

This document is archived and is maintained for historical, research, or recordkeeping purposes only.



**ND Medicaid
Dental Services - Child Fee Schedule
as of 7/1/2024**

Inclusion or exclusion of a procedure code, supply, product, or service does not imply Medicaid coverage, reimbursement, or lack thereof.

Code	Medicaid Fee
D0120	\$34.25
D0140	\$50.89
D0145	\$46.34
D0150	\$51.14
D0160	\$118.86
D0170	\$31.91
D0171	\$31.91
D0180	\$48.16
D0190	\$22.13
D0191	\$22.13
D0210	\$107.22
D0220	\$22.53
D0230	\$17.37
D0240	\$34.52
D0270	\$18.86
D0272	\$32.99
D0273	\$36.59
D0274	\$44.27
D0322	\$34.52
D0330	\$82.68
D0340	\$76.62
D0364	\$257.79
D0365	\$789.65
D0366	\$789.65
D0367	\$365.44
D0368	\$1,156.24
D0369	\$2,067.82

**ND Medicaid
Dental Services - Child Fee Schedule
as of 7/1/2024**

Inclusion or exclusion of a procedure code, supply, product, or service does not imply Medicaid coverage, reimbursement, or lack thereof.

Code	Medicaid Fee
D0383	\$386.84
D0391	\$147.16
D0460	\$45.35
D0470	\$63.49
D0604	\$38.33
D0605	\$45.70
D1110	\$63.31
D1120	\$44.04
D1206	\$29.29
D1208	\$30.03
D1351	\$35.13
D1352	\$44.47
D1353	\$44.47
D1354	\$13.98
D1355	\$13.98
D1510	\$240.33
D1516	\$355.03
D1517	\$355.03
D1520	\$68.92
D1526	\$215.31
D1527	\$215.31
D1551	\$56.62
D1552	\$56.62
D1553	\$56.62
D1556	\$52.23
D1557	\$52.23
D1558	\$52.23
D1575	\$157.60
D2140	\$87.91
D2150	\$106.64
D2160	\$131.72

**ND Medicaid
Dental Services - Child Fee Schedule
as of 7/1/2024**

Inclusion or exclusion of a procedure code, supply, product, or service does not imply Medicaid coverage, reimbursement, or lack thereof.

Code	Medicaid Fee
D2161	\$171.51
D2330	\$108.28
D2331	\$130.51
D2332	\$160.59
D2335	\$195.20
D2390	\$292.71
D2391	\$107.89
D2392	\$134.38
D2393	\$180.28
D2394	\$219.45
D2710	\$483.32
D2720	\$797.69
D2721	\$797.69
D2722	\$797.69
D2740	\$885.93
D2750	\$832.34
D2751	\$733.90
D2752	\$794.40
D2780	\$885.93
D2790	\$968.88
D2791	\$619.04
D2792	\$847.42
D2910	\$66.41
D2920	\$71.96
D2921	\$96.38
D2928	\$256.23
D2930	\$179.17
D2931	\$222.81
D2932	\$338.12
D2933	\$217.59
D2934	\$217.59

**ND Medicaid
Dental Services - Child Fee Schedule
as of 7/1/2024**

Inclusion or exclusion of a procedure code, supply, product, or service does not imply Medicaid coverage, reimbursement, or lack thereof.

Code	Medicaid Fee
D2940	\$83.56
D2950	\$196.13
D2951	\$41.51
D2952	\$306.91
D2954	\$237.64
D2955	\$51.66
D2960	\$446.89
D2961	\$344.28
D2962	\$758.04
D3110	\$49.36
D3220	\$111.60
D3221	\$141.64
D3230	\$112.96
D3240	\$142.93
D3310	\$495.58
D3320	\$640.87
D3330	\$747.92
D3331	\$64.22
D3346	\$551.18
D3347	\$688.50
D3348	\$827.52
D3351	\$231.72
D3352	\$117.17
D3353	\$117.17
D3410	\$547.09
D3430	\$171.50
D4210	\$427.15
D4211	\$133.06
D4212	\$110.32
D4322	\$443.22
D4323	\$516.82

**ND Medicaid
Dental Services - Child Fee Schedule
as of 7/1/2024**

Inclusion or exclusion of a procedure code, supply, product, or service does not imply Medicaid coverage, reimbursement, or lack thereof.

Code	Medicaid Fee
D4341	\$194.58
D4342	\$116.73
D4346	\$94.57
D4355	\$141.59
D4910	\$92.24
D5110	\$1,064.21
D5120	\$1,064.21
D5130	\$1,367.63
D5140	\$1,123.79
D5211	\$1,125.47
D5212	\$1,369.35
D5213	\$1,399.70
D5214	\$1,393.73
D5221	\$1,446.33
D5222	\$1,446.33
D5223	\$1,798.74
D5224	\$1,798.74
D5225	\$1,125.47
D5226	\$1,125.47
D5227	\$1,940.60
D5228	\$1,946.31
D5282	\$891.82
D5283	\$891.82
D5284	\$562.72
D5286	\$562.72
D5410	\$58.72
D5411	\$58.72
D5421	\$58.72
D5422	\$58.72
D5511	\$123.98
D5512	\$123.98

**ND Medicaid
Dental Services - Child Fee Schedule
as of 7/1/2024**

Inclusion or exclusion of a procedure code, supply, product, or service does not imply Medicaid coverage, reimbursement, or lack thereof.

Code	Medicaid Fee
D5520	\$96.44
D5611	\$136.12
D5612	\$136.12
D5621	\$203.17
D5622	\$203.17
D5630	\$135.21
D5640	\$103.30
D5650	\$170.51
D5660	\$125.75
D5710	\$453.52
D5711	\$453.52
D5720	\$319.42
D5721	\$319.42
D5730	\$302.90
D5731	\$302.90
D5740	\$302.90
D5741	\$302.90
D5750	\$495.55
D5751	\$731.50
D5760	\$405.51
D5761	\$405.51
D5765	\$608.17
D5820	\$598.37
D5821	\$274.75
D5850	\$80.98
D5851	\$66.41
D5876	\$96.54
D6100	\$682.81
D6210	\$738.20
D6211	\$579.25
D6212	\$579.25

**ND Medicaid
Dental Services - Child Fee Schedule
as of 7/1/2024**

Inclusion or exclusion of a procedure code, supply, product, or service does not imply Medicaid coverage, reimbursement, or lack thereof.

Code	Medicaid Fee
D6240	\$924.33
D6241	\$678.61
D6242	\$995.48
D6250	\$542.89
D6251	\$542.89
D6252	\$542.89
D6545	\$422.00
D6548	\$595.59
D6720	\$516.41
D6721	\$516.41
D6722	\$516.41
D6750	\$924.33
D6751	\$686.83
D6752	\$831.49
D6780	\$533.07
D6790	\$738.20
D6791	\$662.00
D6792	\$688.53
D6930	\$98.04
D7111	\$84.47
D7140	\$95.81
D7210	\$208.95
D7220	\$250.70
D7230	\$317.14
D7240	\$360.00
D7241	\$436.27
D7250	\$208.67
D7251	\$404.35
D7260	\$791.54
D7270	\$605.57
D7280	\$382.34

**ND Medicaid
Dental Services - Child Fee Schedule
as of 7/1/2024**

Inclusion or exclusion of a procedure code, supply, product, or service does not imply Medicaid coverage, reimbursement, or lack thereof.

Code	Medicaid Fee
D7283	\$150.62
D7285	\$377.43
D7286	\$377.43
D7290	\$194.33
D7291	\$137.82
D7296	\$108.44
D7297	\$348.11
D7310	\$213.14
D7311	\$206.63
D7321	\$206.63
D7340	\$413.76
D7350	\$413.76
D7410	\$367.09
D7411	\$662.00
D7412	\$455.17
D7413	\$367.09
D7414	\$662.00
D7415	\$455.17
D7450	\$763.39
D7451	\$771.37
D7460	\$86.07
D7461	\$129.14
D7471	\$206.63
D7472	\$733.90
D7473	\$672.13
D7485	\$780.70
D7510	\$176.89
D7511	\$107.70
D7520	\$364.01
D7521	\$469.20
D7530	\$96.44

**ND Medicaid
Dental Services - Child Fee Schedule
as of 7/1/2024**

Inclusion or exclusion of a procedure code, supply, product, or service does not imply Medicaid coverage, reimbursement, or lack thereof.

Code	Medicaid Fee
D7540	\$231.17
D7550	\$342.46
D7560	\$447.77
D7880	\$404.17
D7910	\$55.95
D7911	\$43.06
D7912	\$43.06
D7961	\$419.15
D7962	\$419.15
D7963	\$573.64
D7970	\$380.14
D7971	\$184.82
D8020	\$1,412.07
D8030	\$1,412.07
D8070	\$2,755.64
D8080	\$1,747.72
D8090	\$4,527.18
D8210	\$625.98
D8220	\$625.98
D8660	\$35.45
D8681	\$59.02
D8695	\$166.62
D8696	\$84.95
D8697	\$84.95
D8698	\$56.62
D8699	\$56.62
D8701	\$101.49
D8702	\$101.49
D8703	\$202.97
D8704	\$202.97
D9110	\$75.87

**ND Medicaid
Dental Services - Child Fee Schedule
as of 7/1/2024**

Inclusion or exclusion of a procedure code, supply, product, or service does not imply Medicaid coverage, reimbursement, or lack thereof.

Code	Medicaid Fee
D9222	\$142.57
D9223	\$131.20
D9230	\$36.50
D9239	\$150.48
D9243	\$142.61
D9310	\$167.99
D9410	\$33.70
D9420	\$209.41
D9440	\$76.74
D9610	\$56.78
D9612	\$59.84
D9613	\$20.05
D9910	\$36.39
D9920	\$172.14
D9930	\$73.21
D9943	\$35.25
D9944	\$357.31
D9945	\$357.31
D9946	\$377.89
D9950	\$25.83
D9951	\$42.14
D9952	\$516.81
D9990	\$69.12
D9991	\$22.13
D9992	\$22.13
D9993	\$22.13
D9994	\$22.13
D9995	\$20.13
D9996	\$20.13
D9997	\$22.13