

	DENTAL PLAN OVERVIEW (SAMPLE FEE SCHEDULE)	HMO	SCHEDULED	PPO	DISCOUNT
		DENTAL	DENTAL	DENTAL	DENTAL
		PLAN	PLAN	PLAN	PLAN
CODE	PROCEDURE NAME	*SET COPY	*PAID BY CARRIER	*PERCENTAGE BASED, \$1,000 annual max	*ESTIMATED/STARTS AT
D0120	Periodic Oral Evaluation	\$0.00	\$27.00	100%	\$16.00
D0140	Limited Oral Evaluation - Problem Focused	\$0.00	\$41.00	100%	20% - 60%
D0145	Oral Evaluation – Patient under 3-yrs of Age	\$0.00	\$37.00	100%	20% - 60%
D0150	Comprehensive Oral Evaluation	\$0.00	\$44.00	100%	\$21.00
D0170	Re-evaluation - Limited-Problem Focused (not post-op visit) (benefited for accidental injury monitoring only)	\$0.00	\$35.00	100%	20% - 60%
D0180	Comprehensive periodontal evaluation - new or established patient	\$0.00	\$58.00	100%	20% - 60%
D0210	Intraoral - Complete Series - FMX (including Bitewings)	\$0.00	\$75.00	100%	20% - 60%
D0220	Intraoral - Periapical First Film	\$4.00	\$16.00	100%	20% - 60%
D0230	Intraoral - Periapical Each additional Film (6 or more is considered FMX)	\$2.00	\$13.00	100%	20% - 60%
D0240	Intraoral - Occlusal Film	\$0.00	\$22.00	100%	20% - 60%
D0250	Extraoral – First Film (by report)	\$0.00	\$31.00	100%	20% - 60%
D0260	Extraoral – Each Additional Film (by report)	-	\$27.00	100%	20% - 60%
D0270	Bitewing - Single Film	\$0.00	\$16.00	100%	\$12.00
D0272	Bitewings – Two Films	\$0.00	\$24.00	100%	\$15.00
D0273	Bitewings – Three Films	\$0.00	\$29.00	100%	\$20.00
D0274	Bitewings - Four Films	\$0.00	\$35.00	100%	\$24.00
D0277	Vertical Bitewings - Seven to Eight Films	\$27.00	\$52.00	100%	20% - 60%
D0330	Panoramic Film	\$45.00	\$61.00	100%	20% - 60%
D0431	Adjunctive Pre-diagnostic test aiding in the detection of muscosal abnormalities	\$65.00	\$24.00	100%	20% - 60%
D0472	Accession of Tissue, Gross Exam including report	\$0.00	\$33.00	100%	20% - 60%
D0473	Accession of Tissue, Gross and Micro Exam including report	\$0.00	\$70.00	100%	20% - 60%
D0474	Accession of Tissue, Gross and Micro Exam (including assessment of . surgical margins) including report	\$0.00	\$78.00	100%	20% - 60%
D0486	Accession of brush biopsy sample, microscopic examination, preparation and transmission of written report	\$0.00	\$57.00	100%	20% - 60%
D1110	Prophylaxis – Adult (age 14 and above)	\$0.00/\$40.00	\$52.00	100%	\$34.00
D1120	Prophylaxis - Child	\$0.00/\$25.00	\$37.00	100%	20% - 60%
D1206	Topical application of fluoride varnish	\$10.00	\$21.00	100%	20% - 60%
D1208	Topical application of fluoride - excluding varnish	\$0.00	\$20.00	100%	20% - 60%
D1351	Sealant - per tooth	\$0.00	\$30.00	100%	20% - 60%
D1510	Space Maintainer - Fixed - Unilateral	\$0.00	\$187.00	100%	20% - 60%
D1515	Space Maintainer - Fixed - Bilateral	\$0.00	\$279.00	100%	20% - 60%
D1520	Space Maintainer - Removable - Unilateral	\$0.00	\$224.00	100%	20% - 60%
D1525	Space Maintainer - Removable - Bilateral	\$0.00	\$332.00	100%	20% - 60%
D1550	Recementation of Space Maintainer (per Space Maintainer)	\$10.00	\$39.00	100%	20% - 60%
D1555	Removal of fixed space maintainer	\$10.00	\$39.00	100%	20% - 60%
D2140	Amalgam - One surface, primary or permanent	\$0.00	\$56.00	50%	20% - 60%
D2150	Amalgam – Two surfaces, primary or permanent	\$0.00	\$68.00	50%	20% - 60%
D2160	Amalgam - Three surfaces, primary or permanent	\$0.00	\$82.00	50%	20% - 60%
D2161	Amalgam – Four or more surfaces, primary or permanent	\$0.00	\$96.00	50%	20% - 60%
D2330	Resin - One surface, Anterior	\$25.00	\$64.00	50%	\$60.00
D2331	Resin - Two surfaces, Anterior	\$35.00	\$79.00	50%	20% - 60%
D2332	Resin - Three surfaces, Anterior	\$45.00	\$95.00	50%	20% - 60%
D2335	Resin - Four or more surfaces or involving incisal angle (Anterior)	\$75.00	\$114.00	50%	20% - 60%
D2390	Resin-based composite crown, anterior	\$105.00	\$139.00	50%	20% - 60%
D2391	Resin-based composite - one surface, posterior	\$55.00	\$71.00	50%	\$75.00
D2392	Resin-based composite - two surfaces, posterior	\$70.00	\$93.00	50%	20% - 60%
D2393	Resin-based composite - three surfaces, posterior	\$85.00	\$114.00	50%	20% - 60%
D2394	Resin-Based composite - four or more surfaces, posterior	\$105.00	\$128.00	50%	20% - 60%
D2510	Inlay - Metallic - One surface	\$85.00	\$128.00	25%	20% - 60%
D2520	Inlay - Metallic - Two surfaces	\$96.00	\$172.00	25%	20% - 60%
D2530	Inlay - Metallic - Three or more surfaces	\$120.00	\$215.00	25%	20% - 60%
D2542	Onlay-Metallic-Two Surfaces	\$290.00	\$231.00	25%	20% - 60%
D2543	Onlay-Metallic-Three surfaces	\$300.00	\$242.00	25%	20% - 60%
D2544	Onlay-Metallic-Four or more surfaces	\$330.00	\$251.00	25%	20% - 60%
D2610	Inlay – Porcelain/Ceramic - One surface	\$250.00	\$179.00	25%	20% - 60%
D2620	Inlay – Porcelain/Ceramic - Two surfaces	\$275.00	\$210.00	25%	20% - 60%
D2630	Inlay – Porcelain/Ceramic - Three or more surfaces	\$300.00	\$224.00	25%	20% - 60%

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		DENTAL	DENTAL	DENTAL	DENTAL
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CODE	PROCEDURE NAME	*SET COPY	*PAID BY CARRIER	*PERCENTAGE BASED, \$1,000 annual max	*ESTIMATED/STARTS AT
D2642	Onlay - Porcelain/Ceramic - Two surfaces	\$335.00	\$238.00	25%	20% - 60%
D2643	Onlay - Porcelain/Ceramic - Three surfaces	\$365.00	\$242.00	25%	20% - 60%
D2644	Onlay - Porcelain/Ceramic - Four or more surfaces	\$375.00	\$251.00	25%	20% - 60%
D2650	Inlay - Resin-Based Composite - One surface	\$195.00	\$96.00	25%	20% - 60%
D2651	Inlay - Resin-Based Composite - Two surfaces	\$220.00	\$166.00	25%	20% - 60%
D2652	Inlay - Resin-Based Composite - Three or more surfaces	\$255.00	\$179.00	25%	20% - 60%
D2662	Onlay - Resin-Based Composite - Two surfaces	\$230.00	\$187.00	25%	20% - 60%
D2663	Onlay - Resin-Based Composite - Three surfaces	\$250.00	\$217.00	25%	20% - 60%
D2664	Onlay - Resin-Based Composite - Four or more surfaces	\$280.00	\$223.00	25%	20% - 60%
D2710	Crown - Resin (Indirect)	\$195.00	\$92.00	25%	20% - 60%
D2720	Crown - Resin with High Noble Metal	\$240.00	\$236.00	25%	20% - 60%
D2721	Crown - Resin with Predominantly Base Metal	\$240.00	\$192.00	25%	20% - 60%
D2722	Crown - Resin with Noble Metal	\$240.00	\$191.00	25%	20% - 60%
D2740	Crown - Porcelain/Ceramic Substrate	\$240.00	\$252.00	25%	20% - 60%
D2750	Crown - Porcelain Fused to High Noble Metal	\$240.00	\$237.00	25%	\$557.00
D2751	Crown - Porcelain Fused to Predominantly Base Metal	\$240.00	\$211.00	25%	20% - 60%
D2752	Crown - Porcelain Fused to Noble Metal	\$240.00	\$223.00	25%	20% - 60%
D2780	Crown-3/4 Cast High Noble metal	\$240.00	\$249.00	25%	20% - 60%
D2781	Crown - 3/4 Cast High predominantly Base Metal	\$240.00	\$77.00	25%	20% - 60%
D2782	Crown - 3/4 Cast Noble Metal	\$240.00	\$242.00	25%	20% - 60%
D2783	Crown - 3/4 Cast Porcelain/Ceramic	\$240.00	\$250.00	25%	20% - 60%
D2790	Crown - Full Cast High Noble Metal	\$240.00	\$231.00	25%	\$547.00
D2791	Crown - Full Cast Predominantly Base Metal	\$240.00	\$223.00	25%	20% - 60%
D2792	Crown - Full Cast Noble Metal	\$240.00	\$235.00	25%	20% - 60%
D2910	Recement Inlay	\$10.00	\$22.00	25%	20% - 60%
D2920	Recement Crown	\$10.00	\$21.00	25%	20% - 60%
D2930	Prefabricated Stainless Steel Crown - Primary tooth	\$40.00	\$55.00	25%	20% - 60%
D2931	Prefabricated Stainless Steel Crown - Permanent tooth	\$40.00	\$62.00	25%	20% - 60%
D2932	Prefabricated Resin Crown	\$92.00	\$65.00	25%	20% - 60%
D2950	Core Buildup, including any pins	\$40.00	\$56.00	25%	20% - 60%
D2951	Pin Retention - per tooth, in addition to restoration	\$12.00	\$10.00	25%	20% - 60%
D2952	Cast Post and Core in addition to Crown	\$85.00	\$83.00	25%	20% - 60%
D2954	Prefabricated Post and Core in addition to Crown	\$75.00	\$70.00	25%	20% - 60%
D2980	Crown repair, by report	\$95.00	\$47.00	25%	20% - 60%
D3110	Pulp Cap - direct	\$20.00	\$21.00	25%	20% - 60%
D3120	Pulp Cap - indirect	\$20.00	\$17.00	25%	20% - 60%
D3220	Therapeutic Pulpotomy (excluding final restoration)	\$25.00	\$37.00	25%	20% - 60%
D3221	Gross Pulpal Debridement, Primary and Permanent	\$95.00	\$39.00	25%	20% - 60%
D3230	Pulpal Therapy (Resorbable Filling) - Anterior, Primary tooth (excluding final rest	\$45.00	\$51.00	25%	20% - 60%
D3240	Pulpal Therapy (Resorbable Filling) - Posterior, Primary tooth (excluding final rest	\$40.00	\$52.00	25%	20% - 60%
D3310	Anterior (excluding final restoration)	\$100.00	\$162.00	25%	\$320.00
D3320	Bicuspid (excluding final restoration)	\$185.00	\$190.00	25%	20% - 60%
D3330	Molar (excluding final restoration)	\$225.00	\$242.00	25%	\$477.00
D3332	Incomplete Endodontic Therapy (inoperable or fractured tooth)	\$75.00	\$83.00	25%	20% - 60%
D3333	Internal Root Repair of Perforation Defects	\$125.00	\$64.00	25%	20% - 60%
D3346	Retreatment of previous Root Canal Therapy – Anterior (at least 6 months after previous root Canal Therapy)	\$280.00	\$186.00	25%	20% - 60%
D3347	Retreatment of previous Root Canal Therapy – Bicuspid (at least 6 months after previous root Canal Therapy)	\$305.00	\$214.00	25%	20% - 60%
D3348	Retreatment of previous Root Canal Therapy – Molar (at least 6 months after previous root Canal Therapy)	\$380.00	\$266.00	25%	20% - 60%
D3351	Apexification/Recalcification - Initial Visit (apical closure/calccific repair of perforations, root resorption, etc.)	\$90.00	\$70.00	25%	20% - 60%
D3352	Apexification/Recalcification - interim medication replacement	\$90.00	\$41.00	25%	20% - 60%
D3353	Apexification/Recalcification - Final Visit (includes completed root canal therapy)	\$90.00	\$115.00	25%	20% - 60%
D3410	Apicoectomy/Periradicular Surgery - Anterior	\$96.00	\$189.00	25%	20% - 60%
D3421	Apicoectomy/Periradicular Surgery - Bicuspid (first root)	\$305.00	\$204.00	25%	20% - 60%
D3425	Apicoectomy/Periradicular Surgery - Molar (first root)	\$320.00	\$223.00	25%	20% - 60%
D3426	Apicoectomy/Periradicular Surgery (each additional root)	\$80.00	\$70.00	25%	20% - 60%
D3430	Retrograde Filling - per root	\$60.00	\$51.00	25%	20% - 60%

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D3450	Root Amputation - per root	\$100.00	\$115.00	25%	20% - 60%
D3920	Hemisection (including any root removal), not including Root Canal Therapy	\$85.00	\$83.00	25%	20% - 60%
D4210	Gingivectomy or Gingivoplasty - per quadrant	\$175.00	\$125.00	25%	20% - 60%
D4211	Gingivectomy or Gingivoplasty, per tooth	\$72.00	\$49.00	25%	20% - 60%
D4240	Gingival Flap Procedure, including Root Planing - per quadrant	\$187.00	\$159.00	25%	20% - 60%
D4241	Gingival Flap Procedure, including Root Planing - one to three teeth per quadrant	\$175.00	\$117.00	25%	20% - 60%
D4249	Clinical Crown Lengthening - Hard Tissue	\$175.00	\$191.00	25%	20% - 60%
D4260	Osseous Surgery (including Flap Entry and Closure) - per quadrant	\$375.00	\$241.00	25%	20% - 60%
D4261	Osseous Surgery (including Flap Entry and Closure) - one to three teeth, per quadrant	\$325.00	\$211.00	25%	20% - 60%
D4263	Bone Replacement Graft - first site in quadrant	\$450.00	\$102.00	25%	20% - 60%
D4264	Bone Replacement Graft - each additional site in quadrant	\$325.00	\$64.00	25%	20% - 60%
D4270	Pedicle Soft Tissue Graft Procedure	\$240.00	\$194.00	25%	20% - 60%
D4273	Subepithelial Connective Tissue Graft Procedure (including Donor Site Surgery)	\$300.00	\$242.00	25%	20% - 60%
D4274	Distal or Proximal Wedge Procedure (when not performed in conjunction with Surgical procedures in the same area)	\$120.00	\$115.00	25%	20% - 60%
D4275	Soft tissue allograft	\$502.00	\$198.00	25%	20% - 60%
D4276	Combined connective tissue and double pedicle graft	\$65.00	\$249.00	25%	20% - 60%
D4341	Periodontal Scaling and Root Planing, per quadrant	\$45.00	\$54.00	25%	\$111.00
D4342	Periodontal Scaling and Root Planing - one to three teeth, per quadrant	\$35.00	\$36.00	25%	20% - 60%
D4910	Periodontal Maintenance Procedures (following active therapy and in lieu of a D1110)	\$45.00	\$31.00	25%	\$71.00
D5110	Complete Denture - Maxillary	\$260.00	\$268.00	25%	\$701.00
D5120	Complete Denture - Mandibular	\$260.00	\$268.00	25%	\$701.00
D5130	Immediate Denture - Maxillary	\$280.00	\$297.00	25%	20% - 60%
D5140	Immediate Denture - Mandibular	\$280.00	\$297.00	25%	20% - 60%
D5211	Maxillary Partial Denture - Resin Base (including any conventional clasps, rests and teeth)	\$260.00	\$213.00	25%	20% - 60%
D5212	Mandibular Partial Denture - Resin Base (including any conventional clasps,rests and teeth)	\$260.00	\$235.00	25%	20% - 60%
D5213	Maxillary Partial Denture - Cast Metal Framework with Resin Denture Bases (inclu	\$280.00	\$303.00	25%	\$795.00
D5214	Mandibular Partial Denture - Cast Metal Framework with Resin Denture Bases (incl	\$280.00	\$303.00	25%	\$795.00
D5281	Removable Unilateral Partial Denture - One piece cast Metal (including clasps and teeth)	\$465.00	\$172.00	25%	20% - 60%
D5410	Adjust Complete Denture - Maxillary	\$10.00	\$17.00	25%	20% - 60%
D5411	Adjust Complete Denture - Mandibular	\$10.00	\$17.00	25%	20% - 60%
D5421	Adjust Partial Denture - Maxillary	\$15.00	\$17.00	25%	20% - 60%
D5422	Adjust Partial Denture - Mandibular	\$15.00	\$17.00	25%	20% - 60%
D5510	Repair broken Complete Denture Base	\$15.00	\$38.00	25%	20% - 60%
D5520	Replace missing or broken teeth - Complete Denture (each tooth)	\$10.00	\$32.00	25%	20% - 60%
D5610	Repair Resin Denture Base	\$15.00	\$37.00	25%	20% - 60%
D5620	Repair Cast Framework	\$30.00	\$45.00	25%	20% - 60%
D5630	Repair or Replace Broken Clasp	\$15.00	\$45.00	25%	20% - 60%
D5640	Replace broken teeth - per tooth	\$10.00	\$33.00	25%	20% - 60%
D5650	Add tooth to existing Partial Denture	\$30.00	\$40.00	25%	20% - 60%
D5660	Add Clasp to existing Partial Denture	\$30.00	\$46.00	25%	20% - 60%
D5670	Replace all teeth and acrylic on cast metal framework (maxillary)	\$100.00	\$121.00	25%	20% - 60%
D5671	Replace all teeth and acrylic on cast metal framework (mandibular)	\$100.00	\$128.00	25%	20% - 60%
D5710	Rebase Complete Maxillary Denture	\$75.00	\$102.00	25%	20% - 60%
D5711	Rebase Complete Mandibular Denture	\$75.00	\$102.00	25%	20% - 60%
D5720	Rebase Maxillary Partial Denture	\$75.00	\$102.00	25%	20% - 60%
D5721	Rebase Mandibular Partial Denture	\$75.00	\$102.00	25%	20% - 60%
D5730	Reline Complete Maxillary Denture (chair side)	\$45.00	\$68.00	25%	20% - 60%
D5731	Reline Complete Mandibular Denture (chair side)	\$45.00	\$65.00	25%	20% - 60%
D5740	Reline Maxillary Partial Denture (chair side)	\$45.00	\$64.00	25%	20% - 60%
D5741	Reline mandibular Partial Denture (chair side)	\$45.00	\$64.00	25%	20% - 60%
D5750	Reline Complete Maxillary Denture (laboratory)	\$35.00	\$89.00	25%	\$194.00
D5751	Reline Complete Mandibular Denture (laboratory)	\$35.00	\$89.00	25%	\$194.00
D5760	Reline Maxillary Partial Denture (laboratory)	\$35.00	\$89.00	25%	20% - 60%
D5761	Reline Mandibular Partial Denture (laboratory)	\$35.00	\$89.00	25%	20% - 60%
D5810	Interim complete denture (maxillary)	\$250.00	\$140.00	25%	20% - 60%
D5811	Interim complete denture (mandibular)	\$250.00	\$144.00	25%	20% - 60%

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D5820	Interim partial denture (maxillary)	\$250.00	\$116.00	25%	20% - 60%
D5821	Interim partial denture (mandibular)	\$250.00	\$124.00	25%	20% - 60%
D5850	Tissue Conditioning, Maxillary	\$25.00	\$32.00	25%	20% - 60%
D5851	Tissue Conditioning, Mandibular	\$25.00	\$32.00	25%	20% - 60%
D6058	Abutment supported porcelain/ceramic crown	\$745.00	\$315.00	***	20% - 60%
D6059	Abutment supported porcelain fused to metal crown (high noble metal)	\$745.00	\$311.00	***	20% - 60%
D6060	Abutment supported porcelain fused to metal crown (predominantly base metal)	\$745.00	\$281.00	***	20% - 60%
D6061	Abutment supported porcelain fused to metal crown (noble metal)	\$745.00	\$293.00	***	20% - 60%
D6062	Abutment supported cast metal crown (high noble metal)	\$745.00	\$306.00	***	20% - 60%
D6063	Abutment supported cast metal crown (predominantly base metal)	\$745.00	\$267.00	***	20% - 60%
D6064	Abutment supported cast metal crown (noble metal)	\$745.00	\$344.00	***	20% - 60%
D6065	Implant supported porcelain/ceramic crown	\$745.00	\$332.00	***	20% - 60%
D6066	Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal)	\$745.00	\$332.00	***	20% - 60%
D6067	Implant supported metal crown (titanium, titanium all, high noble metal)	\$745.00	\$330.00	***	20% - 60%
D6068	Abutment supported retainer of porcelain/ceramic FPD	\$745.00	\$286.00	***	20% - 60%
D6069	Abutment supported retainer for porcelain fused to metal FPD (high noble metal)	\$745.00	\$306.00	***	20% - 60%
D6070	Abutment supported retainer for porcelain fused to metal FPD (predominately base metal)	\$745.00	\$303.00	***	20% - 60%
D6071	Abutment supported retainer for porcelain fused to metal FPD (noble metal)	\$745.00	\$306.00	***	20% - 60%
D6072	Abutment supported retainer for cast metal FPD (high noble metal)	\$745.00	\$264.00	***	20% - 60%
D6073	Abutment supported retainer for cast metal FPD (predominately base metal)	\$745.00	\$281.00	***	20% - 60%
D6074	Abutment supported retainer for cast metal FPD (noble metal)	\$745.00	\$286.00	***	20% - 60%
D6075	Implant supported retainer for ceramic FPD	\$745.00	\$306.00	***	20% - 60%
D6076	Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy or high noble metal)	\$745.00	\$319.00	***	20% - 60%
D6077	Implant supported retainer for cast metal FPD (titanium, titanium alloy or high noble metal)	\$745.00	\$249.00	***	20% - 60%
D6092	Recement of implant/abutment supported crown	\$45.00	\$23.00	***	20% - 60%
D6093	Recement of implant/abutment supported fixed partial denture	\$65.00	\$32.00	***	20% - 60%
D6210	Pontic - Cast High Noble Metal	\$220.00	\$223.00	25%	20% - 60%
D6211	Pontic - Cast Predominantly Base Metal	\$220.00	\$207.00	25%	20% - 60%
D6212	Pontic - Cast Noble Metal	\$220.00	\$228.00	25%	20% - 60%
D6240	Pontic - Porcelain fused to High Noble Metal	\$240.00	\$232.00	25%	20% - 60%
D6241	Pontic - Porcelain fused to Predominantly Base Metal	\$240.00	\$207.00	25%	20% - 60%
D6242	Pontic - Porcelain fused to Noble Metal	\$240.00	\$222.00	25%	20% - 60%
D6245	Pontic - Porcelain/Ceramic	\$240.00	\$250.00	25%	20% - 60%
D6250	Pontic - Resin with High Noble Metal	\$240.00	\$230.00	25%	20% - 60%
D6251	Pontic - Resin with Predominantly Base Metal	\$240.00	\$204.00	25%	20% - 60%
D6252	Pontic - Resin with Noble Metal	\$240.00	\$217.00	25%	20% - 60%
D6545	Retainer - Cast Metal for Resin Fixed Prosthesis	\$235.00	\$102.00	25%	20% - 60%
D6548	Retainer - Porcelain/Ceramic (resin bonded fixed prosthesis)	\$235.00	\$121.00	25%	20% - 60%
D6600	Inlay – porcelain/ceramic, two surfaces	\$240.00	\$191.00	25%	20% - 60%
D6601	Inlay – Porcelain/ceramic, three or more surfaces	\$240.00	\$242.00	25%	20% - 60%
D6602	Inlay - cast high noble metal, two surfaces	\$240.00	\$179.00	25%	20% - 60%
D6603	Inlay - cast high noble metal, three or more surfaces	\$240.00	\$204.00	25%	20% - 60%
D6604	Inlay - cast predominantly base metal, two surfaces	\$240.00	\$166.00	25%	20% - 60%
D6605	Inlay - cast predominantly base metal, three or more surfaces	\$240.00	\$230.00	25%	20% - 60%
D6606	Inlay - cast noble metal, two surfaces	\$240.00	\$177.00	25%	20% - 60%
D6607	Inlay - cast noble metal, three or more surfaces	\$240.00	\$228.00	25%	20% - 60%
D6608	Onlay - porcelain/ceramic, two surfaces	\$240.00	\$229.00	25%	20% - 60%
D6609	Onlay - porcelain/ceramic, three or more surfaces	\$240.00	\$242.00	25%	20% - 60%
D6610	Onlay - cast high noble metal, two surfaces	\$240.00	\$204.00	25%	20% - 60%
D6611	Onlay - cast high noble metal, three or more surfaces	\$240.00	\$242.00	25%	20% - 60%
D6612	Onlay - cast predominantly base metal, two surfaces	\$240.00	\$191.00	25%	20% - 60%
D6613	Onlay - cast predominantly base metal, three or more surfaces	\$240.00	\$241.00	25%	20% - 60%
D6614	Onlay - cast noble metal, two surfaces	\$240.00	\$196.00	25%	20% - 60%
D6615	Onlay - cast noble metal, three or more surfaces	\$240.00	\$245.00	25%	20% - 60%
D6720	Crown - Resin with High Noble Metal	\$240.00	\$230.00	25%	20% - 60%
D6721	Crown - Resin with Predominantly Base Metal	\$240.00	\$209.00	25%	20% - 60%

	DENTAL PLAN OVERVIEW (SAMPLE FEE SCHEDULE)	HMO	SCHEDULED	PPO	DISCOUNT
		DENTAL	DENTAL	DENTAL	DENTAL
		PLAN	PLAN	PLAN	PLAN
CODE	PROCEDURE NAME	*SET COPY	*PAID BY CARRIER	*PERCENTAGE BASED, \$1,000 annual max	*ESTIMATED/STARTS AT
D6722	Crown - Resin with Noble Metal	\$240.00	\$212.00	25%	20% - 60%
D6740	Crown - Porcelain/Ceramic	\$240.00	\$252.00	25%	20% - 60%
D6750	Crown - Porcelain fused to High Noble Metal	\$240.00	\$235.00	25%	20% - 60%
D6751	Crown - Porcelain fused to Predominantly Base Metal	\$240.00	\$210.00	25%	20% - 60%
D6752	Crown - Porcelain fused to Noble Metal	\$240.00	\$223.00	25%	20% - 60%
D6780	Crown - 3/4 Cast High Noble Metal	\$240.00	\$230.00	25%	20% - 60%
D6781	Crown - 3/4 Cast Predominately Based Metal	\$240.00	\$217.00	25%	20% - 60%
D6782	Crown - 3/4 Cast Noble Metal	\$240.00	\$232.00	25%	20% - 60%
D6783	Crown - 3/4 Porcelain/Ceramic	\$240.00	\$255.00	25%	20% - 60%
D6790	Crown - Full Cast High Noble Metal	\$220.00	\$228.00	25%	20% - 60%
D6791	Crown - Full Cast Predominantly Base Metal	\$220.00	\$210.00	25%	20% - 60%
D6792	Crown - Full Cast Noble Metal	\$220.00	\$230.00	25%	20% - 60%
D6930	Recement Fixed Partial Denture	\$10.00	\$31.00	25%	20% - 60%
D6940	Stress breaker	\$125.00	\$64.00	25%	20% - 60%
D6950	Precision attachment	\$195.00	\$64.00	25%	20% - 60%
D7111	Coronal remnants - deciduous tooth	\$45.00	\$48.00	50%	20% - 60%
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	\$10.00	\$62.00	25%	\$60.00
D7210	Surgical Removal of Erupted tooth requiring elevation of Mucoperiosteal Flap	\$25.00	\$57.00	25%	20% - 60%
D7220	Removal of Impacted tooth - Soft Tissue	\$40.00	\$70.00	25%	20% - 60%
D7230	Removal of Impacted tooth - Partially Bony	\$60.00	\$89.00	25%	20% - 60%
D7240	Removal of Impacted tooth - Completely Bony	\$75.00	\$102.00	25%	20% - 60%
D7241	Removal of Impacted tooth - Completely Bony, with unusual surgical complications	\$128.00	\$121.00	25%	20% - 60%
D7250	Surgical Removal of Residual tooth roots (cutting procedure)	\$25.00	\$63.00	25%	20% - 60%
D7260	Oroantral Fistula Closure	\$160.00	\$228.00	25%	20% - 60%
D7261	Primary closure of a sinus perforation	\$275.00	\$153.00	25%	20% - 60%
D7270	Tooth Reimplantation and/or stabilization of Accidentally Evulsed or Displaced	\$50.00	\$99.00	25%	20% - 60%
D7272	Tooth transplantation (includes reimplantation from one site to another and splinting and/or stabilization	\$100.00	\$140.00	25%	20% - 60%
D7280	Surgical access of an unerupted tooth	\$125.00	\$115.00	25%	20% - 60%
D7282	Mobilization of erupted or malpositioned tooth to aid eruption	\$125.00	\$57.00	25%	20% - 60%
D7285	Biopsy of Oral Tissue - Hard (bone, tooth)	\$115.00	\$112.00	25%	20% - 60%
D7286	Biopsy of Oral Tissue - Soft (all others)	\$75.00	\$77.00	25%	20% - 60%
D7287	Cytology sample collection	\$65.00	\$32.00	25%	20% - 60%
D7310	Alveoloplasty in conjunction with Extractions - per quadrant	\$20.00	\$55.00	25%	20% - 60%
D7320	Alveoloplasty not in conjunction with Extractions - per quadrant	\$50.00	\$77.00	25%	20% - 60%
D7340	Vestibuloplasty - Ridge Extension (secondary Epithelialization)	\$370.00	\$217.00	25%	20% - 60%
D7410	Radical Excision - Lesion Diameter up to 1.25 Cm	\$25.00	\$96.00	25%	20% - 60%
D7411	Excision of benign lesion greater than 1.25 cm	\$50.00	\$153.00	25%	20% - 60%
D7412	Excision of benign lesion, complicated	\$55.00	\$242.00	25%	20% - 60%
D7413	Excision of malignant lesion up to 1.25 cm	-	\$133.00	25%	20% - 60%
D7414	Excision of malignant lesion greater than 1.25 cm	-	\$231.00	25%	20% - 60%
D7440	Excision of Malignant Tumor-Lesion Diameter up to 1.25 Cm	-	\$254.00	25%	20% - 60%
D7441	Excision of Malignant Tumor - Lesion Diameter greater than 1.25 Cm	-	\$255.00	25%	20% - 60%
D7450	Removal of Odontogenic Cyst or Tumor - Lesion Diameter up to 1.25 Cm	\$65.00	\$115.00	25%	20% - 60%
D7451	Removal of Odontogenic Cyst or Tumor - Lesion Diameter greater than 1.25 Cm	-	\$191.00	25%	20% - 60%
D7460	Removal of Nonodontogenic Cyst or Tumor - Lesion Diameter up to 1.25 Cm	-	\$113.00	25%	20% - 60%
D7461	Removal of Nonodontogenic Cyst or Tumor - Lesion Diameter greater than 1.25 Cm	-	\$169.00	25%	20% - 60%
D7465	Destruction of lesion(s) by physical or chemical method, by report	-	\$64.00	25%	20% - 60%
D7471	Removal of Exostosis - per site (up to maximum of 3 sites)	\$95.00	\$128.00	25%	20% - 60%
D7472	Removal of torus palatinus (up to 1 site)	\$95.00	\$165.00	25%	20% - 60%
D7473	Removal of torus mandibularis (up to 2 sites)	\$95.00	\$142.00	25%	20% - 60%
D7485	Surgical reduction of osseous tuberosity	\$95.00	\$117.00	25%	20% - 60%
D7510	Incision and Drainage of Abscess - Intraoral Soft Tissue	\$20.00	\$47.00	25%	20% - 60%
D7520	Incision and Drainage of Abscess - Extraoral Soft Tissue	\$20.00	\$159.00	25%	20% - 60%
D7530	Removal of Foreign Body, Skin, or Subcutaneous Alveolar Tissue	-	\$64.00	25%	20% - 60%
D7540	Removal of reaction-producing foreign bodies – musculoskeletal system	-	\$96.00	25%	20% - 60%
D7550	Partial Ostectomy/Sequestrectomy	-	\$68.00	25%	20% - 60%

	DENTAL PLAN OVERVIEW (SAMPLE FEE SCHEDULE)	HMO	SCHEDULED	PPO	DISCOUNT
		DENTAL	DENTAL	DENTAL	DENTAL
		PLAN	PLAN	PLAN	PLAN
CODE	PROCEDURE NAME	*SET COPY	*PAID BY CARRIER	*PERCENTAGE BASED, \$1,000 annual max	*ESTIMATED/STARTS AT
D7560	Maxillary Sinusotomy	\$90.00	\$306.00	25%	20% - 60%
D7910	Suture of Recent Small Wounds to 5 Cm (not associated with periodontal or oral surgery procedure)	\$35.00	\$38.00	25%	20% - 60%
D7960	Frenulectomy (Frenectomy or Frenotomy) - separate procedure	\$90.00	\$92.00	25%	20% - 60%
D7970	Excision of Hyperplastic Tissue - per arch	\$140.00	\$83.00	25%	20% - 60%
D7972	Surgical reduction of fibrous	\$125.00	\$77.00	25%	20% - 60%
D7980	Sialolithotomy	-	\$122.00	25%	20% - 60%
D7983	Closure of salivary fistula	-	\$308.00	25%	20% - 60%
D9110	Palliative (emergency) treatment of dental pain - minor procedure	\$20.00	\$23.00	25%	20% - 60%
D9120	Fixed partial denture sectioning	\$0.00	\$26.00	25%	20% - 60%
D9215	Local anesthesia in conjunction with operative or surgical procedures.	\$50.00	\$0.00	50%	\$14.00
D9220	General Anesthesia - first 30 minutes	\$0.00	\$86.00	50%	20% - 60%
D9221	General Anesthesia - each additional 15 minutes	\$0.00	\$33.00	50%	20% - 60%
D9230	Inhalation of nitrous oxide / anxiolysis, analgesia	\$20.00	\$0.00	50%	\$28.00
D9241	IV Sedation/Analgesia - first 30 mins	\$20.00	\$80.00	50%	20% - 60%
D9242	IV Sedation/Analgesia - each additional 15 minutes	-	\$27.00	50%	20% - 60%
D9440	Office Visit - after regularly scheduled hours	-	\$30.00	50%	20% - 60%
D9911	-Application of desensitizing resin for cervical and/or root surface, per tooth	-	\$11.00	50%	20% - 60%
		*all rates show can vary depending on the provider and type of service			
		*all rates shown should be used as a guide and are subject to change.			