



Andy Beshear
GOVERNOR

EDUCATION AND LABOR CABINET

Kentucky Office of Vocational Rehabilitation

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Executive Director

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SECRETARY

SERVICE FEE MEMORANDUM

Purchase of Dental Services

TO: Office of Vocational Rehabilitation Staff
Client Assistance Program Administrator

FROM: Executive Director
Office of Vocational Rehabilitation

THROUGH: Field Services Division Director
Office of Vocational Rehabilitation

DATE: Effective: October 1, 2024

Kentucky's Office of Vocational Rehabilitation set the following rates for Dental CPT Codes. For any rates not listed in the table below, please contact Kentucky's Office of Vocational Rehabilitation authorization's inbox, OVRauthorizations@ky.gov.

Description	CPT Code	Price
Periodic Oral	D0120	\$50
Limited Oral Evaluation-Problem	D0140	\$70
Oral Eval Pt Under 3/Prim Caregiv	D0145	\$87
Comprehensive Oral Evaluation	D0150	\$79
Detailed & Extens Oral Eval-Prb F	D0160	\$140

Description	CPT Code	Price
Re-Eval, Limited. Problem Focused	D0170	\$81
Comprehensive Perio Evaluation	D0180	\$84
Screening of a Patient	D0191	\$75
Assessment of a Patient	D0210	\$138
Fmx Intraoral-Complete (Incl. Bite	D0709	\$75
Intraoral-Periapical First Film	D0220	\$35
Intraoral-Periapical-Each Additio	D0230	\$29
Bitewings-Singlefilm	D0270	\$30
Bitewings-Two Films	D0272	\$48
Bitewings - 3 Films	D0273	\$53
Bitewings-Four Films	D0274	\$68
Other Temporomandibular Joint F	D0321	\$215
Panoramic Film	D0330	\$133
Oral/Facial (Intra/Extra)	D0350	\$78
Adj Pre-Diag Test-Detect Mucosal	D0431	\$61
Pulp Vitality Tests-Antibiotics	D0460	\$53
Diagnostic Casts	D0470	\$154
Other Oral Pathology Procedur	D0502	\$277
Caries Risk Assessment - Low Risk	D0322	\$450
Caries Risk Assessment- Moderate	D0330	\$133
Caries Risk Assessment- High Risk	D0340	\$170
Unspecified Diagnostic Procedure	D0350	\$79

Description	CPT Code	Price
Prophylaxis-Adult	D1110	\$96
Prophylaxis-Child	D1120	\$71
Topical Ap. of Fluoride (Ex. Proph)-Child	D1201	\$55
Top Fluor Varnish; Appl Mod/High	D1206	\$49
Topical Application of Fluoride	D1208	\$47
Sealant-Per Tooth	D1351	\$54
Preventive Resin Restor.-Mod-Hi C	D1352	\$123
Limited Oral Eval/Problem Focused	D0140	\$70
Removal Of Fixed Space Maintaine Preventive	D1555	\$72
Amalgam-1 Surf, Permanent Restorative	D2140	\$125
Amalgam-2 Surf, Permanent Restorative	D2150	\$146
Amalgam-3 Surfaces, Permanent Restorative	D2160	\$181
Amalgam4+ Surfaces, Permanent Restorative	D2161	\$209
Resin-1 Surface, Anterior Restorative	D2330	\$152
Resin-2 Surfaces, Anterior Restorative	D2331	\$185
Resin-3 Surfaces, Anterior Restorative	D2332	\$229

Description	CPT Code	Price
Resin 4+Surf, or Anterior Incisal Restorative	D2335	\$291
Resin-Based.Composite1 Surf Pos Restorative	D2391	\$165
Resin-Based Composite- 2 Surface Restorative	D2392	\$206
Resin-Based, Composite3 Surf Pos Restorative	D2393	\$257
Resin-Based Composite4+Surf Po Restorative	D2394	\$315
Onlay-Porcelain\Ceramic-3 Surfa Major	D2643	\$1034
Onlay-Composite/Resin-2 Surface Major	D2662	\$846
Onlay-Composite/Resin-3 Surface Major	D2663	\$883
Onlay-Comp/Resin 4 Or More Surf- Major	D2664	\$1060
Crown-Resin (Lab)/Per Unit Major	D2710	\$581
Crown-3/4 (Resin/Comp-Indirect) Major	D2712	\$1146
Crown-Resin W/High Noble Metal Major	D2720	\$1337
Crown-Resin W/Base Metal Major	D2721	\$1210
Crown-Resin W/ Noble Metal Major	D2722	\$1218
Crown-Porcelain/Ceramic/Zirconi Major	D2740	\$1213

Description	CPT Code	Price
Crown-Porcln To High Noble/ Cap Major	D2750	\$1177
Crown-Porcelainfused To Base M Major	D2751	\$1110
Crown-Porcelain Fused To Noble Major	D2752	\$1162
Crown-3/4 Cast High Noble Metal Major	D2780	\$1203
Crown-3/4 Cast Pred.Base Metal Major	D2781	\$1161
Crown-3/4 Cast Noble Metal Major	D2782	\$1164
Crown-3/4 Porcelain Crown Major	D2783	\$1180
Crown-Full Cast High Noble Meta Major	D2790	\$1248
Crown-Full Cast Predominatly Ba Major	D2791	\$1023
Crown-Fullcast Noble Metal Major	D2792	\$1205
Crown - Titanuim Major	D2794	\$1368
Provisional Crown Major	D2799	\$334
Recement Veneer, In/Onlay Major	D2910	\$102
Recement Cast Prefab Pc Major	D2915	\$142
Recement Crown (3/4 Or Full Coverage) Major	D2920	\$112

Description	CPT Code	Price
Reattachment Of Tooth Fragment Restorative	D2921	\$290
Prefab. Stainless Steel Crown-Pe Major	D2931	\$303
Protective Restoration (Sedative) Restorative	D2940	\$112
Core Buildup, Including Any Pins Major	D2950	\$256
Pin Retention-Per Tooth, In Add to Major	D2951	\$69
Prefab. Post And Core In Add. to C Major	D2954	\$323
Post Removal (No Endo Therapy) Major	D2955	\$280
Each Add'l Prefab. Post- Same to Major	D2957	\$230
Labial Veneer (Laminate)-Chairside Major	D2960	\$699
Labial Veneer (Resin Laminate) Lab Major	D2961	\$902
Labial Veneer (Porcelain Laminate) Major	D2962	\$1208
Temporary Crown (Fractured To Major	D2799	\$398
Crown (Survey) Add to Exist Rpo Major	D2971	\$202
Coping (Crown) Major	D2975	\$795
Crown Repair by Report Major	D2980	\$295

Description	CPT Code	Price
Inlay Repair Necess by Restor Ma Restorative	D2981	\$361
Onlay Repair Necess by Restor Ma Restorative	D2982	\$425
Veneer Repair Nec. by Rest. Mate Restorative	D2983	\$394
Resin Infil Of Incep Smooth Surf Restorative	D2990	\$199
Restorative procedure by report Adjunctive General Ser	D2999	\$203
Pulp Cap-Direct (Ex. Final Restora Endodontics	D3110	\$78
Pulp Cap-Indirect (Ex..Final Resto Endodontics	D3120	\$72
Therapeutic Pulpotomy (Ex. Final Endodontics	D3220	\$180
Pulpal Debris, Prim/Perm/Excavat Endodontics	D3221	\$227
Pulpal Therapy-Anterior, Primary Endodontics	D3230	\$295
Pulpal Therapy-Posterior, Primar Endodontics	D3240	\$271
Endo/Anterior (Ex. Final Restorat Endodontics	D3310	\$749
Endo/Bicuspid (Ex. Final Restorati Endodontics	D3320	\$914
Endo/Molar (Ex. Final Restoration Endodontics	D3330	\$1110

Description	CPT Code	Price
Incomplete Endo. Therapy; Inop/F Endodontics	D3332	\$622
Retreatment Of Prev Root Canal-Endodontics	D3346	\$880
Retreatment Of Prev Root Canal-Endodontics	D3347	\$1041
Retreatment Of Prev Root Canal-Endodontics	D3348	\$1302
Apexification/Recalcification-Init Endodontics	D3351	\$376
Apexification/Recalcification-Inte Endodontics	D3352	\$231
Apexification/Recalcification-Fina Endodontics	D3353	\$484
Non-Vital Initial Pulpal Regeneration Endodontics	D3355	\$472
Non-Vital Interim Medication Rplcmt Endodontics	D3356	\$317
Non-Vital Completion of Tx Endodontics	D3357	\$590
Apicoectomy/Periradicular Surge Endodontics	D3421	\$1317
Apicoectomy/Periradicular Surge Endodontics	D3425	\$1525
Apicoectomy/Periradicular Surge Endodontics	D3426	\$505
Unspecified Endodontic Procedu Endodontics	D3999	\$410

Description	CPT Code	Price
Gingivectomy Or Gingivoplasty-Pe Periodontics	D4210	\$561
Gingivectomy/Plasty 1-3 Teeth Periodontics	D4211	\$230
Gingivectomy/Plasty Restorative Periodontics	D4212	\$218
Anatomical Crown Exposure 4+ C Periodontics	D4230	\$1095
Anatomical Crown Exposure 1-3 T Periodontics	D4231	\$830
Gingival Flap Procedure, Incl. Ro Periodontics	D4240	\$714
Ging Flap Proc Inc Root PI 1-3 Tth Periodontics	D4241	\$439
Crown Length For Perio/Restora Periodontics	D4249	\$776
Osseous Surgery-Per Quad Periodontics	D4260	\$1077
Oss Surg-Inc Flap Entry/Clos 1-3t Periodontics	D4261	\$1183
Bone Replace Graft-First Site In Q Periodontics	D4263	\$622
Bone Replace Graft-Each Add Site Periodontics	D4264	\$303
Provisional Splinting-Extracoro Periodontics	D4321	\$418
Periodontal Scaling And Root Pla Periodontics	D4341	\$276

Description	CPT Code	Price
Perio Scaling/Root Planing 1-3 Tt Periodontics	D4342	\$232
Scalling In Presence Of Gingivitis Periodontics	D4346	\$163
Full Mouth Debridement For Peri Periodontics	D4355	\$159
Local Del Of Antimicrobiauroot S Periodontics	D4381	\$96
Periodontal Maintenance Proce Perio Maint/Recare	D4910	\$129
Gingival Irrigation - Per Quad Periodontics	D4921	\$50
Unspecified Periodontal Proce Periodontics	D4999	\$101
Complete Upper Prosthodontics: Fixed	D5110	\$1297
Complete Lower Prosthodontics: Fixed	D5120	\$1311
Immediate Upper Prosthodontics: Fixed	D5130	\$1352
Immediate Lower Prosthodontics: Fixed	D5140	\$1305
Partial Upper-Resin/ Unilateral Prosthodontics: Fixed	D5211	\$1113
Partial-Lower-Resin/ Unilateral Prosthodontics: Fixed	D5212	\$1126

Description	CPT Code	Price
Maxillary Partial-Cast Metal, Res Prosthodontics: Fixed	D5213	\$1619
Mandibular Partial-Cast Metal, Re Prosthodontics: Fixed	D5214	\$1631
Rpo - Maxillary (Flexible Base) Prosthodontics: Fixed	D5225	\$1547
Rpo - Mandibular (Flexible Base) Prosthodontics: Fixed	D5226	\$1569
Adjust Complete Denture-Upper Prosthodontics: Fixed	D5410	\$78
Adjust Complete Denture-Lower Prosthodontics: Fixed	D5411	\$78
Adjust Partial Denture-Upper Prosthodontics: Fixed	D5421	\$78
Adjust Partial Denture-Lower Prosthodontics: Fixed	D5422	\$78
Repair Broken Complete Denture Prosthodontics: Removable	D5211	\$1113
Repair Broken Complete Denture Prosthodontics: Removable	D5212	\$1126
Replace Missing Or Broken Teeth Prosthodontics: Removable	D5520	\$208
Repair Resin Partial Denture Base Prosthodontics: Removable	D5611	\$264
Repair Resin Denture Base, Maxill Prosthodontics: Removable	D5612	\$238
Repair Cast Partial Framework, Prosthodontics: Removable	D5621	\$324

Description	CPT Code	Price
Repair Cast Partial Framework, Maxill Prosthodontics: Removable	D5622	\$319
Repair Or Replace Broken Clasp Prosthodontics: Fixed	D5630	\$967
Replace Broken Teeth-Per Tooth Prosthodontics: Fixed	D5640	\$191
Add Tooth To Existing Partial Den Prosthodontics: Fixed	D5650	\$215
Add Clasp To Existing Partial Den Prosthodontics: Fixed	D5660	\$258
Replace All Tth/Acry Cast Met Fr Prosthodontics: Fixed	D5670	\$743
Replace All Tth/Acry Cast Met Fr Prosthodontics: Fixed	D5671	\$855
Rebase Complete Upper Denture Prosthodontics: R&R	D5710	\$537
Rebase Complete Lower Denture Prosthodontics: R&R	D5711	\$537
Rebase Upper Partial Denture Prosthodontics: R&R	D5720	\$523
Rebase Lower Partial Denture Prosthodontics: R&R	D5721	\$522
Reline Complete Upper Denture (C Prosthodontics: R&R	D5730	\$298
Reline Complete Lower Denture (Prosthodontics: R&R	D5731	\$304

Description	CPT Code	Price
Reline Upper Partial Denture (Cha Prosthodontics: R&R)	D5740	\$286
Reline Lower Partial Denture (Ch Prosthodontics: R&R)	D5741	\$287
Reline Complete Upper Denture (L Prosthodontics: R&R)	D5750	\$424
Reline Complete Lower Denture (L Prosthodontics: R&R)	D5751	\$424
Reline Upper Partial Denture (Lab Prosthodontics: R&R)	D5760	\$466
Reline Lower Partial Denture (Lab Prosthodontics: R&R)	D5761	\$464
Interim Partial Denture (Ua) Prosthodontics: Fixed	D5820	\$606
Interim Partial Denture (La) Prosthodontics: Fixed	D5821	\$606
Tissue Conditioning, Maxillary Prosthodontics: Fixed	D5850	\$185
Tissue Conditioning, Mandibular Prosthodontics: Fixed	D5851	\$172
Precision Attchmnt, Natural/ Implant Implant Services	D5862	\$439
Overdenture - Complete Maxillar Prosthodontics: Fixed	D5863	\$2931
Overdenture - Partial Maxillary Prosthodontics: Fixed	D5864	\$2571
Overdenture - Complete Mandibul Prosthodontics: Fixed	D5865	\$2766

Description	CPT Code	Price
Overdenture - Partial Mandibular Prosthodontics: Fixed	D5866	\$2597