nay>	3	Abs>					
	Decision									
Accep	t X	x		Q						
Notes										
Submit	Submitter's rationale for this CDT Code action (addition) is persuasive.									

Inventory #: 35b (as Amended)

Dxxxx implant maintenance procedures when a full arch fixed hybrid prosthesis is not removed, including cleansing of prosthesis and abutments.

This procedure includes active debriding of the implant(s) and prosthesis. The patient is also instructed in thorough daily cleansing of the implant(s).

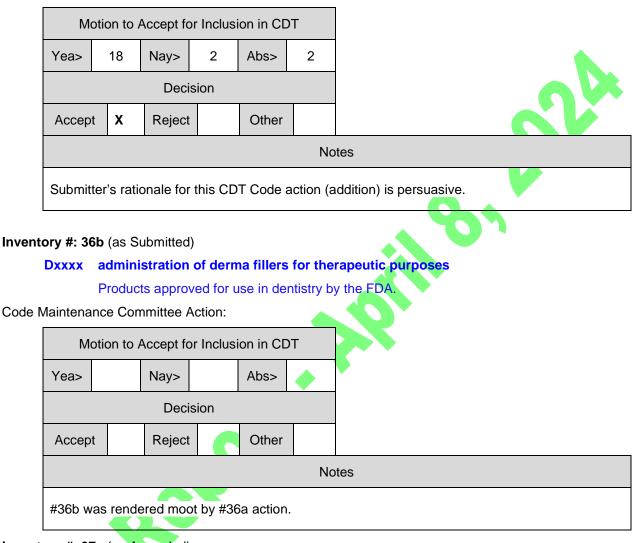
1											
	Mo	otion to A	Accept fo	r Inclusi	ion in CE						
	Yea>	18	Nay>	4	Abs>	0					
			Decis	sion							
	Accept		Reject		Other						
	Notes										
Ś	Submitter's rationale for this CDT Code action (addition) is persuasive.										

Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 33 of 38 Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 36a (as Amended)

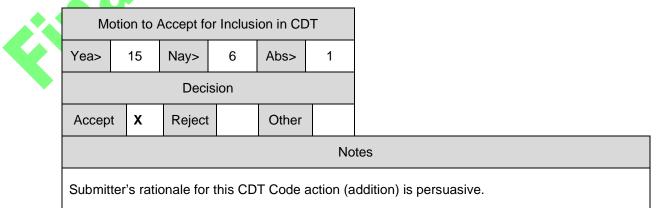
Dxxxx administration of dermal fillers

Code Maintenance Committee Action:



Inventory #: 37a (as Amended)

Dxxxx administration of neuromodulators



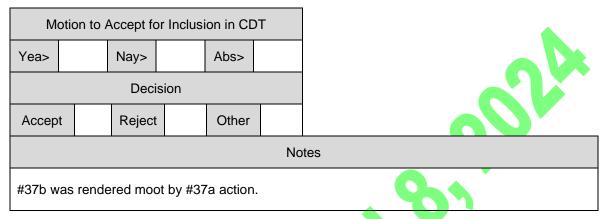
Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 34 of 38 Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 37b (as Submitted)

Dxxxx administration of neuromodulators for therapeutic purposes

Products approved for use in dentistry by the FDA.

Code Maintenance Committee Action:

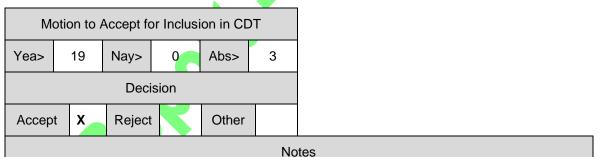


Inventory #: 38 (as Amended)

D6081 scaling and debridement <u>of a single implant</u> in the presence of <u>inflammation or</u> mucositis, <u>including inflammation</u>, <u>bleeding upon probing and increased pocket</u> <u>depthsof a single implant, including; includes</u> cleaning of the implant surfaces, without flap entry and closure

This procedure is not performed in conjunction with D1110, D4910 or D4346.

Code Maintenance Committee Action:



CMC amended the submitter's requested revision by revising the nomenclature and keeping the descriptor as it is currently written.



Final Report of March 2025 Code Maintenance Committee Meeting Decisions

Page 35 of 38

Part 2 – Substantive Actions from any interested individual or organization

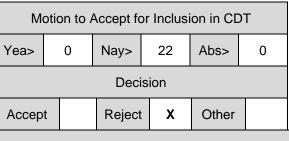
Inventory #: 39 (as Submitted)

Dxxxx periodic oral evaluation with medical screening- established patient

An evaluation performed on a patient of record to determine any changes in the patient's dental and medical health status since a previous comprehensive or periodic evaluation. This includes an oral cancer evaluation, periodontal screening where indicated, and may require interpretation of information acquired through additional diagnostic procedures. Screening tests for blood pressure pulse and diabetes with appropriate health education/consultation or referral, if necessary. Report additional diagnostic procedures separately.

Screening tests are appropriate for the most common systemic findings that may impact health and may create intraoperative during and postoperative complications after dental treatments related to medical health.

Code Maintenance Committee Action:



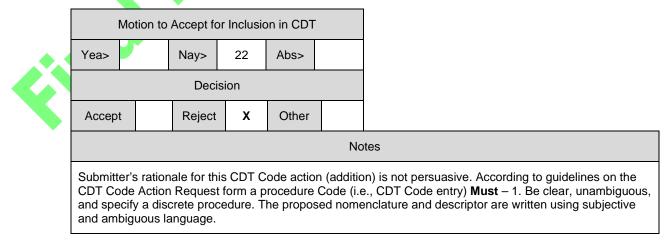
Notes

Submitter's rationale for this CDT Code action (addition) is not persuasive. According to guidelines on the CDT Code Action Request form a procedure Code (i.e., CDT Code entry) **Must** – 1. Be clear, unambiguous, and specify a discrete procedure. This procedure is reportable with the appropriate current CDT clinical oral evaluation code (i.e., D0120 periodic oral evaluation – established patient).

Inventory #: 40 (as Submitted)

Dxxxx inappropriate, concerning or threatening patient behavior intervention, by report

Response to and report of inappropriate comments or gestures, verbal threats or intimidation, intentional and unwanted physical touch, hate speech, bias, harassment, discrimination, threats to life, and physical or sexual violence through patient counseling, warning and/or dismissal.



Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 36 of 38

Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 41a (as Amended)

Dxxxx comprehensive orthodontic treatment with orthognathic surgery

Treatment of craniofacial syndromes or orthopedic discrepancies that require multiple phases of orthodontic treatment including monitoring growth and development between active phases of treatment.

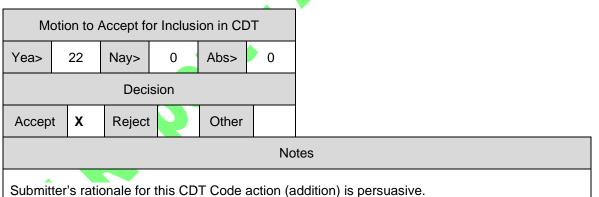
Code Maintenance Committee Action:

M	otion to	Accept fo	or Inclus	ion in CD						
Yea>	22	Nay>	0	Abs>	0					
		Deci	sion							
Accep	t X	Reject		Other						
	Notes									
Submit	Submitter's rationale for this CDT Code action (addition) is persuasive.									

Inventory #: 41b (as Amended)

Dxxxx periodic orthodontic treatment visit associated with orthognathic surgery

(No descriptor)





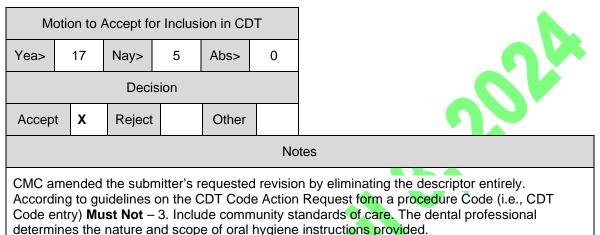
Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 37 of 38 Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 42 (as Amended)

D1330 oral hygiene instructions

This may include instructions for home care. Examples include tooth brushing technique, flossing, use of special oral hygiene aids.

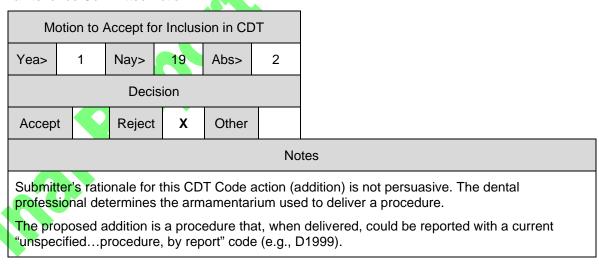
Code Maintenance Committee Action:



Inventory #: 43 (as Submitted)

Dxxxx alteration of tooth enamel by laser irradiation to inhibit demineralization for caries prevention

(No descriptor)



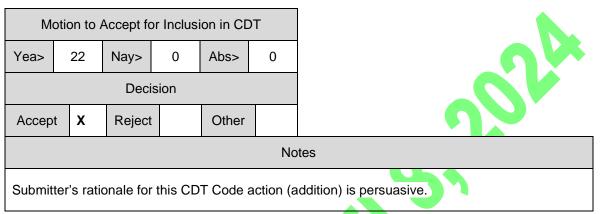
Final Report of March 2025 Code Maintenance Committee Meeting Decisions Page 38 of 38 Part 2 – Substantive Actions from any interested individual or organization

Inventory #: 44a (as Amended)

Dxxxx nerve dissection

Involves the separation or isolation of a nerve from surrounding tissues. Performed to gain access to and protect nerves during surgical procedures.

Code Maintenance Committee Action:

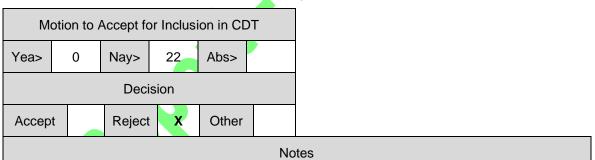


Inventory #: 44b (as Submitted)

D7241 removal of impacted tooth - completely bony, with unusual surgical complications

Most or all of crown covered by bone; unusually difficult or complicated due to factors such as nerve dissection required, separate closure of maxillary sinus required or aberrant tooth position.

Code Maintenance Committee Action:



Submitter's rationale for this CDT Code action (deletion) is not persuasive. According to guidelines on the CDT Code Action Request form a procedure Code (i.e., CDT Code entry) **Must** – 6. Enable documenting clinical and non-clinical services as required to create and maintain a robust patient dental record. This procedure is not obsolete and there is no current alternative CDT Code appropriate to document when performed.