State	Code	How Medicaid uses the code	Criteria / frequency	Fee
New York	D9997	Per-visit IDD/SHCN incentive compensating for the additional knowledge, skill, equipment, time and personnel required to treat qualifying patients. Paid in addition to the dental procedures performed.	Primarily individuals receiving ongoing services through OPWDD programs and identified through specified recipient exception codes. Also permitted in certain protective-stabilization circumstances. Cannot be billed with D9430 or procedures under deep sedation/GA.	$29/visit
Nebraska	D9997	Used as an SHCN identifier to permit individualized service frequency rather than as an enhanced-payment code.	SHCN criteria apply. Additional services require documentation supporting diagnosis/SHCN status and medical necessity for increased frequency.	$0 / identifier

North Dakota	D9997	Dental case management for patients with special health care needs.	Documentation must support SHCN status, special treatment considerations and patient-specific medical/mental-health condition. D9920 cannot also be billed. Case-management codes collectively generally limited to 2/calendar year.	$22.13
North Dakota	D9992	Care coordination involving complex dental/medical care.	Must involve multiple providers; record must identify/document providers involved in coordinated care. Case-management codes collectively generally limited to 2/calendar year.	$22.13

Oregon	D9997	Dental case management for a patient with special health care needs.	Subject to Oregon Medicaid coverage/billing requirements; FFS and CCO payment may differ.	$47.44
Oregon	D9992	Dental case management care coordination.	Subject to Oregon Medicaid coverage/billing requirements; CCO payment may differ from FFS.	$73.19
North Dakota	D0191	Limited assessment of a patient; can support access through wellness/EPSDT, school and teledentistry settings.	D0190 / D0191 combined allowance of 2/year.	Current 2026 rate not independently verified
Washington	D0191	Limited clinical assessment/pre-diagnostic service, including community/nontraditional settings to identify need and facilitate treatment.	Provider/setting restrictions apply; limited assessment rather than comprehensive examination.	Current 2026 rate not independently verified