

CDT 2027 Code Changes

DPPO and DHMO Summary

Important Update

The American Dental Association® (ADA) has released its Code on Dental Procedures and Nomenclature for 2027 (CDT 2027). Please use these and any active CDT codes for all procedures performed on or after **January 1, 2027**. As in previous releases, some new codes have been added, while other existing codes have been revised. Note that not all CDT Codes are covered on all dental plans administered by Cigna Dental.

New CDT 2027 Dental Procedure Codes effective January 1, 2027

New code	Nomenclature	Comparable existing code(s)	Coverage (subject to plan exclusions, limitations, and guidelines)
D1209	application of caries preventive medicament – topical non-fluoride; full mouth	D1206	Coverage guidelines are comparable to the guidelines for D1206
D4324	repair of fixed splint – intra-coronal; natural teeth or prosthetic crowns	D4322	Not Standardly Covered
D4325	repair of fixed splint – extra-coronal; natural teeth or prosthetic crowns	D4323	Not Standardly Covered
D4326	removal of fixed splint – intra-coronal; natural teeth or prosthetic crowns does not include repair of resulting defects	D4322	Not Standardly Covered
D4327	removal of fixed splint – extra-coronal; natural teeth or prosthetic crowns	D4323	Not Standardly Covered
D5521	replace all teeth on complete denture – maxillary	D5670	Coverage guidelines are comparable to the guidelines for D5670
D5522	replace all teeth on complete denture – mandibular	D5671	Coverage guidelines are comparable to the guidelines for D5671
D5859	placement of semi-precision abutment – natural tooth	D5862	Not Standardly Covered
D5950	auricular molding	NA	Not Standardly Covered Submit to medical plan
D5961	nasal molding	NA	Not Standardly Covered Submit to medical plan

D5998	repair maxillofacial prosthesis, by report	NA	Not Standardly Covered Submit to medical plan
D6I08	placement of healing cap on implant body	D6I98	Considered part of other services
D6I09	removal of a screw-retained indirect restoration on an implant	D6I96	Considered part of other services
D6I24	implant/abutment retained interim fixed denture for partially edentulous arch – maxillary	D6I19	Coverage guidelines are comparable to the guidelines for D6I19
D6I25	implant/abutment retained interim fixed denture for partially edentulous arch – mandibular	D6I18	Coverage guidelines are comparable to the guidelines for D6I18
D6I26	replace all teeth and acrylic on hybrid prosthesis – per arch	D5670	Coverage guidelines are comparable to the guidelines for D5670
D7882	repair and/or reline of occlusal orthotic device	D788I	Coverage guidelines are comparable to the guidelines for D788I
D8689	re-cement or re-bond orthodontic fixed appliance	D8698	Considered part of other services
D9I27	chemodenervation of salivary gland – therapeutic, by report	NA	Not Standardly Covered Submit to medical plan
D9I32	chemodenervation of head, neck, and/or supporting musculature – therapeutic, by report	NA	Not Standardly Covered Submit to medical plan
D9I34	occipital nerve block	NA	Not Standardly Covered Submit to medical plan
D9I36	peripheral nerve block, by report	NA	Not Standardly Covered Submit to medical plan
D9I38	sphenopalatine ganglion block	NA	Not Standardly Covered Submit to medical plan
D9I40	tendon/ligament injection – per site	NA	Not Standardly Covered Submit to medical plan
D9I42	trigger point injection – per muscle	NA	Not Standardly Covered Submit to medical plan
D9937	cleaning and inspection of occlusal orthotic device – per appliance	D9936	Not Standardly Covered
D9958	overnight pulse oximetry assessment	D9956	Not Standardly Covered
D9998	dental case management – pediatric-to-adult transition services, patients with special healthcare needs	D9997	Not Standardly Covered

Nomenclature Change – Adjustment in Fees

CDT code	Nomenclature Change	Comparable existing code(s)	Coverage (subject to plan exclusions, limitations, and guidelines)
D9910	application of desensitizing medicament – per tooth	NA	Fee to be adjusted due to change from per visit to per tooth

*The procedure codes listed are from the *Code on Dental Procedures and Nomenclature*® ADA. The ADA may periodically change CDT Codes or descriptions. Different codes may be used to describe these procedures.

To obtain a copy of the CDT 2027 codes, visit the ADA's online catalog at ada.org or call **800.947.4746**.

If you have any questions, please contact our Customer Service Unit at **800.Cigna24 (800.244.6224)**, Monday through Friday, 9:00 a.m. to 7:00 p.m. ET.