Inventory #: 01 (as Amended)

**Dxxxx Immunization Counseling**

A review of a patient’s vaccine and medical history, and discussion of the vaccine benefits, risks, and consequences of not obtaining the vaccine. Counseling also includes a discussion of questions and concerns the patient, family, or caregiver may have and suggestions on where the patient can obtain the vaccine.

**Code Maintenance Committee Action:**

| Motion to Accept for Inclusion in CDT 2024 |
|-----------------|-----------|-----------|-----------|
| Yea> 20         | Nay> 2    | Abs> 0    |

**Decision**

Accept X, Reject Other

**Notes**

Submitter’s rationale for this CDT Code action (addition) is persuasive.

Inventory #: 02 (as Submitted)

**Dxxxx A Visual and Tactile, Extraoral and Intraoral Evaluation**

This procedure includes a comprehensive evaluation of the head, neck, oral cavity, and oropharynx, to identify signs and/or symptoms associated with oral or oropharyngeal cancer or other conditions, and the potential need for referral for diagnosis and treatment.

**Code Maintenance Committee Action:**

| Motion to Accept for Inclusion in CDT 2024 |
|-----------------|-----------|-----------|-----------|
| Yea> 0          | Nay> 22   | Abs> 0    |

**Decision**

Accept X, Reject 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** – 3. Be clear, unambiguous, and specify a discrete procedure. The proposed addition is duplicative. Identification of signs or symptoms of oral cancer are components of oral evaluation or assessment procedures that may be documented with current CDT codes (e.g., D0150 comprehensive oral evaluation – new or established patient; D0191 assessment of a patient).
Inventory #: 03 (as Amended)

**Dxxxx excisional biopsy of minor salivary glands**

(No Descriptor)

Code Maintenance Committee Action:

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<th>Motion to Accept for Inclusion in CDT 2024</th>
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Decision

Accept X Reject Other

Notes

Submitter’s rationale for this CDT Code action (addition) is persuasive.

Inventory #: 04a (as Amended)

**Dxxxx medical-dental integration evaluation prior to a planned medical/surgical procedure - new or established patient**

*Initial evaluation, diagnosis, and treatment planning for improved oral health status based on a referral request by a medical provider related to a medical condition that requires management with a planned medical/surgical procedure.*

Code Maintenance Committee Action:

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Decision

Accept | 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** – 3. Be clear, unambiguous, and specify a discrete procedure. The proposed addition is a procedure that would be reported with current codes – “D9311 consultation with a medical health care professional” and the appropriate oral evaluation code (e.g., D0150 comprehensive oral evaluation – new or established patient).
Inventory #: 04b (as Submitted)

**Dxxxx medical-dental integration re-evaluation during medical procedure/therapy - established patient**

Follow-up evaluation of prognosis, medication management, modification to treatment as per scheduled recall or as required based on referring provider or patient’s condition during ongoing therapy.

**Code Maintenance Committee Action:**

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**Decision**

Accept | 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** - 3. Be clear, unambiguous, and specify a discrete procedure. The proposed addition is a procedure that would be reported with current codes – “D9311 consultation with a medical health care professional” and the appropriate oral evaluation code (e.g., D0170 re-evaluation – post-operative office visit).

Inventory #: 05 (as Submitted)

**Dxxxx 3D printing of a 3D dental surface scan**

3D printing of a 3D dental surface scan to obtain a physical model.

**Code Maintenance Committee Action:**

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**Decision**

Accept | X | Reject | Other |

**Notes**

Submitter’s rationale for this CDT Code action (addition) is persuasive.
Inventory #: 06 (as Submitted)

**Dxxxx alteration of tooth enamel by laser irradiation, that is strongly absorbed by the mineral, to inhibit demineralization for caries prevention**

(No descriptor)

**Code Maintenance Committee Action:**

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**Decision**

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**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 Not** – 4. Cite a proprietary product or process in any manner.

The proposed addition is a procedure that, when delivered, could be reported with a current “unspecified…procedure, by report” code (e.g., D1999).

Inventory #: 07 (as Amended)

**Dxxxx application of hydroxyapatite regeneration medicament – per tooth**

Preparation of tooth surfaces and topical application of a scaffold to guide hydroxyapatite regeneration.

**Code Maintenance Committee Action:**

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**Decision**

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**Notes**

Submitter’s rationale for this CDT Code action (addition) is persuasive.
Inventory #: 08 (as Submitted)

Dxxxx permanent digital model storage
A scan is taken on a patient of record within a practice, then uploaded to our cloud and attached to the Practice and Patient record on file, where it will be stored for lifetime access to patients and partnered doctors.

Code Maintenance Committee Action:

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Decision
Accept | X | Reject | 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 Not** – 4. Cite a proprietary product or process in any manner.

The proposed addition is not a clinical procedure, and the action described is an administrative matter, part of patient dental record-keeping. The dentist determines the manner and location of patient record storage.

Inventory #: 09 (as Amended)

Dxxxx excavation of a tooth resulting in the determination of non-restorability
(No Descriptor)

Code Maintenance Committee Action:

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Decision
Accept | X | Reject | Other |

Notes
Submitter’s rationale for this CDT Code action (addition) is persuasive.
Inventory #s: 10a-10j (as Submitted / CMC consensus to vote on 10a-10j together)

#10a –
D2000-D2999 III. Restorative
Resin-Based Composite Restorations - Direct
Resin-based composite refers to a broad category of materials including but not limited to composites. May include bonded composite, light-cured composite, etc. Tooth preparation, acid etching, adhesives (including resin bonding agents), liners and bases, and curing are included as part of the restoration. Glass ionomers, when used as restorations, should be reported with these codes. If pins are used, they should be reported separately (see D2951).

#10b –
D2000-D2999 III. Restorative
Glass Ionomer Restorations – Direct
Glass ionomer refers to a category of glass polyalkenoate cements including glass ionomers, resin-modified glass ionomers, and glass carbomers. Tooth preparation, conditioning (including cavity conditioners, etches, or bonding agents), and curing are included as part of the restoration.

#10c –
Dxxxx glass ionomer – placement of a one surface restoration, anterior
(No descriptor)

#10d –
Dxxxx glass ionomer – placement of a two surface restoration, anterior
(No descriptor)

#10e –
Dxxxx glass ionomer – placement of a three surface restoration, anterior
(No descriptor)

#10f –
Dxxxx glass ionomer – placement of a four or more surface restoration or one involving the incisal angle (anterior)
Incisal angle to be defined as one of the angles formed by the junction of the incisal and the mesial or distal surface of an anterior tooth.

#10g –
Dxxxx glass ionomer – placement of a one surface restoration, posterior
Used to restore a carious lesion into the dentin or a deeply eroded area into the dentin.

#10h –
Dxxxx glass ionomer – placement of a two surface restoration, posterior
Used to restore a carious lesion into the dentin or a deeply eroded area into the dentin.

#10i –
Dxxxx glass ionomer – placement of a three surface restoration, posterior
Used to restore a carious lesion into the dentin or a deeply eroded area into the dentin.
#10j –

**Dxxxx glass ionomer – placement of a four or more surface restoration, posterior**

Used to restore a carious lesion into the dentin or a deeply eroded area into the dentin.

**Code Maintenance Committee Action:**

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**Decision**

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**Notes**

Submitter’s rationale for these CDT Code actions (revisions and additions) is not persuasive. According to guidelines on the CDT Code Action Request form a procedure Code (i.e., CDT Code entry) **Must** – 3. Be clear, unambiguous, and specify a discrete procedure. The proposed addition is a procedure that would be reported with the appropriate current codes for anterior or posterior direct resin-composite restorations (e.g., “D2330 resin-based composite – one surface, anterior”; “D2391 resin-based composite – one surface, posterior”; et al.).

**Inventory #: 11 (as Submitted)**

**D0191 assessment of a patient**

A limited clinical inspection that is performed to identify possible signs of oral or systemic disease (including an oral cancer examination), malformation, or injury and the potential need for referral for diagnosis and treatment.

**Code Maintenance Committee Action:**

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**Decision**

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**Notes**

Submitter’s rationale for this CDT Code action (revision) is not persuasive. According to guidelines on the CDT Code Action Request form a procedure Code (i.e., CDT Code entry) **Must** – 3. Be clear, unambiguous, and specify a discrete procedure. The requested change creates a redundancy as oral cancer is a condition is included in current descriptor – “…identify possible signs of oral or systemic disease.….”
Inventory #: #12 (as Submitted)
D2335  resin-based composite – four or more surfaces or involving incisal angle (anterior)

Incisal Angle to be defined as one of the angles formed by the junction of the incisal and the mesial or distal surface of an anterior tooth.

Code Maintenance Committee Action:

| Motion to Accept for Inclusion in CDT 2024 |
|-----|-----|-----|-----|
| Yea> | 22  | Nay> | 0   |  Abs> | 0   |

Decision
Accept X  Reject  Other

Notes
Submitter’s rationale for this CDT Code action (revision) is persuasive.

Inventory #: #13 (as Submitted)
D4910  periodontal maintenance therapy for preserving the health of the periodontium

This procedure is instituted following periodontal therapy and does not involve delivery of other procedures reported with their own discrete codes, including but not limited to therapeutic (e.g., SRP) and diagnostic (e.g., oral evaluation), continues at varying intervals, determined by the clinical evaluation of the dentist, for the life of the dentition or any implant replacements. It includes removal of the bacterial plaque and calculus from supragingival and subgingival regions, site specific scaling and root planing where indicated, and polishing the teeth. If new or recurring periodontal disease appears, additional diagnostic and treatment procedures must be considered.

Code Maintenance Committee Action:

| Motion to Accept for Inclusion in CDT 2024 |
|-----|-----|-----|-----|
| Yea> | 0   | Nay> | 0   |  Abs> | 0   |

Decision
Accept  Reject  Other X

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.
Inventory #: 14 (as Submitted)

**Dxxxx application of full mouth periodontal disease medication directly into sulci and periodontal pockets**

FDA approved, for destruction of pathological bacteria

**Code Maintenance Committee Action:**

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**Decision**

Accept [X] Reject | 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 Not** – 4. Cite a proprietary product or process in any manner.

Inventory #: 15 (as Submitted)

**D5876 add metal substructure to acrylic full denture (per arch)**

Use of metal substructure in removable complete dentures without a framework.

**Code Maintenance Committee Action:**

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**Decision**

Accept [X] Reject | Other |

**Notes**

Submitter’s rationale for this CDT Code action (revision) is persuasive.

Inventory #: 16 (as Amended)

**Dxxxx accessing and retorquing loose implant screw - per screw**

(No Descriptor)

**Code Maintenance Committee Action:**

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**Decision**

Accept [X] Reject | Other |

**Notes**

Submitter’s rationale for this CDT Code action (addition) is persuasive.
Inventory #: 17 (as Submitted)

**Dxxxx surgical placement of accessory implants**

Accessory implant used to secure a final prosthetic and placed through the prosthetic. May be one of several implants used in an individual tooth space.

**Code Maintenance Committee Action:**

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**Decision**

Accept [X] Reject 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** – 3. Be clear, unambiguous, and specify a discrete procedure. The procedure would be documented with current CDT code “D6013 surgical placement of mini implant”

Inventory #: 18 (as Submitted)

**D6080 implant maintenance procedures, when with or without the removal of the prostheses, are removed and reinserted, including cleansing of prostheses and abutments and reinsertion of the prosthesis when removed**

This procedure includes a prophylaxis to provide 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:**

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**Decision**

Accept [X] Reject Other

**Notes**

Submitter’s rationale for this CDT Code action (revision) is not persuasive. According to guidelines on the CDT Code Action Request form a procedure Code (i.e., CDT Code entry) **Must** – 3. Be clear, unambiguous, and specify a discrete procedure. The requested change combines two different and distinct procedures that would be reported with a single code – one involving removal and reinsertion of the prosthesis (current) and a second (added) that does not involve removal of the prosthesis.
Inventory #: 19 (as Submitted)

D6081  scaling and debridement in the presence of inflammation or mucositis of a single implant, including 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:

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Decision:

Accept  X  Reject  Other

Notes:

Tied vote. Acceptance requires a simple majority of “Yea” votes. Submitter’s rationale for this CDT Code action (revision) was not persuasive to a sufficient number of CMC member organizations.

Inventory #: 20 (as Amended)

Dxxxx  indexing for osteotomy using dynamic robotic assisted or dynamic navigation

A guide is stabilized to the teeth and/or the bone to allow for virtual guidance of osteotomy.

Code Maintenance Committee Action:

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Decision:

Accept  X  Reject  Other

Notes:

Submitter’s rationale for this CDT Code action (addition) is persuasive.

Inventory #: 21 (as Amended)

Dxxxx  fabrication of a custom removable clear plastic temporary aesthetic appliance

(No descriptor)

Code Maintenance Committee Action:

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Decision:

Accept  X  Reject  Other

Notes:

Submitter’s rationale for this CDT Code action (addition) is persuasive.
Inventory #: 22 (as Amended)

Dxxxx placement of a custom removable clear plastic temporary aesthetic appliance
(No descriptor)

Code Maintenance Committee Action:

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Decision

Accept | X | Reject | Other |

Notes

Submitter’s rationale for this CDT Code action (addition) is persuasive.

Inventory #: 23 (as Amended)

Dxxxx band stabilization – per tooth

A band, typically cemented around a molar tooth after a multi-surface restoration is placed, to add support and resistance to fracture until a patient is ready for the full cuspal coverage restoration.

Code Maintenance Committee Action:

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Decision

Accept | X | Reject | Other |

Notes

Submitter’s rationale for this CDT Code action (addition) is persuasive.
Inventory #: 24 (as Submitted)

Dxxxx orthodontic treatment of the transitional, adolescent, or adult dentition

Ongoing orthodontic treatment.

Code Maintenance Committee Action:

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Decision

Accept | 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** – 7. Include or infer a criterion or criteria for claim adjudication or reimbursement. The CMC considers the requested action is to resolve a claim adjudication and reimbursement issue, not a CDT Code gap issue.

Inventory #: 25 (as Submitted)

Dxxxx removal of fixed orthodontic retainer

Includes removal of bonding material, smoothing and polishing of enamel surfaces.

Code Maintenance Committee Action:

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Decision

Accept | 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** – 3. Be clear, unambiguous, and specify a discrete procedure. This procedure is reportable with a current CDT code (e.g., “D8695 removal of fixed orthodontic appliances for reasons other than completion of treatment”).
Inventory #: 26 (as Amended)

Dxxxx administration of home sleep apnea test

Sleep apnea test, for patients who are at risk for sleep related breathing disorders and appropriate candidates, as allowed by applicable laws. Also to help the dentist in defining the optimal position of the mandible.

Code Maintenance Committee Action:

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Decision

Accept X Reject Other

Notes

Submitter’s rationale for this CDT Code action (addition) is persuasive.

Inventory #: 27 (as Submitted)

Dxxxx dental sleep medicine evaluation

Comprehensive examination that includes visualization and descriptive assessment of the craniofacial complex including the upper airway to identify key physical features associated with sleep related breathing disorders.

Code Maintenance Committee Action:

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Decision

Accept 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

– 3. Be clear, unambiguous, and specify a discrete procedure. This procedure is reportable with an appropriate current CDT evaluation code (e.g., "D0160 detailed and extensive oral evaluation – problem focused, by report").
Inventory #: 28 (as Amended)

**Dxxxx screening for sleep related breathing disorders**

Screening activities, performed alone or in conjunction with another evaluation, to identify signs and symptoms of sleep-related breathing disorders.

Code Maintenance Committee Action:

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Decision: Accept

Notes: Submitter’s rationale for this CDT Code action (addition) is persuasive.

Inventory #: 29 (as Amended)

**Dxxxx oral appliance therapy (OAT) titration visit**

Post-delivery visit for titration of a mandibular advancement device and to subsequently evaluate the patient’s response to treatment, integrity of the device, and management of side effects.

Code Maintenance Committee Action:

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Decision: Accept

Notes: Submitter’s rationale for this CDT Code action (addition) is persuasive.

Inventory #: 30 (as Amended)

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

Device for use immediately after removing a mandibular advancement device to aid in relieving muscle/jaw pain and occlusal changes.

Code Maintenance Committee Action:

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Decision: Accept

Notes: Submitter’s rationale for this CDT Code action (addition) is persuasive.
Providing oral care support(s) – enabling people to obtain oral care needs either with providing oral care support(s) by preforming oral care (removal of soft plaque and debris), or by recommending and tracking people’s oral care routines, including power toothbrushes, power toothbrushes with pressure sensors, water flossing, interdental cleaning, oral hygiene coaching supports, oral care trackers to support the unique oral care needs of individuals with gingival and other oral conditions that may harm oral and/or overall health without support(s).

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</table>

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** – 3. Be clear, unambiguous, and specify a discrete procedure. This procedure is reportable with an appropriate current CDT code (e.g., “D1330 oral hygiene instructions”; “D9997 dental case management – patients with special health care needs”).