

Code	Code Name	Adults (19 and over)	Children (up to age 19 (end of month))
		Patient Co-Pay*	Patient Co-Pay*
D0120	Periodic oral evaluation - established patient	0	0
D0140	Limited oral evaluation - problem focused	0	0
D0145	Oral evaluation - patient under 3 years of age	0	0
D0150	Comprehensive oral evaluation - new or established patient	0	0
D0160	Detailed and extensive oral evaluation - problem focused, by report	0	0
D0170	Re-evaluation - limited, problem focused (established patient; not post-operative visit)	0	0
D0180	Comprehensive periodontal evaluation - new or established patient	0	0
D0210	Intraoral - complete series (including bitewings)	0	0
D0220	Intraoral - periapical first film	0	0
D0230	Intraoral - periapical each additional film	0	0
D0240	Intraoral - occlusal film	0	0
D0250	Extra-oral - 2D projection radiographic image	0	0
D0270	Bitewing - single film	0	0
D0272	Bitewings - two films	0	0
D0273	Bitewings - three films	0	0
D0274	Bitewings - four films	0	0
D0277	Vertical bitewings - 7 to 8 films	0	0
D0330	Panoramic film	0	0
D0340	Cephalometric film	0	0
D0350	2D oral/facial photographic image obtained intra-orally or extra-orally	0	0
D0391	Interpretation of diagnostic image	0	0
D1110	Prophylaxis - adult	0	0
D1120	Prophylaxis - child	0	0
D1206	Topical application of fluoride varnish (*Only allowed up to age 19 (end of month))	NA	0
D1208	Topical application of fluoride excl varnish (*Only allowed up to age 19 (end of month))	NA	0
D1351	Sealant - per tooth (*Only allowed up to age 19 (end of month))	NA	0
D1352	Preventive resin restoration in a moderate to high caries risk patient - permanent tooth (*Only allowed up to age 19 (end of month))	NA	0
D1510	Space maintainer - fixed - unilateral - per quadrant (*Only allowed up to age 19 (end of month))	NA	192
D1516	Space maintainer - fixed - bilateral, maxillary (*Only allowed up to age 19 (end of month))	NA	261
D1517	Space maintainer - fixed - bilateral, mandibular (*Only allowed up to age 19 (end of month))	NA	261
D1520	Space maintainer - removable - unilateral - per quadrant (*Only allowed up to age 19 (end of month))	NA	126
D1526	Space maintainer - removable - bilateral, maxillary (*Only allowed up to age 19 (end of month))	NA	193
D1527	Space maintainer - removable - bilateral, mandibular (*Only allowed up to age 19 (end of month))	NA	193
D1551	Re-cementation of bilateral space maintainer - maxillary (*Only allowed up to age 19 (end of month))	NA	37
D1552	Re-cementation of bilateral space maintainer - mandibular (*Only allowed up to age 19 (end of month))	NA	37
D1553	Re-cementation of unilateral space maintainer - per quadrant (*Only allowed up to age 19 (end of month))	NA	37
D2140	Amalgam - one surface, primary or permanent	33	33
D2150	Amalgam - two surfaces, primary or permanent	43	43
D2160	Amalgam - three surfaces, primary or permanent	64	64
D2161	Amalgam - four or more surfaces, primary or permanent	69	69
D2330	Resin-based composite - one surface, anterior	57	57
D2331	Resin-based composite - two surfaces, anterior	68	68
D2332	Resin-based composite - three surfaces, anterior	78	78
D2335	Resin-based composite - four or more surfaces or involving incisal angle (anterior)	94	94
D2390	Resin-based composite crown, anterior	100	100
D2391	Resin-based composite - one surface, posterior	63	63
D2392	Resin-based composite - two surfaces, posterior	88	88
D2393	Resin-based composite - three surfaces, posterior	104	104
D2394	Resin-based composite - four or more surfaces, posterior	129	129
D2920	Recent crown	51	51
D2928	Prefabricated porcelain/ceramic crown - permanent tooth	157	157
D2929	Prefabricated porcelain/ceramic crown - primary tooth	172	172
D2930	Prefabricated stainless steel crown - primary tooth	180	180
D2931	Prefabricated stainless steel crown - permanent tooth	178	178
D2932	Prefabricated resin crown	107	107
D2933	Prefabricated stainless steel crown with resin window	195	195
D2940	Placement of interim direct restoration	52	52
D2950	Core buildup, including any pins	160	160
D2951	Pin retention - per tooth, in addition to restoration	26	26
D2952	Cast post and core in addition to crown	201	201
D2953	Each additional cast post - same tooth	71	71
D2954	Prefabricated post and core in addition to crown	189	189
D2955	Post removal (not in conjunction with endodontic therapy)	83	83
D2957	Each additional prefabricated post - same tooth	52	52
D3110	Pulp cap - direct (excluding final restoration)	43	43
D3120	Pulp cap - indirect (excluding final restoration)	34	34
D3220	Therapeutic pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and	104	104
D3221	Pulpal debridement, primary and permanent teeth	116	116
D3222	Partial pulpotomy for apexogenesis - permanent tooth with incomplete root development	122	122
D3230	Pulpal therapy (resorbable filling) - anterior, primary tooth (excluding final restoration)	66	66
D3240	Pulpal therapy (resorbable filling) - posterior, primary tooth (excluding final restoration)	114	114

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Code	Code Name	Patient Co-Pay*	Patient Co-Pay*
D3310	Anterior (excluding final restoration)	378	378
D3320	Premolar (excluding final restoration)	470	425
D3330	Molar tooth (excluding final restoration)	622	425
D3331	Treatment of root canal obstruction; non-surgical access	99	99
D3332	Incomplete endodontic therapy; inoperable or fractured tooth	290	290
D3333	Internal root repair of perforation defects	118	118
D3346	Retreatment of previous root canal therapy - anterior	518	425
D3347	Retreatment of previous root canal therapy - premolar	591	425
D3348	Retreatment of previous root canal therapy - molar	712	425
D3351	Apexification/recalcification - initial visit (apical closure / calcific repair of perforations, root resorption, etc.)	106	106
D3352	Apexification/recalcification - interim medication replacement (apical closure/calcific repair of perforations, root	71	71
D3353	Apexification/recalcification - final visit (includes completed root canal therapy - apical closure/calcific repair of	166	166
D3355	Pulpal regeneration - initial visit	107	107
D3356	Pulpal regeneration - interim medication replacement	77	77
D3357	Pulpal regeneration - completion of treatment	111	111
D3410	Apicoectomy/periradicular surgery - anterior	461	425
D3421	Apicoectomy/periradicular surgery - premolar (first root)	319	319
D3425	Apicoectomy/periradicular surgery - molar (first root)	575	425
D3426	Apicoectomy/periradicular surgery (each additional root)	183	183
D3430	Retrograde filling - per root	143	143
D3450	Root amputation - per root	173	173
D3471	Surgical repair of root resorption - anterior	416	416
D3472	Surgical repair of root resorption - premolar	261	261
D3473	Surgical repair of root resorption - molar	415	415
D3501	Surgical exposure of root surface without apicoectomy or repair of root resorption - anterior	416	416
D3502	Surgical exposure of root surface without apicoectomy or repair of root resorption - premolar	261	261
D3503	Surgical exposure of root surface without apicoectomy or repair of root resorption - molar	415	415
D3920	Hemisection (including any root removal), not including root canal therapy	135	135
D3950	Canal preparation and fitting of preformed dowel or post	56	56
D7111	Coronal remnants - deciduous tooth	51	51
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	66	66
D7210	Surgical removal of erupted tooth requiring elevation of mucoperiosteal flap and removal of bone and/or section of	131	131
D7220	Removal of impacted tooth - soft tissue	169	169
D7230	Removal of impacted tooth - partially bony	202	202
D7240	Removal of impacted tooth - completely bony	263	263
D7241	Removal of impacted tooth - completely bony, with unusual surgical complications	314	314
D7250	Surgical removal of residual tooth roots (cutting procedure)	166	166
D7251	Coronectomy - intentional partial tooth removal, impacted teeth only	285	285
D7270	Tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth	158	158
D7280	Surgical access of an unerupted tooth	254	254
D7284	Excisional biopsy of minor salivary glands	208	208
D7285	Biopsy of oral tissue - hard (bone, tooth)	271	271
D7286	Biopsy of oral tissue - soft (all others)	130	130
D7310	Alveoloplasty in conjunction with extractions - per quadrant	97	97
D7311	Alveoloplasty in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	125	125
D7320	Alveoloplasty not in conjunction with extractions - per quadrant	150	150
D7321	Alveoloplasty not in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	186	186
D7471	Removal of lateral exostosis (maxilla or mandible)	438	425
D7510	Incision and drainage of abscess - intraoral soft tissue	129	129
D7910	Suture of recent small wounds up to 5 cm	25	25
D7921	Collection and application of autologous blood concentrate product	124	124
D7953	Bone replacement graft for ridge preservation - per site	188	188
D7956	Guided tissue regeneration, edentulous area - resorbable barrier, per site	275	275
D7957	Guided tissue regeneration, edentulous area - non-resorbable barrier, per site	295	295
D7961	Buccal / labial frenectomy (frenulectomy)	308	308
D7962	Lingual frenectomy (frenulectomy)	308	308
D7971	Excision of pericoronal gingiva	72	72
D8010-D8999	Orthodontic services (*Only allowed up to age 19 (end of month))	NA	50%
D9110	Palliative (emergency) treatment of dental pain - minor procedure - per visit	63	63
D9215	Local anesthesia	16	16
D9222	Deep sedation/general anesthesia - first 15 minutes	88	88
D9223	Deep sedation/general anesthesia - each subsequent 15 minute increment	88	88
D9230	Analgesia, anxiolysis, inhalation of nitrous oxide	33	33
D9239	Intravenous moderate (conscious) sedation/analgesia - first 15 minutes	75	75
D9243	Intravenous moderate (conscious) sedation/analgesia - each subsequent 15 minute increment	75	75
D9310	Consultation (diagnostic service by dentist or physician other than practitioner providing treatment)	0	0
D9430	Office visit for observation (during regularly scheduled hours) - no other services performed	0	0
D9440	Office visit - after regularly scheduled hours	0	0
D9610	Therapeutic parenteral drug, single administration	33	33
D9930	Treatment of complications (post-surgical) - unusual circumstances, by report	45	45
D9995	Teledentistry - synchronous; real-time encounter	0	0

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