

| 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 comprehensive series of radiographic images | 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 | 161 |
| D1516 | Space maintainer - fixed - bilateral, maxillary (*Only allowed up to age 19 (end of month)) | NA | 215 |
| D1517 | Space maintainer - fixed - bilateral, mandibular (*Only allowed up to age 19 (end of month)) | NA | 215 |
| D1520 | Space maintainer - removable - unilateral - per quadrant (*Only allowed up to age 19 (end of month)) | NA | 98 |
| D1526 | Space maintainer - removable - bilateral, maxillary (*Only allowed up to age 19 (end of month)) | NA | 155 |
| D1527 | Space maintainer - removable - bilateral, mandibular (*Only allowed up to age 19 (end of month)) | NA | 155 |
| D1551 | Re-cementation of bilateral space maintainer - maxillary (*Only allowed up to age 19 (end of month)) | NA | 30 |
| D1552 | Re-cementation of bilateral space maintainer - mandibular (*Only allowed up to age 19 (end of month)) | NA | 30 |
| D1553 | Re-cementation of unilateral space maintainer - per quadrant (*Only allowed up to age 19 (end of month)) | NA | 30 |
| D2140 | Amalgam - one surface, primary or permanent | 28 | 28 |
| D2150 | Amalgam - two surfaces, primary or permanent | 39 | 39 |
| D2160 | Amalgam - three surfaces, primary or permanent | 53 | 53 |
| D2161 | Amalgam - four or more surfaces, primary or permanent | 55 | 55 |
| D2330 | Resin-based composite - one surface, anterior | 49 | 49 |
| D2331 | Resin-based composite - two surfaces, anterior | 60 | 60 |
| D2332 | Resin-based composite - three surfaces, anterior | 69 | 69 |
| D2335 | Resin-based composite - four or more surfaces or involving incisal angle (anterior) | 83 | 83 |
| D2390 | Resin-based composite crown, anterior | 100 | 100 |
| D2391 | Resin-based composite - one surface, posterior | 57 | 57 |
| D2392 | Resin-based composite - two surfaces, posterior | 81 | 81 |
| D2393 | Resin-based composite - three surfaces, posterior | 95 | 95 |
| D2394 | Resin-based composite - four or more surfaces, posterior | 108 | 108 |
| D2510 | Inlay - metallic - one surface | 173 | 173 |
| D2520 | Inlay - metallic - two surfaces | 239 | 239 |
| D2530 | Inlay - metallic - three or more surfaces | 239 | 239 |
| D2542 | Onlay - metallic - two surfaces | 296 | 296 |
| D2543 | Onlay - metallic - three surfaces | 321 | 321 |
| D2544 | Onlay - metallic - four or more surfaces | 352 | 352 |
| D2610 | Inlay - porcelain/ceramic - one surface | 283 | 283 |
| D2620 | Inlay - porcelain/ceramic - two surfaces | 292 | 292 |
| D2630 | Inlay - porcelain/ceramic - three or more surfaces | 336 | 336 |
| D2642 | Onlay - porcelain/ceramic - two surfaces | 363 | 363 |
| D2643 | Onlay - porcelain/ceramic - three surfaces | 402 | 402 |
| D2644 | Onlay - porcelain/ceramic - four or more surfaces | 426 | 425 |
| D2650 | Inlay - resin-based composite - one surface | 177 | 177 |
| D2651 | Inlay - resin-based composite - two surfaces | 246 | 246 |
| D2652 | Inlay - resin-based composite - three or more surfaces | 241 | 241 |
| D2662 | Onlay - resin-based composite - two surfaces | 306 | 306 |
| D2663 | Onlay - resin-based composite - three surfaces | 315 | 315 |
| D2664 | Onlay - resin-based composite - four or more surfaces | 321 | 321 |
| D2710 | Crown - resin (indirect) | 168 | 168 |
| D2720 | Crown - resin with high noble metal | 418 | 418 |
| D2721 | Crown - resin with predominantly base metal | 360 | 360 |
| D2722 | Crown - resin with noble metal | 357 | 357 |

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| D2740 | Crown - porcelain/ceramic | 456 | 425 |
| D2750 | Crown - porcelain fused to high noble metal | 422 | 422 |
| D2751 | Crown - porcelain fused to predominantly base metal | 367 | 367 |
| D2752 | Crown - porcelain fused to noble metal | 372 | 372 |
| D2753 | Crown - porcelain fused to titanium and titanium alloys | 381 | 381 |
| D2780 | Crown - 3/4 cast high noble metal | 385 | 385 |
| D2781 | Crown - 3/4 cast predominantly base metal | 355 | 355 |
| D2782 | Crown - 3/4 cast noble metal | 361 | 361 |
| D2783 | Crown - 3/4 porcelain/ceramic | 391 | 391 |
| D2790 | Crown - full cast high noble metal | 400 | 400 |
| D2791 | Crown - full cast predominantly base metal | 333 | 333 |
| D2792 | Crown - full cast noble metal | 351 | 351 |
| D2794 | Crown - titanium and titanium alloys | 564 | 425 |
| D2910 | Re-cement or re-bond inlay, onlay, veneer or partial coverage restoration | 21 | 21 |
| D2920 | Recement crown | 46 | 46 |
| D2928 | Prefabricated porcelain/ceramic crown - permanent tooth | 135 | 135 |
| D2929 | Prefabricated porcelain/ceramic crown - primary tooth | 167 | 167 |
| D2930 | Prefabricated stainless steel crown - primary tooth | 140 | 140 |
| D2931 | Prefabricated stainless steel crown - permanent tooth | 159 | 159 |
| D2932 | Prefabricated resin crown | 86 | 86 |
| D2933 | Prefabricated stainless steel crown with resin window | 155 | 155 |
| D2940 | Protective restoration | 52 | 52 |
| D2950 | Core buildup, including any pins | 126 | 126 |
| D2951 | Pin retention - per tooth, in addition to restoration | 26 | 26 |
| D2952 | Cast post and core in addition to crown | 184 | 184 |
| D2953 | Each additional cast post - same tooth | 64 | 64 |
| D2954 | Prefabricated post and core in addition to crown | 151 | 151 |
| D2955 | Post removal (not in conjunction with endodontic therapy) | 67 | 67 |
| D2957 | Each additional prefabricated post - same tooth | 42 | 42 |
| D2980 | Crown repair, by report | 96 | 96 |
| D2981 | Inlay repair by report | 96 | 96 |
| D2982 | Onlay repair by report | 96 | 96 |
| D2983 | Veneer repair by report | 96 | 96 |
| D2990 | Resin infiltr of incipient lesions | 41 | 41 |
| D2991 | Application of hydroxyapatite regeneration medicament - per tooth | 25 | 25 |
| D3110 | Pulp cap - direct (excluding final restoration) | 36 | 36 |
| D3120 | Pulp cap - indirect (excluding final restoration) | 27 | 27 |
| D3220 | Therapeutic pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of medicament | 88 | 88 |
| D3221 | Pulpal debridement, primary and permanent teeth | 98 | 98 |
| D3222 | Partial pulpotomy for apexogenesis - permanent tooth with incomplete root development | 104 | 104 |
| D3230 | Pulpal therapy (resorbable filling) - anterior, primary tooth (excluding final restoration) | 57 | 57 |
| D3240 | Pulpal therapy (resorbable filling) - posterior, primary tooth (excluding final restoration) | 98 | 98 |
| D3310 | Anterior (excluding final restoration) | 328 | 328 |
| D3320 | Premolar (excluding final restoration) | 393 | 393 |
| D3330 | Molar tooth (excluding final restoration) | 499 | 425 |
| D3331 | Treatment of root canal obstruction; non-surgical access | 91 | 91 |
| D3332 | Incomplete endodontic therapy; inoperable or fractured tooth | 236 | 236 |
| D3333 | Internal root repair of perforation defects | 108 | 108 |
| D3346 | Retreatment of previous root canal therapy - anterior | 415 | 415 |
| D3347 | Retreatment of previous root canal therapy - premolar | 471 | 425 |
| D3348 | Retreatment of previous root canal therapy - molar | 596 | 425 |
| D3351 | Apexification/recalcification - initial visit (apical closure / calcific repair of perforations, root resorption, etc.) | 78 | 78 |
| D3352 | Apexification/recalcification - interim medication replacement (apical closure/calcific repair of perforations, root resorption, etc.) | 47 | 47 |
| D3353 | Apexification/recalcification - final visit (includes completed root canal therapy - apical closure/calcific repair of perforations, root resorption, etc.) | 118 | 118 |
| D3355 | Pulpal regeneration - initial visit | 80 | 80 |
| D3356 | Pulpal regeneration - interim medication replacement | 52 | 52 |
| D3357 | Pulpal regeneration - completion of treatment | 96 | 96 |
| D3410 | Apicoectomy/periradicular surgery - anterior | 339 | 339 |
| D3421 | Apicoectomy/periradicular surgery - premolar (first root) | 232 | 232 |
| D3425 | Apicoectomy/periradicular surgery - molar (first root) | 421 | 421 |
| D3426 | Apicoectomy/periradicular surgery (each additional root) | 140 | 140 |
| D3430 | Retrograde filling - per root | 102 | 102 |
| D3450 | Root amputation - per root | 131 | 131 |
| D3471 | Surgical repair of root resorption - anterior | 360 | 360 |
| D3472 | Surgical repair of root resorption - premolar | 225 | 225 |
| D3473 | Surgical repair of root resorption - molar | 360 | 360 |
| D3501 | Surgical exposure of root surface without apicoectomy or repair of root resorption - anterior | 360 | 360 |
| D3502 | Surgical exposure of root surface without apicoectomy or repair of root resorption - premolar | 225 | 225 |
| D3503 | Surgical exposure of root surface without apicoectomy or repair of root resorption - molar | 360 | 360 |
| D3920 | Hemisection (including any root removal), not including root canal therapy | 98 | 98 |
| D3950 | Canal preparation and fitting of preformed dowel or post | 43 | 43 |
| D4210 | Gingivectomy or gingivoplasty - four or more contiguous teeth or bounded teeth spaces per quadrant | 248 | 248 |
| D4211 | Gingivectomy or gingivoplasty - one to three teeth, per quadrant | 119 | 119 |
| D4212 | Gingivectomy or gingivoplasty to allow access for restorative procedure, per tooth | 111 | 111 |
| D4240 | Gingival flap procedure, incl root planing - four or more contiguous teeth or bounded teeth spaces/quad | 297 | 297 |
| D4241 | Gingival flap procedure, including root planing - one to three teeth, per quadrant | 173 | 173 |
| D4245 | Apically positioned flap | 148 | 148 |
| D4249 | Clinical crown lengthening - hard tissue | 329 | 329 |

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| D4260 | Osseous surgery (incl flap entry & closure) - four or more contiguous teeth or bounded teeth spaces/quad | 295 | 295 |
| D4261 | Osseous surgery (including flap entry and closure) - one to three teeth, per quadrant | 274 | 274 |
| D4263 | Bone replacement graft - first site in quadrant | 213 | 213 |
| D4264 | Bone replacement graft - each additional site in quadrant | 118 | 118 |
| D4266 | Guided tissue regeneration, natural teeth – resorbable barrier, per site | 245 | 245 |
| D4267 | Guided tissue regeneration, natural teeth – non-resorbable barrier, per site | 295 | 295 |
| D4268 | Surgical revision procedure, per tooth | 114 | 114 |
| D4270 | Pedicle soft tissue graft procedure | 224 | 224 |
| D4273 | Autogenous connective tissue graft procedure (including donor and recipient surgical sites) first tooth, implant, or edentulous tooth position in graft | 417 | 417 |
| D4275 | Soft tissue allograft | 260 | 260 |
| D4277 | Soft tissue graft procedure first tooth | 413 | 413 |
| D4278 | Soft tissue graft procedure each add tooth | 259 | 259 |
| D4322 | Splint - intra-coronal; natural teeth or prosthetic crowns | 187 | 187 |
| D4323 | Splint - extra-coronal; natural teeth or prosthetic crowns | 159 | 159 |
| D4341 | Periodontal scaling and root planing, four or more contiguous teeth or bounded teeth spaces per quadrant | 133 | 133 |
| D4342 | Periodontal scaling and root planing, one to three teeth, per quadrant | 68 | 68 |
| D4355 | Full mouth debridement to enable a comprehensive oral periodontal evaluation and diagnosis on a subsequent visit | 72 | 72 |
| D4910 | Periodontal maintenance | 63 | 63 |
| D5110 | Complete denture - maxillary | 655 | 425 |
| D5120 | Complete denture - mandibular | 637 | 425 |
| D5130 | Immediate denture - maxillary | 700 | 425 |
| D5140 | Immediate denture - mandibular | 706 | 425 |
| D5211 | Maxillary partial denture – resin base (including retentive/clasping materials, rests, and teeth) | 485 | 425 |
| D5212 | Mandibular partial denture – resin base (including retentive/clasping materials, rests, and teeth) | 551 | 425 |
| D5213 | Maxillary partial denture - cast metal framework with resin denture bases (including retentive/clasping materials, rests, and teeth) | 742 | 425 |
| D5214 | Mandibular partial denture - cast metal framework with resin denture bases (including retentive/clasping materials, rests, and teeth) | 742 | 425 |
| D5282 | Removable unilateral partial denture - one piece cast metal, maxillary (including clasps and teeth) | 215 | 215 |
| D5283 | Removable unilateral partial denture - one piece cast metal, mandibular (including clasps and teeth) | 211 | 211 |
| D5284 | Removable unilateral partial denture – one piece flexible base (including clasps and teeth) – per quadrant | 202 | 202 |
| D5286 | Removable unilateral partial denture – one piece resin (including clasps and teeth) – per quadrant | 214 | 214 |
| D5410 | Adjust complete denture - maxillary | 22 | 22 |
| D5411 | Adjust complete denture - mandibular | 22 | 22 |
| D5421 | Adjust partial denture - maxillary | 25 | 25 |
| D5422 | Adjust partial denture - mandibular | 25 | 25 |
| D5511 | Repair broken complete denture base, mandibular | 76 | 76 |
| D5512 | Repair broken complete denture base, maxillary | 75 | 75 |
| D5520 | Replace missing or broken teeth - complete denture (each tooth) | 40 | 40 |
| D5611 | Repair resin partial denture base, mandibular | 77 | 77 |
| D5612 | Repair resin partial denture base, maxillary | 75 | 75 |
| D5621 | Repair cast partial framework, mandibular | 99 | 99 |
| D5622 | Repair cast partial framework, maxillary | 99 | 99 |
| D5630 | Repair or replace broken retentive/clasping materials - per tooth | 61 | 61 |
| D5640 | Replace broken teeth - per tooth | 74 | 74 |
| D5650 | Add tooth to existing partial denture | 81 | 81 |
| D5660 | Add clasp to existing partial denture | 73 | 73 |
| D5710 | Rebase complete maxillary denture | 146 | 146 |
| D5711 | Rebase complete mandibular denture | 144 | 144 |
| D5720 | Rebase maxillary partial denture | 126 | 126 |
| D5721 | Rebase mandibular partial denture | 127 | 127 |
| D5730 | Reline complete maxillary denture (chairside) | 93 | 93 |
| D5731 | Reline complete mandibular denture (chairside) | 91 | 91 |
| D5740 | Reline maxillary partial denture (chairside) | 78 | 78 |
| D5741 | Reline mandibular partial denture (chairside) | 80 | 80 |
| D5750 | Reline complete maxillary denture (laboratory) | 194 | 194 |
| D5751 | Reline complete mandibular denture (laboratory) | 123 | 123 |
| D5760 | Reline maxillary partial denture (laboratory) | 120 | 120 |
| D5761 | Reline mandibular partial denture (laboratory) | 121 | 121 |
| D5810 | Interim complete denture (maxillary) | 200 | 200 |
| D5811 | Interim complete denture (mandibular) | 202 | 202 |
| D5820 | Interim partial denture (maxillary) | 270 | 270 |
| D5821 | Interim partial denture (mandibular) | 251 | 251 |
| D5850 | Tissue conditioning, maxillary | 45 | 45 |
| D5851 | Tissue conditioning, mandibular | 42 | 42 |
| D5911 | Facial moulage (sectional) | NA | 22 |
| D5912 | Facial moulage (complete) | NA | 98 |
| D5913 | Nasal prosthesis | NA | 425 |
| D5914 | Auricular prosthesis | NA | 425 |
| D5915 | Orbital prosthesis | NA | 425 |
| D5916 | Ocular prosthesis | NA | 425 |
| D5919 | Facial prosthesis | NA | 425 |
| D5922 | Nasal septal prosthesis | NA | 104 |
| D5923 | Ocular prosthesis, interim | NA | 425 |
| D5924 | Cranial prosthesis | NA | 425 |
| D5925 | Facial augmentation implant prosthesis | NA | 425 |
| D5926 | Nasal prosthesis, replacement | NA | 425 |
| D5927 | Auricular prosthesis, replacement | NA | 425 |
| D5928 | Orbital prosthesis, replacement | NA | 425 |
| D5929 | Facial prosthesis, replacement | NA | 425 |

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| D5931 | Obturator prosthesis, surgical | NA | 425 |
| D5932 | Obturator prosthesis, definitive | NA | 425 |
| D5933 | Obturator prosthesis, modification | NA | 221 |
| D5934 | Mandibular resection prosthesis with guide flange | NA | 168 |
| D5935 | Mandibular resection prosthesis without guide flange | NA | 425 |
| D5936 | Obturator prosthesis, interim | NA | 425 |
| D5937 | Trismus appliance (not for TMD treatment) | NA | 35 |
| D5951 | Feeding aid | NA | 303 |
| D5952 | Speech aid prosthesis, pediatric | NA | 135 |
| D5953 | Speech aid prosthesis, adult | NA | 425 |
| D5954 | Palatal augmentation prosthesis | NA | 268 |
| D5955 | Palatal lift prosthesis, definitive | NA | 425 |
| D5958 | Palatal lift prosthesis, interim | NA | 425 |
| D5959 | Palatal lift prosthesis, modification | NA | 229 |
| D5960 | Speech aid prosthesis, modification | NA | 64 |
| D5982 | Surgical stent | NA | 131 |
| D5983 | Radiation carrier | NA | 190 |
| D5984 | Radiation shield | NA | 119 |
| D5985 | Radiation cone locator | NA | 353 |
| D5986 | Fluoride gel carrier | NA | 76 |
| D5987 | Commissure splint | NA | 4 |
| D5988 | Surgical splint | NA | 175 |
| D5999 | Unspecified maxillofacial prosthesis, by report | NA | 264 |
| D6210 | Pontic - cast high noble metal | 370 | 370 |
| D6211 | Pontic - cast predominantly base metal | 295 | 295 |
| D6212 | Pontic - cast noble metal | 297 | 297 |
| D6214 | Pontic - titanium and titanium alloys | 527 | 425 |
| D6240 | Pontic - porcelain fused to high noble metal | 435 | 425 |
| D6241 | Pontic - porcelain fused to predominantly base metal | 366 | 366 |
| D6242 | Pontic - porcelain fused to noble metal | 399 | 399 |
| D6243 | Pontic - porcelain fused to titanium and titanium alloys | 367 | 367 |
| D6245 | Pontic - porcelain/ceramic | 362 | 362 |
| D6250 | Pontic - resin with high noble metal | 400 | 400 |
| D6251 | Pontic - resin with predominantly base metal | 346 | 346 |
| D6252 | Pontic - resin with noble metal | 378 | 378 |
| D6545 | Retainer - cast metal for resin bonded fixed prosthesis | 226 | 226 |
| D6548 | Retainer - porcelain/ceramic for resin bonded fixed prosthesis | 319 | 319 |
| D6720 | Retainer crown - resin with high noble metal | 404 | 404 |
| D6721 | Retainer crown - resin with predominantly base metal | 398 | 398 |
| D6722 | Retainer crown - resin with noble metal | 398 | 398 |
| D6740 | Retainer crown - porcelain/ceramic | 376 | 376 |
| D6750 | Retainer crown - porcelain fused to high noble metal | 447 | 425 |
| D6751 | Retainer crown - porcelain fused to predominantly base metal | 351 | 351 |
| D6752 | Retainer crown - porcelain fused to noble metal | 393 | 393 |
| D6753 | Retainer crown - porcelain fused to titanium and titanium alloys | 312 | 312 |
| D6780 | Retainer crown - 3/4 cast high noble metal | 393 | 393 |
| D6781 | Retainer crown - 3/4 cast predominantly base metal | 378 | 378 |
| D6782 | Retainer crown - 3/4 cast noble metal | 353 | 353 |
| D6783 | Retainer crown - 3/4 porcelain/ceramic | 381 | 381 |
| D6784 | Retainer crown 3/4 - titanium and titanium alloys | 373 | 373 |
| D6790 | Retainer crown - full cast high noble metal | 384 | 384 |
| D6791 | Retainer crown - full cast predominantly base metal | 352 | 352 |
| D6792 | Retainer crown - full cast noble metal | 369 | 369 |
| D6930 | Recement fixed partial denture | 62 | 62 |
| D6980 | Fixed partial denture repair necessitated by restorative material failure | 115 | 115 |
| D7111 | Coronal remnants - deciduous tooth | 44 | 44 |
| D7140 | Extraction, erupted tooth or exposed root (elevation and/or forceps removal) | 62 | 62 |
| D7210 | Surgical removal of erupted tooth requiring elevation of mucoperiosteal flap and removal of bone and/or section of tooth | 116 | 116 |
| D7220 | Removal of impacted tooth - soft tissue | 151 | 151 |
| D7230 | Removal of impacted tooth - partially bony | 180 | 180 |
| D7240 | Removal of impacted tooth - completely bony | 236 | 236 |
| D7241 | Removal of impacted tooth - completely bony, with unusual surgical complications | 251 | 251 |
| D7250 | Surgical removal of residual tooth roots (cutting procedure) | 127 | 127 |
| D7251 | Coronectomy - intentional partial tooth removal, impacted teeth only | 229 | 229 |
| D7270 | Tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth | 142 | 142 |
| D7280 | Surgical access of an unerupted tooth | 185 | 185 |
| D7284 | Excisional biopsy of minor salivary glands | 152 | 152 |
| D7285 | Biopsy of oral tissue - hard (bone, tooth) | 194 | 194 |
| D7286 | Biopsy of oral tissue - soft (all others) | 95 | 95 |
| D7310 | Alveoloplasty in conjunction with extractions - per quadrant | 72 | 72 |
| D7311 | Alveoloplasty in conjunction with extractions - one to three teeth or tooth spaces, per quadrant | 100 | 100 |
| D7320 | Alveoloplasty not in conjunction with extractions - per quadrant | 109 | 109 |
| D7321 | Alveoloplasty not in conjunction with extractions - one to three teeth or tooth spaces, per quadrant | 138 | 138 |
| D7450 | Removal of benign odontogenic cyst or tumor - lesion diameter up to 1.25 cm | 291 | 291 |
| D7451 | Removal of benign odontogenic cyst or tumor - lesion diameter greater than 1.25 cm | 474 | 425 |
| D7460 | Removal of benign nonodontogenic cyst or tumor - lesion diameter up to 1.25 cm | 292 | 292 |
| D7461 | Removal of benign nonodontogenic cyst or tumor - lesion diameter greater than 1.25 cm | 479 | 425 |
| D7471 | Removal of lateral exostosis (maxilla or mandible) | 323 | 323 |
| D7510 | Incision and drainage of abscess - intraoral soft tissue | 100 | 100 |
| D7610 | Maxilla - open reduction (teeth immobilized, if present) | 101 | 101 |

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| D7620 | Maxilla - closed reduction (teeth immobilized, if present) | 795 | 425 |
| D7630 | Mandible - open reduction (teeth immobilized, if present) | 2394 | 425 |
| D7640 | Mandible - closed reduction (teeth immobilized, if present) | 296 | 296 |
| D7710 | Maxilla - open reduction | 115 | 115 |
| D7730 | Mandible - open reduction | 2594 | 425 |
| D7810 | Open reduction of dislocation | 347 | 347 |
| D7820 | Closed reduction of dislocation | 82 | 82 |
| D7910 | Suture of recent small wounds up to 5 cm | 22 | 22 |
| D7921 | Collection and application of autologous blood concentrate product | 107 | 107 |
| D7953 | Bone replacement graft for ridge preservation – per site | 152 | 152 |
| D7956 | Guided tissue regeneration, edentulous area - resorbable barrier, per site | 245 | 245 |
| D7957 | Guided tissue regeneration, edentulous area - non-resorbable barrier, per site | 295 | 295 |
| D7961 | Buccal / labial frenectomy (frenulectomy) | 271 | 271 |
| D7962 | Lingual frenectomy (frenulectomy) | 271 | 271 |
| D7963 | Frenuloplasty | 286 | 286 |
| D7971 | Excision of pericoronal gingiva | 58 | 58 |
| D7999 | Unspecified oral surgery procedure, by report | 52 | 52 |
| 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 | 53 | 53 |
| D9215 | Local anesthesia | 10 | 10 |
| D9222 | Deep sedation/general anesthesia - first 15 minutes | 68 | 68 |
| D9223 | Deep sedation/general anesthesia - each subsequent 15 minute increment | 68 | 68 |
| D9230 | Analgesia, anxiolysis, inhalation of nitrous oxide | 26 | 26 |
| 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 | 26 | 26 |
| D9630 | Drugs or medicaments dispensed in the office for home use | 13 | 13 |
| D9930 | Treatment of complications (post-surgical) - unusual circumstances, by report | 38 | 38 |
| D9944 | Occlusal guard - hard appliance, full arch | 279 | 279 |
| D9945 | Occlusal guard - soft appliance, full arch | 243 | 243 |
| D9946 | Occlusal guard - hard appliance, partial arch | 266 | 266 |
| D9951 | Occlusal adjustment - limited | 34 | 34 |
| D9995 | Teledentistry - synchronous; real-time encounter | 0 | 0 |
| D9999 | Unspecified adjunctive procedure, by report | 135 | 135 |

Co-Pays are subject to change January 1st of each year.

* All services are subject to the EMI Health Maximum Allowable Charge. When using an out-of-network provider, the insured is responsible for all fees in excess of the Maximum Allowable Charge.