

PUBLIC NOTICE

Pursuant to 42 C.F.R. § 447.205, the Georgia Department of Community Health is required to give public notice of any significant proposed change in its methods and standards for setting payment rates for services.

Increase Reimbursement Rates for Select Dental Codes STATE PLAN AMENDMENT (SPA)

Pursuant to House Bill 68 passed in the 2025 legislative session and pending approval by the Centers for Medicare and Medicaid Services (CMS), the Department of Community Health (DCH) proposes to increase the reimbursement rate for Select Dental Codes effective July 1, 2025

Program	State Funds	Federal Funds	Total
Aged, Blind, Disabled (ABD)	\$771,385	\$1,518,271	\$2,289,656
Low Income Medicaid (LIM)	\$803,526	\$1,581,533	\$2,385,059
PeachCare for Kids (PCK)	\$22,470	\$72,933	\$95,403

CPT Codes	Primary Care	Current Rate	New Rate	Category of Service
D0120	Periodic Oral Evaluation-established patient	\$25.30	\$25.93	Health Check & Adults
D0140	Limited Oral Evaluation-problem focused	\$38.29	\$39.25	Health Check & Adults
D0150	Comprehensive Oral Evaluation-new or established patient	\$43.70	\$44.79	Health Check & Adults
D0180	Comprehensive Periodontal Evaluation	\$39.33	\$40.31	Pregnant Women Only
D0210	Intraoral- Comprehensive series of radiographic images	\$72.45	\$74.26	Health Check & Adults
D0220	Intraoral-periapical first radiographic image	\$16.00	\$16.40	Health Check & Adults
D0230	Intraoral periapical, each additional radiographic image	\$11.50	\$11.79	Health Check & Adults
D0240	Intraoral - Occlusal radiographic image	\$19.66	\$20.15	Health Check & Adults
D0270	Bitewing, single radiographic image	\$15.50	\$15.89	Health Check & Adults
D0272	Bitewing, two radiographic images	\$25.84	\$26.49	Health Check & Adults
D0274	Bitewing, four radiographic images	\$39.38	\$40.36	Health Check & Adults
D0330	Panoramic radiographic image	\$63.25	\$64.83	Health Check & Adults
D1110	Prophylaxis-adult	\$35.64	\$36.53	Health Check & Adults
D1120	Prophylaxis-child	\$35.64	\$36.53	Health Check & Adults

CPT Codes	Primary Care	Current Rate	New Rate	Category of Service
D1206	Topical fluoride varnish	\$19.54	\$20.03	Health Check & Adults
D1208	Topical application of fluoride	\$19.54	\$20.03	Health Check & Adults
D1351	Sealant-per tooth	\$31.05	\$31.83	Health Check & Adults
D1354	Application of Carie arresting medicament – per tooth	\$15.00	\$15.38	Health Check & Adults
D1355	Caries Preventive Medicament Application - per tooth	\$10.70	\$10.97	Health Check & Adults
D1510	Space maintainer-fixed unilateral Space maintainer-fixed unilateral - per quadrant	\$180.09	\$184.59	Health Check & Adults
D1516	Space maintainer- fixed bilateral, maxillary	\$238.05	\$244.00	Health Check & Adults
D1517	Space maintainer-fixed bilateral, mandibular	\$238.05	\$244.00	Health Check & Adults
D1526	Space maintainer-removable bilateral, maxillary	\$210.76	\$216.03	Health Check & Adults
D1527	Space maintainer-removable bilateral, mandibular	\$210.76	\$216.03	Health Check & Adults
D1551	Re-cementation/Re-bond of bilateral space maintainer- Maxillary	\$45.54	\$46.68	Health Check & Adults
D1552	Re-cementation/Re-bond of bilateral space maintainer- Mandibular	\$45.54	\$46.68	Health Check & Adults
D1553	Re-cementation/Re-bond of unilateral space maintainer per Quadrant	\$27.98	\$28.68	Health Check & Adults
D2140	Amalgam-one surface	\$65.91	\$67.56	Health Check Only
D2150	Amalgam-two surfaces	\$84.91	\$87.03	Health Check Only
D2160	Amalgam-three surfaces	\$91.25	\$93.53	Health Check Only
D2161	Amalgam 4+, primary and permanent	\$98.08	\$100.53	Health Check & Adults
D2330	Resin-based composite- one surface anterior	\$81.06	\$83.09	Health Check & Adults
D2331	Resin-based composite- two surfaces anterior	\$103.39	\$105.97	Health Check & Adults
D2332	Resin based composite-three surfaces, anterior	\$125.71	\$128.85	Health Check & Adults
D2335	Resin-based comp, 4+ anterior	\$149.20	\$152.93	Health Check & Adults
D2391	Resin based composite-once surface, posterior	\$89.70	\$91.94	Health Check & Adults
D2392	Resin based composite-two surfaces, posterior	\$105.80	\$108.45	Health Check & Adults
D2393	Resin based composite-three surfaces, posterior	\$130.41	\$133.67	Health Check & Adults
D2394	Resin based composite-four or more surfaces, posterior	\$143.45	\$147.04	Health Check & Adults

CPT Codes	Primary Care	Current Rate	New Rate	Category of Service
D2920	Re-cement Crowns	\$41.40	\$42.44	Health Check & Adults
D2928	Prefabricated Porcelain Ceramic crown	\$147.28	\$150.96	Health Check & Adults
D2930	Prefabricated stainless steel crown primary tooth	\$176.15	\$180.55	Health Check & Adults
D2931	Prefabricated stainless steel crown permanent tooth	\$184.45	\$189.06	Health Check & Adults
D2932	Prefabricated resin crown-composite Crown	\$176.98	\$181.40	Health Check & Adults
D2934	Resin based composite-four or more surfaces, posterior	\$143.86	\$147.46	Health Check & Adults
D2940	Placement of interim direct restoration	\$54.85	\$56.22	Health Check & Adults
D2951	Pin Retention per tooth in addition to restoration	\$28.98	\$29.70	Health Check & Adults
D2954	Prefabricated post and core in addition to crown	\$54.22	\$55.58	Health Check & Adults
D3220	Therapeutic pulpotomy (excluding final Restoration)	\$102.21	\$104.77	Health Check & Adults
D3221	Pulpal Debridement, Primary and Permanent Teeth	\$91.08	\$93.36	Health Check & Adults
D3310	Anterior (excluding final restoration)	\$77.64	\$79.58	Health Check & Adults
D3320	Bicuspid (excluding final restoration)	\$463.68	\$475.27	Health Check & Adults
D3410	Apicoectomy/peri radicular surgery anterior	\$229.81	\$235.56	Health Check & Adults
D4210	Gingivectomy or Gingivoplasty-four or more contiguous teeth or bounded teeth spaces per quadrant	\$157.38	\$161.31	Health Check & Adults
D4240	Gingival flap procedure, including root planning-four or more contiguous teeth or bounded teeth spaces, per quadrant.	\$129.37	\$132.60	Health Check & Adults
D4241	Gingival flap, including root planning 1-3 teeth	\$97.03	\$99.46	Pregnant Women Only
D4260	Osseous Surgery (including flap entry and closure)-four or more contiguous teeth or bounded teeth spaces, per quadrant	\$341.00	\$349.53	Health Check & Adults
D4270	Pedicle soft tissue graft procedure (*always use appropriate coding scheme indicated in Chapter 900)	\$272.14	\$278.94	Health Check & Adults

CPT Codes	Primary Care	Current Rate	New Rate	Category of Service
D4341	Periodontal Scaling and Root Planning four or more contiguous teeth or bounded teeth spaces per quadrant	\$140.76	\$144.28	Health Check & Adults
D4342	Periodontal scaling 1-3 teeth	\$105.57	\$108.21	Pregnant Women Only
D4910	Periodontal Maintenance	\$42.20	\$43.26	Pregnant Women Only
D5110	Complete denture maxillary	\$673.78	\$690.62	Health Check & Adults
D5120	Complete denture mandibular	\$673.78	\$690.62	Health Check & Adults
D5130	Immediate denture maxillary	\$554.12	\$567.97	Health Check & Adults
D5140	Immediate denture mandibular	\$554.12	\$567.97	Health Check & Adults
D5211	Maxillary Partial-Resin Base (Including any Conventional Clasps, Rests and Teeth)	\$276.64	\$283.56	Health Check & Adults
D5212	Mandibular Partial-Resin Base Rests and Teeth)	\$661.36	\$677.89	Health Check & Adults
D5410	Adjust Complete Denture-maxillary	\$23.77	\$24.36	Health Check & Adults
D5411	Adjust complete denture-mandibular	\$23.77	\$24.36	Health Check & Adults
D5421	Adjust Partial Denture-maxillary	\$11.76	\$12.05	Health Check & Adults
D5422	Adjust - Partial Denture-mandibular	\$11.76	\$12.05	Health Check & Adults
D5511	Repair broken complete denture base, mandibular	\$73.48	\$75.32	Health Check & Adults
D5512	Repair broken complete denture base, maxillary	\$73.48	\$75.32	Health Check & Adults
D5640	Replace broken teeth – per tooth	\$92.17	\$94.47	Health Check & Adults
D5650	Add tooth to existing partial denture	\$92.17	\$94.47	Health Check & Adults
D5660	Adding clasp to existing partial denture	\$110.74	\$113.51	Health Check & Adults
D5750	Reline complete maxillary denture (laboratory)	\$156.56	\$160.47	Health Check & Adults
D5751	Reline complete mandibular denture (laboratory)	\$156.56	\$160.47	Health Check & Adults
D5850	Tissue Conditioning/ maxillary	\$47.54	\$48.73	Health Check & Adults
D5851	Tissue Conditioning/ mandibular	\$47.54	\$48.73	Health Check & Adults
D6240	Pontic, Porcelain fused to high noble metal	\$556.07	\$569.97	Health Check & Adults
D6750	Retainer Crown, Porcelain fused to high noble metal	\$581.17	\$595.70	Health Check & Adults
D7111	Extraction, coronal remnants – deciduous tooth	\$53.03	\$54.36	Health Check Only
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	\$80.78	\$82.80	Health Check & Adults

CPT Codes	Primary Care	Current Rate	New Rate	Category of Service
D7210	Surgical removal of erupted tooth requiring elevation of mucoperiosteal flap and removal of bone and/or section of tooth (Includes cutting of gingival and bone and/or tooth)	\$149.77	\$153.51	Health Check & Adults
D7220	Removal of impacting tooth – soft tissue. Tooth is embedded in soft tissue.	\$160.42	\$164.43	Health Check & Adults
D7230	Removal of impacted tooth- partially bony	\$214.24	\$219.60	Health Check & Adults
D7240	Removal of impacted tooth – completely bony. Crown of tooth is completely covered by bone.	\$251.50	\$257.79	Health Check & Adults
D7250	Surgical removal of residual tooth roots (cutting procedure)	\$135.58	\$138.97	Health Check & Adults
D7260	Oroantral fistula closure	\$307.45	\$315.14	Health Check & Adults
D7270	Tooth re-implantation and/or stabilization of accidentally evulsed or displaced tooth	\$276.34	\$283.25	Health Check & Adults
D7280	Surgical access of an unerupted tooth	\$256.68	\$263.10	Health Check & Adult
D7286	Biopsy of oral tissue-soft	\$219.42	\$224.91	Health Check, & Adult
D7310	Alveoplasty in conjunction with extractions – four or more teeth or tooth spaces, per quadrant	\$150.07	\$153.82	Health Check & Adults
D7311	Alveoplasty in conjunction with extractions - One to three teeth or tooth spaces, per quadrant	\$54.22	\$55.58	Health Check & Adults
D7320	Alveoplasty not in conjunction with extractions – four or teeth or tooth spaces, per quad	\$669.64	\$686.38	Health Check & Adults
D7321	Alveoplasty not in conjunction with extractions, per tooth space(s)	\$63.86	\$65.46	Health Check & Adults
D7450	Removal of benign odontogenic cyst or tumor lesion diameter up to 1.25cm	\$477.13	\$489.06	Health Check & Adults
D7451	Removal of benign odontogenic cyst or tumor diameter greater than 1.25cm	\$750.37	\$769.13	Health Check & Adults
D7460	Removal of benign non-odontogenic cyst or tumor - up to 1.25cm	\$477.13	\$489.06	Health Check & Adults

CPT Codes	Primary Care	Current Rate	New Rate	Category of Service
D7461	Removal of benign non-odontogenic cyst or tumor lesion diameter greater than over 1.25cm	\$769.00	\$788.23	Health Check & Adults
D7471	Removal of lateral exostosis (maxilla or mandible)	\$230.55	\$236.31	Health Check & Adults
D7510	Incision and drainage of abscess - intraoral soft tissue	\$142.83	\$146.40	Health Check & Adults
D7520	Incision and drainage of abscess – extraoral soft tissue	\$682.06	\$699.11	Health Check & Adults
D7540	Removal of reaction-producing foreign bodies of musculoskeletal system. May include, but is not limited to removal of splinters	\$62.99	\$64.56	Health Check & Adults
D7550	Partial ostectomy/Sequestrectomy for removal of non-vital bone	\$231.31	\$237.09	Health Check & Adults
D7620	Maxilla - closed reduction, (teeth immobilized, if present)	\$645.45	\$661.59	Health Check & Adults
D7640	Mandible - closed reduction, (teeth immobilized, if present)	\$645.45	\$661.59	Health Check & Adults
D7910	Suture of recent small wounds up to 5cm	\$218.38	\$223.84	Health Check & Adults
D7961	Buccal / Labial Frenectomy (Frenulectomy)	\$131.04	\$134.32	Health Check & Adults
D7962	Lingual Frenectomy (Frenulectomy)	\$131.04	\$134.32	Health Check & Adults
D7970	Excision of Hyperplastic Tissue (per arch)	\$324.99	\$333.11	Health Check & Adults
D7971	Excision of Pericoronal gingiva	\$85.90	\$88.05	Health Check & Adults
D7997	Appliance Removal (not by dentist who placed appliance), includes removal of arch bar	\$19.03	\$19.51	Health Check & Adults
D8080	Comprehensive Orthodontic Treatment of Adolescent Dentition	\$844.62	\$865.74	Health Check & Adults
D8660	Pre-Orthodontic treatment visit	\$83.53	\$85.62	Health Check & Adults
D8670	Monthly maintenance visits (12 visits)	\$105.57	\$108.21	Health Check & Adults
D9110	Palliative (emergency) treatment of dental pain, minor procedure	\$51.75	\$53.04	Health Check & Adults
D9215	Local Anesthesia	\$10.00	\$10.25	Pregnant Women Only
D9222	Deep Sedation/general anesthesia – first 15 minutes	\$115.19	\$118.07	Health Check & Adults

CPT Codes	Primary Care	Current Rate	New Rate	Category of Service
D9223	Deep Sedation/general anesthesia – each additional 15 minutes	\$115.19	\$118.07	Health Check & Adults
D9230	Analgesia, anxiolysis, inhalation of nitrous oxide	\$26.91	\$27.58	Health Check & Adults
D9239	Intravenous conscious sedation/analgesia, first 15 minutes	\$113.28	\$116.11	Health Check & Adults
D9243	Intravenous conscious sedation/analgesia each additional 15 minutes	\$113.28	\$116.11	Health Check & Adults
D9248	Non-Intravenous Conscious Sedation	\$50.00	\$51.25	Health Check & Adults
D9310	Consultation diagnostic service provided by dentist or physician other than practitioner providing services	\$104.53	\$107.14	Health Check & Adults
D9420	Hospital Call – each unit 30 minutes	\$94.70	\$97.07	Health Check & Adults
D9440	Office Visit After Regularly Scheduled Hours Office or hospital setting	\$66.03	\$67.68	Health Check & Adults
D9610	Therapeutic parenteral drug, single administration	\$53.82	\$55.17	Health Check & Adults
D9630	Other drugs & medication, by report	\$38.29	\$39.25	Health Check & Adults
D9920	Behavior Management, by report (Only post approval is required)	\$56.92	\$58.34	Health Check & Adults

This public notice is available for review at each county Division of Family and Children Services office. An opportunity for public comment will be held on **May 28, 2025, at 10:00 a.m., via Zoom audio**. There will be **no in-person** attendance at the Department of Community Health (DCH).

Individuals who are disabled and need assistance to participate during this meeting should call (404) 656-4479 at least three (3) business days before the scheduled public hearing to ensure any necessary accommodations can be provided.

Join Zoom Meeting

<https://us02web.zoom.us/j/82158090849?pwd=N8ahcrOlHQVJzsXTVy1VxhEqYjSQEG.1>

Meeting ID: 821 5809 0849

Passcode: 951865

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- +1 719 359 4580 US
- +1 253 205 0468 US

Meeting ID: 821 5809 0849

Passcode: 951865

Individuals wishing to comment in writing on any of the proposed changes should do so on or before **June 4, 2025**, to Danisha Williams c/o the Board of Community Health, Post Office Box 1966, Atlanta, Georgia 30301-1966. You may also email comments to Danisha Williams, danwilliams@dch.ga.gov or fax to 404-651-6880.

Comments submitted will be available for review by submitting a request via email to openrecordsrequest@dch.ga.gov. *Please note that any comments submitted are subject to open records.*

If the proposed changes are presented to the Board for final action, relevant comments from written and public testimony will be provided to the Board. The Board expects to vote on the proposed changes at the Board meeting to be held on **June 12, 2025**, at 10:30 a.m. at the Department of Community Health unless withdrawn or withheld by the Department for further review.

NOTICE IS HEREBY GIVEN THIS 19th DAY OF MAY 2025
Russel Carlson, Commissioner