

**ND Medicaid**  
**Dental Services - Child Fee Schedule**  
**as of 7/1/2020**

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

Code	Medicaid Fee
D0120	\$31.57
D0140	\$46.91
D0145	\$42.72
D0150	\$47.14
D0160	\$109.57
D0170	\$29.41
D0171	\$29.41
D0180	\$44.40
D0210	\$98.84
D0220	\$20.76
D0230	\$16.01
D0240	\$31.81
D0270	\$17.39
D0272	\$30.41
D0273	\$33.73
D0274	\$40.81
D0322	\$31.81
D0330	\$76.22
D0340	\$70.63
D0364	\$237.63
D0365	\$727.90
D0366	\$727.90
D0367	\$336.87
D0368	\$1,065.82
D0369	\$1,906.14
D0383	\$356.59
D0460	\$41.80
D0470	\$58.52
D1110	\$58.36

**ND Medicaid  
Dental Services - Child Fee Schedule  
as of 7/1/2020**

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

<b>Code</b>	<b>Medicaid Fee</b>
D1120	\$40.60
D1206	\$27.00
D1208	\$27.69
D1351	\$32.39
D1352	\$40.99
D1353	\$40.99
D1354	\$12.88
D1510	\$221.54
D1516	\$327.27
D1517	\$327.27
D1520	\$63.53
D1526	\$198.47
D1527	\$198.47
D1551	\$52.20
D1552	\$52.20
D1553	\$52.20
D1556	\$48.15
D1557	\$48.15
D1558	\$48.15
D1575	\$145.27
D2140	\$81.03
D2150	\$98.29
D2160	\$121.42
D2161	\$158.10
D2330	\$99.82
D2331	\$120.30
D2332	\$148.03
D2335	\$179.93
D2390	\$269.81
D2391	\$99.46
D2392	\$123.87
D2393	\$166.19
D2394	\$202.28

**ND Medicaid  
Dental Services - Child Fee Schedule  
as of 7/1/2020**

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

<b>Code</b>	<b>Medicaid Fee</b>
D2710	\$445.52
D2720	\$735.31
D2721	\$735.31
D2722	\$735.31
D2740	\$816.67
D2750	\$767.25
D2751	\$676.51
D2752	\$732.28
D2780	\$816.67
D2790	\$893.12
D2791	\$570.63
D2792	\$781.17
D2910	\$61.22
D2920	\$66.33
D2921	\$88.83
D2930	\$165.16
D2931	\$205.39
D2932	\$311.69
D2933	\$200.58
D2934	\$200.58
D2940	\$77.03
D2950	\$180.79
D2951	\$38.26
D2952	\$282.91
D2954	\$219.06
D2955	\$47.63
D3110	\$45.49
D3220	\$102.87
D3221	\$130.56
D3230	\$104.13
D3240	\$131.75
D3310	\$456.84
D3320	\$590.75

**ND Medicaid  
Dental Services - Child Fee Schedule  
as of 7/1/2020**

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

Code	Medicaid Fee
D3330	\$689.44
D3331	\$59.20
D3346	\$508.08
D3347	\$634.67
D3348	\$762.81
D3351	\$213.61
D3352	\$108.01
D3353	\$108.01
D3410	\$504.31
D3430	\$158.09
D4210	\$393.75
D4211	\$122.66
D4212	\$101.70
D4341	\$179.36
D4342	\$107.61
D4346	\$87.19
D4355	\$130.53
D4910	\$85.02
D5110	\$981.00
D5120	\$981.00
D5130	\$1,260.71
D5140	\$1,035.92
D5211	\$1,037.46
D5212	\$1,262.28
D5213	\$1,290.25
D5214	\$1,284.75
D5221	\$1,333.24
D5222	\$1,333.24
D5223	\$1,658.10
D5224	\$1,658.10
D5225	\$1,037.46
D5226	\$1,037.46
D5282	\$822.08

**ND Medicaid  
Dental Services - Child Fee Schedule  
as of 7/1/2020**

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

<b>Code</b>	<b>Medicaid Fee</b>
D5283	\$822.08
D5284	\$518.73
D5286	\$518.73
D5410	\$54.13
D5411	\$54.13
D5421	\$54.13
D5422	\$54.13
D5511	\$114.28
D5512	\$114.28
D5520	\$88.89
D5611	\$125.48
D5612	\$125.48
D5621	\$187.27
D5622	\$187.27
D5630	\$124.64
D5640	\$95.23
D5650	\$157.18
D5660	\$115.91
D5710	\$418.06
D5711	\$418.06
D5720	\$294.45
D5721	\$294.45
D5730	\$279.22
D5731	\$279.22
D5740	\$279.22
D5741	\$279.22
D5750	\$456.81
D5751	\$674.29
D5760	\$373.80
D5761	\$373.80
D5820	\$551.58
D5821	\$253.26
D5850	\$74.65

**ND Medicaid  
Dental Services - Child Fee Schedule  
as of 7/1/2020**

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

<b>Code</b>	<b>Medicaid Fee</b>
D5851	\$61.22
D5876	\$88.99
D6930	\$90.37
D7111	\$77.86
D7140	\$88.31
D7210	\$192.61
D7220	\$231.10
D7230	\$292.33
D7240	\$331.84
D7241	\$402.15
D7250	\$192.35
D7260	\$729.66
D7270	\$558.23
D7280	\$352.44
D7283	\$138.84
D7285	\$347.92
D7286	\$347.92
D7291	\$127.05
D7296	\$99.96
D7297	\$320.89
D7310	\$196.47
D7311	\$190.47
D7321	\$190.47
D7340	\$381.41
D7350	\$381.41
D7410	\$338.39
D7411	\$610.24
D7412	\$419.58
D7413	\$338.39
D7414	\$610.24
D7415	\$419.58
D7450	\$703.71
D7451	\$711.06

**ND Medicaid  
Dental Services - Child Fee Schedule  
as of 7/1/2020**

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

<b>Code</b>	<b>Medicaid Fee</b>
D7460	\$79.34
D7461	\$119.05
D7471	\$190.47
D7472	\$676.51
D7473	\$619.57
D7485	\$719.65
D7510	\$163.06
D7511	\$99.27
D7520	\$335.55
D7521	\$432.51
D7530	\$88.89
D7540	\$213.10
D7550	\$315.69
D7560	\$412.76
D7880	\$372.57
D7910	\$51.58
D7911	\$39.70
D7912	\$39.70
D7960	\$386.37
D7963	\$528.78
D7970	\$350.42
D7971	\$170.37
D8060	\$1,301.66
D8070	\$2,540.18
D8080	\$1,611.07
D8090	\$4,173.20
D8210	\$577.04
D8220	\$577.04
D8660	\$32.69
D8681	\$54.40
D8695	\$153.60
D8696	\$78.31
D8697	\$78.31

**ND Medicaid  
Dental Services - Child Fee Schedule  
as of 7/1/2020**

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

<b>Code</b>	<b>Medicaid Fee</b>
D8698	\$52.20
D8699	\$52.20
D8701	\$93.55
D8702	\$93.55
D8703	\$187.10
D8704	\$187.10
D9110	\$69.93
D9222	\$131.42
D9223	\$120.94
D9230	\$33.65
D9239	\$138.72
D9243	\$131.46
D9310	\$154.86
D9410	\$31.07
D9420	\$193.04
D9440	\$70.74
D9610	\$52.34
D9612	\$55.17
D9613	\$18.48
D9910	\$33.54
D9920	\$158.69
D9930	\$67.49
D9944	\$329.37
D9945	\$329.37
D9946	\$348.33
D9950	\$23.81
D9951	\$38.84
D9952	\$476.41