SCHEDULE OF IN-PLAN ORAL HEALTH BENEFITS
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These benefits are included in the capitated benefit and are the responsibility of the Managed Care Health Plan to provide or arrange. The following services will be paid for by the Managed Care Health Plans: (1) Services to diagnose and treat an Oral Health Condition in either an inpatient or an outpatient hospital setting, or (2) Services to diagnose and treat an Emergency Oral Health Condition in a hospital emergency department and (3) Medically necessary oral surgery services as described below.

Note: The State reserves the right to update this list periodically as HCPC Codes are revised.

OTHER SURGICAL PROCEDURES

D7260  Oroantral fistula closure
D7261  Primary closure of sinus perforation
D7270  Tooth reimplantation and/or stabilization of accidentally or evulsed displaced tooth and/or alveolus
D7285  Biopsy of oral tissue – hard (bone, tooth)
D7286  Biopsy of oral tissue - soft
D7287  Exfoliative cytological sample collection
D7288  Brush biopsy- transepithelial sample collection
D7291  Transseptal fiberotomy/supra crestal fiberotomy, by report
   Pertinent documentation to evaluate medical appropriateness should be included when this code is reported

SURGICAL EXCISION OF REACTIVE INFLAMMATORY LESIONS (SCAR TISSUE OR LOCALIZED CONGENIAL LESIONS)

D7410  Excision of benign lesion diameter up to 1.25 cm
D7411  Excision of benign lesion diameter greater than 1.25 cm
D7412  Excision of benign lesion, complicated
D7413  Excision of malignant lesion up to 1.25 cm
D7414  Excision of malignant lesion greater than 1.25 cm
D7415  Excision of malignant lesion, complicated
D7440  Excision of malignant tumor - lesion diameter up to 1.25 cm
D7441  Excision of malignant tumor - lesion diameter greater than 1.25 cm

RI Department of Human Services,
Center for Child and Family Health
D7450  Removal of benign odontogenic cyst or tumor-lesion diameter up to 1.25 cm
D7451  Removal of benign odontogenic cyst or tumor-lesion diameter greater than 1.25 cm
D7460  Removal of nonodontogenic cyst or tumor-lesion diameter up to 1.25 cm
D7461  Removal of nonodontogenic cyst or tumor-lesion diameter greater than 1.25 cm
D7465  Destruction of lesion(s) by physical or chemical methods, by report
        Pertinent documentation to evaluate medical appropriateness should be included when this code is reported
D7471  Removal of lateral exostosis –(maxilla or mandible)
D7472  Removal of torus palatinus
D7473  Removal of torus mandibularis
D7485  Surgical reduction of osseous tuberosity
D7490  Radical resection of maxilla or mandible

SURGICAL INCISION
D7510  Incision and drainage of abscess - intraoral soft tissue
D7511  Incision and drainage of abscess-intraoral soft tissue-complicated
        (include drainage of multiple fascial spaces)
D7520  Incision and drainage of abscess-extraoral soft tissue
D7521  Incision and drainage of abscess- extraoral soft tissue- complicated
        (includes drainage of multiple fascial spaces)
D7530  Removal of foreign body from mucosa, skin, or
        subcutaneous alveolar tissue
D7540  Removal of reaction-producing foreign bodies-musculoskeletal system
D7550  Partial ostectomy/sequestrectomy for removal of non-vital bone
D7560  Maxillary sinusotony for removal of tooth fragment or foreign body

TREATMENT OF FRACTURES – SIMPLE
D7610  Maxilla - open reduction (teeth immobilized, if present)
D7620  Maxilla - closed reduction (teeth immobilized, if present)
D7630  Mandible - open reduction (teeth immobilized, if present)
D7640  Mandible - closed reduction (teeth immobilized, if present)
D7650  Malar and/or zygomatic arch - open reduction
D7660  Malar and/or zygomatic arch - closed reduction

RI Department of Human Services,
Center for Child and Family Health
D7670  Alveolus –closed reduction, may include stabilization of teeth
D7671  Alveolus-open reduction, may include stabilization of teeth
D7680  Facial bones - complicated reduction with fixation and multiple surgical approaches

TREATMENT OF FRACTURES - COMPOUND
D7710  Maxilla - open reduction
D7720  Maxilla - closed
D7730  Mandible - open reduction
D7740  Mandible - closed reduction
D7750  Malar and/or zygomatic arch - open reduction
D7760  Malar and/or zygomatic arch - closed reduction
D7770  Alveolus - open reduction stabilization of teeth
D7771  Alveolus, closed reduction stabilization of teeth
D7780  Facial bones - complicated reduction with fixation and multiple surgical approaches

REDUCTION OF DISLOCATION AND MANAGEMENT OF OTHER TEMPOROMANDIBULAR JOINT DYSFUNCTIONS
Procedures which are an integral part of a primary procedure should not be reported separately.

D7810  Open reduction of dislocation
D7820  Closed reduction of dislocation
D7830  Manipulation under anesthesia
D7840  Condylectomy
D7850  Surgical discectomy, with/without implant
D7852  Disc repair
D7854  Synovectomy
D7856  Myotomy
D7858  Joint reconstruction
D7860  Arthrotomy
D7865  Arthroplasty
D7870  Arthrocentesis
D7872  Arthroscopy - diagnosis, with or without biopsy

RI Department of Human Services,
Center for Child and Family Health
D7873  Arthroscopy – surgical: lavage and lysis of adhesions
D7874  Arthroscopy – surgical: disc repositioning and stabilization
D7875  Arthroscopy – surgical: synovectomy
D7876  Arthroscopy – surgical: discectomy
D7877  Arthroscopy – surgical: debridement
D7880  Occlusal orthotic device, by report
D7899  Unspecified TMD therapy, by report
This code should be used only if a more specific code is unavailable.

REPAIR OF TRAUMATIC WOUNDS

Excludes closure of surgical incisions.

D7910  Suture of recent small wounds up to 5 cm

COMPLICATED SUTURING (RECONSTRUCTION REQUIRING DELICATE HANDLING OF TISSUES AND WIDE UNDERMINING FOR METICULOUS CLOSURE)

Excludes closure of surgical incisions.

D7911  Complicated suture - up to 5 cm
D7912  Complicated suture - greater than 5 cm

OTHER REPAIR PROCEDURES

D7920  Skin graft (identify defect covered, location and type of graft)
D7940  Osteoplasty - for orthognathic deformities
D7941  Osteotomy – mandibular rami
D7943  Osteotomy – mandibular rami with bone graft; includes obtaining the graft
D7944  Osteotomy - segmented or subapical - per sextant or quadrant
D7945  Osteotomy - body of mandible
D7946  LeFort I (maxilla - total)
D7947  LeFort I (maxilla - segmented)
D7948  LeFort II or LeFort III (osteoplasty of facial bones for midface hypoplasia or retrusion)-without bone graft
D7949  LeFort II or LeFort III - with bone graft
D7950  Osseous, osteoperiosteal, or cartilage graft of the mandible or facial bones - autogenous or nonautogenous, by report

D7951  Sinus augmentation with bone or bone substitutes

D7955  Repair of maxillofacial soft and hard tissue defect

D7960  Frenulectomy (frenectomy or frenotomy) - separate procedure

D7963  Frenuloplasty

D7972  Surgical reduction of fibrous tuberosity

D7980  Sialolithotomy

D7981  Excision of salivary gland, by report
Pertinent documentation to evaluate medical appropriateness should be included when this code is reported

D7982  Sialodochoplasty

D7983  Closure of salivary fistula

D7990  Emergency tracheotomy

D7991  Coronoidectomy

D7995  Synthetic graft, mandible or facial bones, by report
Pertinent documentation to evaluate medical appropriateness should be included when this code is reported

D7996  Implant, mandible for augmentation purposes (excluding alveolar ridge), by report
Pertinent documentation to evaluate medical appropriateness should be included when this code is reported

D7997  Appliance removal (not by a dentist who placed appliance), includes removal of archbar

D7998  Intraoral placement of a fixation device not in conjunction with a fracture

D7999  Unspecified oral surgery procedure, by report
This code should be used only if a more specific code is unavailable.