Risk Level	CDT Code	Description	Treatment Plan	MOC Frequency	SMA	Addt'l \$ per year	Addt'l \$ over 4 years
Low Risk	D0601	CRA - low risk	every 6 months	-	\$ 126.00	\$ 252.00	\$ 1,008.00
Low Risk	D1120	Prophylaxis - child	every 6 months	once every 6 months	\$ 30.00	covered by MOC	covered by MOC
Low Risk	D1206/ D1208	Topical application of fluoride varnish/ fluoride (child 0-5)	every 6 months	once every 6 months	\$ 18.00	covered by MOC	covered by MOC
Low Risk	D1206/ D1208	Topical application of fluoride varnish/ fluoride (child 6-20)	every 6 months	once every 6 months	\$ 8.00	covered by MOC	covered by MOC
Low Risk	D1354	Interim caries arresting medication application				\$ -	\$ -
Low Risk	D0145*	Oral Evaluation for a patient under 3	every 6 months	once every 3 months	\$ 20.00	covered by MOC	covered by MOC
Low Risk	or						
Low Risk	D0150	Comprehensive oral evalutation - new or established patient	once per new provider	once per new provider	\$ 25.00	covered by MOC	covered by MOC
Low Risk	or						
Low Risk	D0120	Periodic oral evalutaion - established patient	every 6 months	once every 6 months	\$ 15.00	covered by MOC	covered by MOC
					Total	\$ 252.00	\$ 1,008.00

Risk Level	CDT Code	Description	Treatment Plan	MOC Frequency	SMA	Addt'l \$ per year	Addt'l \$ over 4 years
Moderate Risk	D0602	CRA - moderate risk	every 4 months	-	\$ 126.00	\$ 378.00	\$ 1,512.00
Moderate Risk	D1120	Prophylaxis - child	every 4 months	once every 6 months	\$ 30.00	\$ 30.00	\$ 120.00
Moderate Risk	D1206/ D1208	Topical application of fluoride varnish/ fluoride (child 0-5)	every 4 months	once every 6 months	\$ 18.00	\$ 18.00	\$ 72.00
Moderate Risk	D1206/ D1208	Topical application of fluoride varnish/ fluoride (child 6-20)	every 4 months	once every 6 months	\$ 8.00	\$ 8.00	\$ 32.00
Moderate Risk	D1354	Interim caries arresting medication application				\$ -	\$ -
Moderate Risk	D0145*	Oral Evaluation for a patient under 3	every 4 months	once every 3 months	\$ 20.00	covered by MOC	covered by MOC
Moderate Risk	or						
Moderate Risk	D0150	Comprehensive oral evalutation - new or established patient	once per new provider	once per new provider	\$ 25.00	covered by MOC	covered by MOC
Moderate Risk	or						
Moderate Risk	D0120	Periodic oral evalutaion - established patient	every 4 months	once every 6 months	\$ 15.00	\$ 15.00	\$ 60.00
					Total	\$ 441.00	\$ 1,764.00

Risk Level	CDT Code	Description	Treatment Plan	MOC Frequency	SMA	Addt'l \$ per year	Addt'l \$ over 4 years
High Risk	D0603	CRA - high risk	every 3 months	-	\$ 126.00	\$ 504.00	\$ 2,016.00
High Risk	D1120	Prophylaxis - child	every 3 months	once every 6 months	\$ 30.00	\$ 60.00	\$ 240.00
High Risk	D1206/ D1208	Topical application of fluoride varnish/ fluoride (child 0-5)	every 3 months	once every 6 months	\$ 18.00	\$ 36.00	\$ 144.00
High Risk	D1206/ D1208	Topical application of fluoride varnish/ fluoride (child 6-20)	every 3 months	once every 6 months	\$ 8.00	\$ 16.00	\$ 64.00
High Risk	D1354	Interim caries arresting medication application	Every 6 Months		\$ 35.00	\$ 70.00	\$ 280.00
High Risk	D0145*	Oral Evaluation for a patient under 3	every 3 months	once every 3 months	\$ 20.00	covered by MOC	covered by MOC
High Risk	or						
High Risk	D0150	Comprehensive oral evalutation - new or established patient	once per new provider	once per new provider	\$ 25.00	covered by MOC	covered by MOC
High Risk	or						
High Risk	D0120	Periodic oral evalutaion - established patient	every 3 months	once every 6 months	\$ 15.00	\$ 30.00	\$ 120.00
					Total	\$ 700.00	\$ 2,800.00

Assumptions:

- 1. All low risk treatment plan procedures are covered by the MOC
- 2. All D0145 will be covered by MOC at any risk level, per *DOIL 15-248
- 3. All D0150 should be covered by MOC for initial exam, followed by D0120
- 4. MOC will have a section specific to 1115 Waiver