

2025 WINDS DOWN

Dental Office Update



Winter 2025



**As 2025 winds down,
we're already looking
forward to a bright new
year!**

Thank you for all that you do!

We sincerely thank you for your partnership and the excellent care you provide to our members. May the coming year bring continued success, wellness, and many reasons to smile. Here's to a very merry and productive 2026!

2026 CDT Code and Processing Changes

Effective January 1, 2026, Delta Dental of Oregon (DDOR) will implement new codes that the ADA has outlined in the CDT-2026 handbook. The table below shows which new codes may be covered by DDOR. Any new CDT codes not listed on the chart are not covered under DDOR plans.

Please refer to the group limitations of each patient’s plan in Benefit Tracker for specific benefits information as some plans may benefit the new codes differently.

Also, the following codes will be deleted in the CDT-26 revision and DDOR will no longer accept these deleted codes after April 1, 2026.

- D1352
- D1705
- D1706
- D1707
- D1712
- D9248

CDT-2026 code books can be purchased through the American Dental Association at ada.org.

New 2026 CDT Codes:

Code	Nomenclature	2026 Coverage
D5909	maxillary guidance prosthesis with guide flange	Covered benefit under Class III/Major
D5930	maxillary guidance prosthesis without guide flange	Covered benefit under Class III/Major
D5938	resection prosthesis, maxillary complete removable	Covered benefit under Class III/Major
D5939	resection prosthesis, mandibular complete removable	Covered benefit under Class III/Major
D5940	resection prosthesis, maxillary partial removable	Covered benefit under Class III/Major

D5941	resection prosthesis, mandibular partial removable	Covered benefit under Class III/Major
D5942	resection prosthesis, maxillary implant/abutment supported removable prosthesis for edentulous arch	Covered benefit under Class III/Major
D5943	resection prosthesis, mandibular implant/abutment supported removable prosthesis for edentulous arch	Covered benefit under Class III/Major
D5944	resection prosthesis, maxillary implant/abutment supported removable prosthesis for the partial edentulous arch	Covered benefit under Class III/Major
D5945	resection prosthesis, mandibular implant/abutment supported removable prosthesis for the partial edentulous arch	Covered benefit under Class III/Major
D5946	resection prosthesis, maxillary implant/abutment supported fixed prosthesis for edentulous arch	Covered benefit under Class III/Major
D5947	resection prosthesis, mandibular implant/abutment supported fixed prosthesis for edentulous arch	Covered benefit under Class III/Major
D5948	resection prosthesis, maxillary implant/abutment supported fixed prosthesis for the partial edentulous arch	Covered benefit under Class III/Major
D5949	resection prosthesis, mandibular implant/abutment supported fixed prosthesis for the partial edentulous arch	Covered benefit under Class III/Major

D6280	implant maintenance procedures when a full arch removable implant/abutment supported denture is removed and reinserted, including cleansing of prosthesis and abutments – per arch	For plans that cover implants: benefits are limited to once every 36 months per arch. Not billable to the patient if performed within 12 months of initial implant prosthetic placement.
D6049	scaling and debridement of a single implant in the presence of peri-implantitis inflammation, bleeding upon probing and increased pocket depths, including cleaning of the implant surfaces, without flap entry and closure	For plans that cover implants: D6049 is a benefit once per implant every 24 months. Not billable to the patient when performed in the same quadrant same day as D4341/D4342, D4240/D4241, D4260/D4261 or D6101/D6102. Not billable to the patient when performed on the same day as D1110, D4910 or D4346. Not billable to the patient if performed within 24 months of initial therapy. Not billable to the patient if performed within 12 months of initial placement of the implant restoration.
D6196	removal of an indirect restoration on an implant retained abutment	Inclusive of other procedures and is not billable to the patient.
D9224	Administration of general anesthesia with advanced airway – first 15 minute increment or any portion thereof	Covered in conjunction with covered surgical procedures or when necessary due to concurrent medical conditions- by review.
D9225	Administration of general anesthesia with advanced airway – each subsequent 15 minute increment or any increment thereof	Covered in conjunction with covered surgical procedures or when necessary due to concurrent medical conditions- by review.

Best billing practices



Is your claims mailing address USPS compliant?

Please review the office address provided on your claim form and confirm that it adheres to [USPS delivery guidelines](#). If the address provided doesn't match the postal services guidelines, your mail may be returned to us as undeliverable. This slows down response time, costs money, delays claims and further delays your payments.

For the month of July 2025, over 5,000 submitted claims were delayed due to incorrect or mismatching addresses. These claims were processed but claim payments were delayed. To help us issue your claims payments faster, please follow the below guidelines.

USPS Address Compliance Guidelines: [Publication 28 - Postal Addressing Standards](#) | [Postal Explorer](#)

1. Use uppercase letters (optional but improves machine readability).
2. Avoid punctuation (no commas, periods, or symbols).
3. Use standard abbreviations:
 - ST = Street
 - AVE = Avenue
 - STE = Suite
 - FL = Floor
 - RM = Room
4. Include ZIP+4 codes for precise delivery.
5. Place the city, state, and ZIP Code on the last line.
6. Keep the delivery address line (street + suite) together.
7. Do not combine PO Box and street address—choose one.
8. Ensure secondary unit designators (e.g., STE, APT) are clearly stated and correctly abbreviated.

Common Mistakes to Avoid

1. Using punctuation (e.g., “1234 Main St., Suite 200”)
2. Omitting suite or unit numbers
3. Placing suite numbers on a separate line
4. Using non-standard abbreviations (e.g., “Suite” instead of “STE”)
5. Incorrect ZIP codes or missing ZIP+4

If your address needs to be updated, please fill out the Notice of Address Change and Additional Location form from our website ([Delta Dental of Oregon | Providers forms and documents](#)) and email to dpror@deltadentalor.com.

Medicare Non-Covered Service Waiver

For our contracted Medicare Advantage providers, please make sure that you use either our [non-covered services waiver](#) found on our [website](#), or a signed treatment plan including all information required by the Center for Medicare and Medicaid (CMS) prior to rendering treatment. The required non-covered services documentation must include CDT code(s), a description of the treatment, the patient's out of pocket cost, and their signed consent prior to rendering any non-covered services to be considered billable to the patient.

Member benefits are available on Benefit Tracker or by calling Delta Dental Customer Service at 888-217-2365.

Health through Oral Wellness Tips & Tricks
How to get the most from this program!



**Remember to reassess your Health through Oral
Wellness patients every 12-14 months!**

Please ensure your Health through Oral Wellness patients are being reassessed through PreViser within 12-14 months of their last qualifying risk assessment. Patients not reassessed during this timeframe will lose their extra enhanced benefits and be reassigned to their standard plan benefits.

Save the Date for Our Upcoming Webinars

Your Delta Dental of Oregon service representatives will be hosting several virtual workshops in the next couple of months via Microsoft Teams. Please see the below details to join us for our free webinars and be entered to win a \$25 gift card for attending!



Part 1

Beginners Basic Training

**Tuesday
Dec 2, 2025
12-1:00pm**

Join us to learn more about what this program can do for you and your patients. If you're new to the program, want to know more about it, or you could use a



Part 2

Advanced Tips & Tricks

**Tuesday
Dec 9, 2025
12-1:00pm**

Want to know even more! In the second half of this series, we will be reviewing additional PreViser features and updates. You'll have time to ask any questions and get feedback.



Oregon Providers Workshop

**Wednesday
Feb 4, 2026
12-1:00pm**

Some of the topics we'll be covering include policy changes, network options, helpful billing tips, enhanced programs, best practices, and more!

refresher, this is the
course for you

Watch your email for your official invitation to register! These invitations will be sent out about a month before each webinar. If you did not receive an invitation, please email us at rsvpdpror@deltadentalor.com and we can get you registered for the webinars of your choice.

In your RSVP, please include:

- Which event or events you would like to attend
- Attendees(s) name(s)
- Practice name & phone number
- Email address to receive your invite
- Email address for additional staff members wishing to attend using a different email



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