

Line of Business: MED - NHMEDICAID
Department of Health and Human Services
09/01/2024 CHAP - Dental Procedure Code Fee Schedule



Procedure Code	Procedure Short Description	Manual Price Req'd	Svc Auth Req'd	Prcng Amt	Max Unit Amt	Frequency	Age
D1110	Dental prophylaxis adult			\$66.93	999	1/150 days	13-20y 11m
D1120	Dental prophylaxis child			\$41.60	999	1/150 days	0-12y 11m
D1206	Topical fluoride varnish			\$22.73	1	2/calendar year	0-20y 11m
D1208	Topical app fluorid ex vrnsh			\$22.73	1	2/calendar year	0-20y 11m
D1351	Dental sealant per tooth			\$36.68	999	1/5 years	0-20y 11m
D1354	Int caries med app per tooth			\$37.88	16	2/tooth/life	0-20y 11m
D2940	Protective restoration			\$69.46	999	1 / life / tooth	0-20y 11m