



Code	Code Name	Adults (19 and over)		Children (up to age 19 (end of month))	
		In Network Patient Co-Pay*	In and Out of Network Claim Payment*	In Network Patient Co-Pay*	In and Out of Network Claim Payment*
D0120	Periodic oral evaluation - established patient	0	27	0	27
D0140	Limited oral evaluation - problem focused	0	40	0	40
D0145	Oral evaluation - patient under 3 years of age	0	37	0	37
D0150	Comprehensive oral evaluation - new or established patient	0	40	0	40
D0160	Detailed and extensive oral evaluation - problem focused, by report	0	96	0	96
D0170	Re-evaluation - limited, problem focused (established patient; not post-operative visit)	0	30	0	30
D0180	Comprehensive periodontal evaluation - new or established patient	0	45	0	45
D0210	Intraoral - complete comprehensive series of radiographic images	0	72	0	72
D0220	Intraoral - periapical first film	0	16	0	16
D0230	Intraoral - periapical each additional film	0	14	0	14
D0240	Intraoral - occlusal film	0	20	0	20
D0250	Extra-oral - 2D projection radiographic image	0	23	0	23
D0270	Bitewing - single film	0	15	0	15
D0272	Bitewings - two films	0	23	0	23
D0273	Bitewings - three films	0	34	0	34
D0274	Bitewings - four films	0	35	0	35
D0277	Vertical bitewings - 7 to 8 films	0	49	0	49
D0330	Panoramic film	0	60	0	60
D0340	Cephalometric film	0	62	0	62
D0350	2D oral/facial photographic image obtained intra-orally or extra-orally	0	39	0	39
D0391	Interpretation of diagnostic image	0	97	0	97
D0470	Diagnostic casts (*Only allowed up to age 19 (end of month))	NA	NA	50%	50%
D1110	Prophylaxis - adult	0	51	0	51
D1120	Prophylaxis - child	0	36	0	36
D1206	Topical application of fluoride varnish (*Only allowed up to age 19 (end of month))	NA	NA	0	25
D1208	Topical application of fluoride excl varnish (*Only allowed up to age 19 (end of month))	NA	NA	0	18
D1351	Sealant - per tooth (*Only allowed up to age 19 (end of month))	NA	NA	0	34
D1352	Preventive resin restoration in a moderate to high caries risk patient - permanent tooth (*Only allowed up to age 19 (end of month))	NA	NA	0	39
D1510	Space maintainer - fixed - unilateral - per quadrant (*Only allowed up to age 19 (end of month))	NA	NA	161	17
D1516	Space maintainer - fixed - bilateral, maxillary (*Only allowed up to age 19 (end of month))	NA	NA	215	23
D1517	Space maintainer - fixed - bilateral, mandibular (*Only allowed up to age 19 (end of month))	NA	NA	215	23
D1520	Space maintainer - removable - unilateral - per quadrant (*Only allowed up to age 19 (end of month))	NA	NA	98	98
D1526	Space maintainer - removable - bilateral, maxillary (*Only allowed up to age 19 (end of month))	NA	NA	155	152
D1527	Space maintainer - removable - bilateral, mandibular (*Only allowed up to age 19 (end of month))	NA	NA	155	152
D1551	Re-cementation of bilateral space maintainer - maxillary (*Only allowed up to age 19 (end of month))	NA	NA	30	8
D1552	Re-cementation of bilateral space maintainer - mandibular (*Only allowed up to age 19 (end of month))	NA	NA	30	8
D1553	Re-cementation of unilateral space maintainer - per quadrant (*Only allowed up to age 19 (end of month))	NA	NA	30	8
D2140	Amalgam - one surface, primary or permanent	28	43	28	43
D2150	Amalgam - two surfaces, primary or permanent	39	54	39	54
D2160	Amalgam - three surfaces, primary or permanent	53	51	53	51
D2161	Amalgam - four or more surfaces, primary or permanent	55	63	55	63
D2330	Resin-based composite - one surface, anterior	49	37	49	37
D2331	Resin-based composite - two surfaces, anterior	60	48	60	48
D2332	Resin-based composite - three surfaces, anterior	69	64	69	64
D2335	Resin-based composite - four or more surfaces or involving incisal angle (anterior)	83	75	83	75
D2390	Resin-based composite crown, anterior	100	99	100	99
D2391	Resin-based composite - one surface, posterior	57	43	57	43
D2392	Resin-based composite - two surfaces, posterior	81	51	81	51
D2393	Resin-based composite - three surfaces, posterior	95	66	95	66
D2394	Resin-based composite - four or more surfaces, posterior	108	69	108	69
D2510	Inlay - metallic - one surface	173	190	173	190
D2520	Inlay - metallic - two surfaces	239	243	239	243
D2530	Inlay - metallic - three or more surfaces	239	271	239	271
D2542	Onlay - metallic - two surfaces	296	210	296	210
D2543	Onlay - metallic - three surfaces	321	214	321	214
D2544	Onlay - metallic - four or more surfaces	352	227	352	227
D2610	Inlay - porcelain/ceramic - one surface	283	121	283	121
D2620	Inlay - porcelain/ceramic - two surfaces	292	126	292	126
D2630	Inlay - porcelain/ceramic - three or more surfaces	336	145	336	145
D2642	Onlay - porcelain/ceramic - two surfaces	363	155	363	155
D2643	Onlay - porcelain/ceramic - three surfaces	402	155	375	182
D2644	Onlay - porcelain/ceramic - four or more surfaces	426	169	375	220
D2650	Inlay - resin-based composite - one surface	177	75	177	75
D2651	Inlay - resin-based composite - two surfaces	246	105	246	105
D2652	Inlay - resin-based composite - three or more surfaces	241	104	241	104
D2662	Onlay - resin-based composite - two surfaces	306	131	306	131
D2663	Onlay - resin-based composite - three surfaces	315	164	315	164
D2664	Onlay - resin-based composite - four or more surfaces	321	176	321	176
D2710	Crown - resin (indirect)	168	166	168	166
D2720	Crown - resin with high noble metal	418	245	375	288
D2721	Crown - resin with predominantly base metal	360	219	360	219
D2722	Crown - resin with noble metal	357	223	357	223
D2740	Crown - porcelain/ceramic	456	275	375	356
D2750	Crown - porcelain fused to high noble metal	422	227	375	274

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Code	Code Name	In Network Patient Co-Pay*	In and Out of Network Claim Payment*	In Network Patient Co-Pay*	In and Out of Network Claim Payment*
D2751	Crown - porcelain fused to predominantly base metal	367	190	367	190
D2752	Crown - porcelain fused to noble metal	372	197	372	197
D2753	Crown - porcelain fused to titanium and titanium alloys	381	197	375	203
D2780	Crown - 3/4 cast high noble metal	385	218	375	228
D2781	Crown - 3/4 cast predominantly base metal	355	194	355	194
D2782	Crown - 3/4 cast noble metal	361	198	361	198
D2783	Crown - 3/4 porcelain/ceramic	391	223	375	239
D2790	Crown - full cast high noble metal	400	223	375	248
D2791	Crown - full cast predominantly base metal	333	185	333	185
D2792	Crown - full cast noble metal	351	192	351	192
D2794	Crown - titanium and titanium alloys	564	62	375	251
D2910	Re-cement or re-bond inlay, onlay, veneer or partial coverage restoration	21	31	21	31
D2920	Recement crown	46	5	46	5
D2928	Prefabricated porcelain/ceramic crown - permanent tooth	135	75	135	75
D2929	Prefabricated porcelain/ceramic crown - primary tooth	167	39	167	39
D2930	Prefabricated stainless steel crown - primary tooth	140	15	140	15
D2931	Prefabricated stainless steel crown - permanent tooth	159	39	159	39
D2932	Prefabricated resin crown	86	85	86	85
D2933	Prefabricated stainless steel crown with resin window	155	38	155	38
D2940	Protective restoration	52	5	52	5
D2950	Core buildup, including any pins	126	13	126	13
D2951	Pin retention - per tooth, in addition to restoration	26	5	26	5
D2952	Cast post and core in addition to crown	184	45	184	45
D2953	Each additional cast post - same tooth	64	63	64	63
D2954	Prefabricated post and core in addition to crown	151	16	151	16
D2955	Post removal (not in conjunction with endodontic therapy)	67	65	67	65
D2957	Each additional prefabricated post - same tooth	42	40	42	40
D2980	Crown repair, by report	96	26	96	26
D2981	Inlay repair by report	96	26	96	26
D2982	Onlay repair by report	96	26	96	26
D2983	Veneer repair by report	96	26	96	26
D2990	Resin inflit of incipient lesions	41	9	41	9
D3110	Pulp cap - direct (excluding final restoration)	36	8	36	8
D3120	Pulp cap - indirect (excluding final restoration)	27	7	27	7
D3220	Therapeutic pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of medicament	88	18	88	18
D3221	Pulpal debridement, primary and permanent teeth	98	25	98	25
D3222	Partial pulpotomy for apexogenesis - permanent tooth with incomplete root development	104	19	104	19
D3230	Pulpal therapy (resorbable filling) - anterior, primary tooth (excluding final restoration)	57	54	57	54
D3240	Pulpal therapy (resorbable filling) - posterior, primary tooth (excluding final restoration)	98	23	98	23
D3310	Anterior (excluding final restoration)	328	123	328	123
D3320	Premolar (excluding final restoration)	393	136	375	154
D3330	Molar tooth (excluding final restoration)	499	153	375	277
D3331	Treatment of root canal obstruction; non-surgical access	91	89	91	89
D3332	Incomplete endodontic therapy; inoperable or fractured tooth	236	58	236	58
D3333	Internal root repair of perforation defects	108	46	108	46
D3346	Retreatment of previous root canal therapy - anterior	415	138	375	178
D3347	Retreatment of previous root canal therapy - premolar	471	164	375	260
D3348	Retreatment of previous root canal therapy - molar	596	198	375	419
D3351	Apexification/recalcification - initial visit (apical closure / calcific repair of perforations, root resorption, root resorption, etc.)	78	125	78	125
D3352	Apexification/recalcification - interim medication replacement (apical closure/calcific repair of perforations, root resorption, etc.)	47	46	47	46
D3353	Apexification/recalcification - final visit (includes completed root canal therapy - apical closure/calcific repair of perforations, root resorption, etc.)	118	167	118	167
D3355	Pulpal regeneration - initial visit	80	128	80	128
D3356	Pulpal regeneration - interim medication replacement	52	51	52	51
D3357	Pulpal regeneration - completion of treatment	96	154	96	154
D3410	Apicoectomy/periradicular surgery - anterior	339	83	339	83
D3421	Apicoectomy/periradicular surgery - premolar (first root)	232	231	232	231
D3425	Apicoectomy/periradicular surgery - molar (first root)	421	104	375	150
D3426	Apicoectomy/periradicular surgery (each additional root)	140	35	140	35
D3430	Retrograde filling - per root	102	24	102	24
D3450	Root amputation - per root	131	131	131	131
D3471	Surgical repair of root resorption - anterior	360	89	360	89
D3472	Surgical repair of root resorption - premolar	225	224	225	224
D3473	Surgical repair of root resorption - molar	360	89	360	89
D3501	Surgical exposure of root surface without apicoectomy or repair of root resorption - anterior	360	89	360	89
D3502	Surgical exposure of root surface without apicoectomy or repair of root resorption - premolar	225	224	225	224
D3503	Surgical exposure of root surface without apicoectomy or repair of root resorption - molar	360	89	360	89
D3920	Hemisection (including any root removal), not including root canal therapy	98	96	98	96
D3950	Canal preparation and fitting of preformed dowel or post	43	42	43	42
D4210	Gingivectomy or gingivoplasty - four or more contiguous teeth or bounded teeth spaces per quadrant	248	61	248	61
D4211	Gingivectomy or gingivoplasty - one to three teeth, per quadrant	119	13	119	13
D4212	Gingivectomy or gingivoplasty to allow access for restorative procedure, per tooth	111	11	111	11
D4240	Gingival flap procedure, incl root planing - four or more contiguous teeth or bounded teeth spaces/quad	297	74	297	74
D4241	Gingival flap procedure, including root planing - one to three teeth, per quadrant	173	42	173	42
D4245	Apically positioned flap	148	145	148	145
D4249	Clinical crown lengthening - hard tissue	329	81	329	81
D4260	Osseous surgery (incl flap entry & closure) - four or more contiguous teeth or bounded teeth spaces/quad	295	293	295	293
D4261	Osseous surgery (including flap entry and closure) - one to three teeth, per quadrant	274	68	274	68
D4263	Bone replacement graft - first site in quadrant	213	180	213	180
D4264	Bone replacement graft - each additional site in quadrant	118	117	118	117
D4266	Guided tissue regeneration, natural teeth - resorbable barrier, per site	245	119	245	119

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D4267	Guided tissue regeneration, natural teeth – non-resorbable barrier, per site	295	149	295	149
D4268	Surgical revision procedure, per tooth	114	114	114	114
D4270	Pedicle soft tissue graft procedure	224	223	224	223
D4273	Autogenous connective tissue graft procedure (including donor and recipient surgical sites) first tooth, implant, or edentulous tooth position in graft	417	104	375	146
D4275	Soft tissue allograft	260	65	260	65
D4277	Soft tissue graft procedure first tooth	413	46	375	84
D4278	Soft tissue graft procedure each add tooth	259	23	259	23
D4322	Splint - intra-coronal; natural teeth or prosthetic crowns	187	187	187	187
D4323	Splint - extra-coronal; natural teeth or prosthetic crowns	159	156	159	156
D4341	Periodontal scaling and root planing, four or more contiguous teeth or bounded teeth spaces per quadrant	133	24	133	24
D4342	Periodontal scaling and root planing, one to three teeth, per quadrant	68	18	68	18
D4355	Full mouth debridement to enable a comprehensive oral periodontal evaluation and diagnosis on a subsequent visit	72	12	72	12
D4910	Periodontal maintenance	63	14	63	14
D5110	Complete denture - maxillary	655	155	375	435
D5120	Complete denture - mandibular	637	151	375	413
D5130	Immediate denture - maxillary	700	158	375	483
D5140	Immediate denture - mandibular	706	152	375	483
D5211	Maxillary partial denture – resin base (including retentive/clasping materials, rests, and teeth)	485	119	375	229
D5212	Mandibular partial denture – resin base (including retentive/clasping materials, rests, and teeth)	551	135	375	311
D5213	Maxillary partial denture - cast metal framework with resin denture bases (including retentive/clasping materials, rests, and teeth)	742	166	375	533
D5214	Mandibular partial denture - cast metal framework with resin denture bases (including retentive/clasping materials, rests, and teeth)	742	166	375	533
D5282	Removable unilateral partial denture - one piece cast metal, maxillary (including clasps and teeth)	215	214	215	214
D5283	Removable unilateral partial denture - one piece cast metal, mandibular (including clasps and teeth)	211	210	211	210
D5284	Removable unilateral partial denture – one piece flexible base (including clasps and teeth) – per quadrant	202	202	202	202
D5286	Removable unilateral partial denture – one piece resin (including clasps and teeth) – per quadrant	214	213	214	213
D5410	Adjust complete denture - maxillary	22	21	22	21
D5411	Adjust complete denture - mandibular	22	20	22	20
D5421	Adjust partial denture - maxillary	25	22	25	22
D5422	Adjust partial denture - mandibular	25	22	25	22
D5511	Repair broken complete denture base, mandibular	76	20	76	20
D5512	Repair broken complete denture base, maxillary	75	20	75	20
D5520	Replace missing or broken teeth - complete denture (each tooth)	40	39	40	39
D5611	Repair resin partial denture base, mandibular	77	20	77	20
D5612	Repair resin partial denture base, maxillary	75	20	75	20
D5621	Repair cast partial framework, mandibular	99	29	99	29
D5622	Repair cast partial framework, maxillary	99	30	99	30
D5630	Repair or replace broken retentive/clasping materials - per tooth	61	58	61	58
D5640	Replace broken teeth - per tooth	74	18	74	18
D5650	Add tooth to existing partial denture	81	20	81	20
D5660	Add clasp to existing partial denture	73	72	73	72
D5710	Rebase complete maxillary denture	146	145	146	145
D5711	Rebase complete mandibular denture	144	142	144	142
D5720	Rebase maxillary partial denture	126	126	126	126
D5721	Rebase mandibular partial denture	127	127	127	127
D5730	Reline complete maxillary denture (chairside)	93	93	93	93
D5731	Reline complete mandibular denture (chairside)	91	91	91	91
D5740	Reline maxillary partial denture (chairside)	78	78	78	78
D5741	Reline mandibular partial denture (chairside)	80	80	80	80
D5750	Reline complete maxillary denture (laboratory)	194	49	194	49
D5751	Reline complete mandibular denture (laboratory)	123	120	123	120
D5760	Reline maxillary partial denture (laboratory)	120	119	120	119
D5761	Reline mandibular partial denture (laboratory)	121	120	121	120
D5810	Interim complete denture (maxillary)	200	200	200	200
D5811	Interim complete denture (mandibular)	202	202	202	202
D5820	Interim partial denture (maxillary)	270	39	270	39
D5821	Interim partial denture (mandibular)	251	62	251	62
D5850	Tissue conditioning, maxillary	45	43	45	43
D5851	Tissue conditioning, mandibular	42	40	42	40
D6010	Surgical placement of implant body: endosteal implant (*Only allowed up to age 19 (end of month))	NA	NA	375	1208
D6012	Surgical placement of interim implant body for transitional prosthesis: endosteal implant (*Only allowed up to age 19 (end of month))	NA	NA	375	891
D6040	Surgical placement: endosteal implant (*Only allowed up to age 19 (end of month))	NA	NA	375	2894
D6050	Surgical placement: transosteal implant (*Only allowed up to age 19 (end of month))	NA	NA	375	2887
D6055	Dental implant supported connecting bar (*Only allowed up to age 19 (end of month))	NA	NA	375	510
D6056	Prefabricated abutment - includes placement (*Only allowed up to age 19 (end of month))	NA	NA	335	35
D6057	Custom abutment - includes placement (*Only allowed up to age 19 (end of month))	NA	NA	375	98
D6058	Abutment supported porcelain/ceramic crown	683	96	375	404
D6059	Abutment supported porcelain fused to metal crown (high noble metal)	614	68	375	307
D6060	Abutment supported porcelain fused to metal crown (predominantly base metal)	573	29	375	227
D6061	Abutment supported porcelain fused to metal crown (noble metal)	565	63	375	253
D6062	Abutment supported cast metal crown (high noble metal)	564	62	375	251
D6063	Abutment supported cast metal crown (predominantly base metal)	547	59	375	231
D6064	Abutment supported cast metal crown (noble metal)	532	61	375	218
D6065	Implant supported porcelain/ceramic crown	648	137	375	410
D6066	Implant supported crown - porcelain fused to high noble alloys	683	104	375	412
D6067	Implant supported crown - high noble alloys	610	151	375	386
D6068	Abutment supported retainer for porcelain/ceramic FPD (*Only allowed up to age 19 (end of month))	NA	NA	375	292
D6069	Abutment supported retainer for porcelain fused to metal FPD (high noble metal) (*Only allowed up to age 19 (end of month))	NA	NA	375	277

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D6070	Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal) (*Only allowed up to age 19 (end of month))	NA	NA	375	238
D6071	Abutment supported retainer for porcelain fused to metal FPD (noble metal) (*Only allowed up to age 19 (end of month))	NA	NA	375	242
D6072	Abutment supported retainer for cast metal FPD (high noble metal) (*Only allowed up to age 19 (end of month))	NA	NA	375	250
D6073	Abutment supported retainer for cast metal FPD (predominantly base metal) (*Only allowed up to age 19 (end of month))	NA	NA	375	245
D6074	Abutment supported retainer for cast metal FPD (noble metal) (*Only allowed up to age 19 (end of month))	NA	NA	375	234
D6075	Implant supported retainer for ceramic FPD (*Only allowed up to age 19 (end of month))	NA	NA	375	299
D6076	Implant supported retainer for FPD - porcelain fused to high noble alloys (*Only allowed up to age 19 (end of month))	NA	NA	375	287
D6077	Implant supported retainer for metal FPD - high noble alloys (*Only allowed up to age 19 (end of month))	NA	NA	375	187
D6080	Implant maintenance procedures, including removal of prosthesis, cleansing of prosthesis and abutments and reinsertion of prosthesis (*Only allowed up to age 19 (end of month))	NA	NA	54	5
D6082	Implant supported crown - porcelain fused to predominantly base alloys (*Only allowed up to age 19 (end of month))	NA	NA	375	319
D6083	Implant supported crown - porcelain fused to noble alloys (*Only allowed up to age 19 (end of month))	NA	NA	375	291
D6084	Implant supported crown - porcelain fused to titanium and titanium alloys (*Only allowed up to age 19 (end of month))	NA	NA	375	283
D6086	Implant supported crown - predominantly base alloys (*Only allowed up to age 19 (end of month))	NA	NA	375	211
D6087	Implant supported crown - noble alloys (*Only allowed up to age 19 (end of month))	NA	NA	375	161
D6088	Implant supported crown - titanium and titanium alloys (*Only allowed up to age 19 (end of month))	NA	NA	375	256
D6090	Repair implant supported prosthesis, by report (*Only allowed up to age 19 (end of month))	NA	NA	81	19
D6091	Replacement of semi-precision or precision attachment of implant/abutment supported prosthesis, per attachment (*Only allowed up to age 19 (end of month))	NA	NA	244	29
D6095	Repair implant abutment, by report (*Only allowed up to age 19 (end of month))	NA	NA	122	14
D6098	Implant supported retainer - porcelain fused to predominantly base alloys (*Only allowed up to age 19 (end of month))	NA	NA	375	124
D6099	Implant supported retainer for FPD - porcelain fused to noble alloys (*Only allowed up to age 19 (end of month))	NA	NA	375	135
D6100	Surgical removal of implant body (*Only allowed up to age 19 (end of month))	NA	NA	238	33
D6101	Dbrdmt of peri-implant defect (*Only allowed up to age 19 (end of month))	NA	NA	105	114
D6102	Dbrdmt of peri-implant defect (*Only allowed up to age 19 (end of month))	NA	NA	276	31
D6103	Bone graft repair of peri-implant (*Only allowed up to age 19 (end of month))	NA	NA	118	66
D6104	Bone graft at time of implant placement (*Only allowed up to age 19 (end of month))	NA	NA	119	55
D6105	Removal of implant body not requiring bone removal or flap elevation (*Only allowed up to age 19 (end of month))	NA	NA	82	11
D6106	Guided tissue regeneration - resorbable barrier, per implant (*Only allowed up to age 19 (end of month))	NA	NA	330	34
D6107	Guided tissue regeneration - non-resorbable barrier, per implant (*Only allowed up to age 19 (end of month))	NA	NA	356	88
D6120	Implant supported retainer - porcelain fused to titanium and titanium alloys (*Only allowed up to age 19 (end of month))	NA	NA	375	332
D6121	Implant supported retainer for metal FPD - predominantly base alloys (*Only allowed up to age 19 (end of month))	NA	NA	375	243
D6122	Implant supported retainer for metal FPD - noble alloys (*Only allowed up to age 19 (end of month))	NA	NA	375	278
D6123	Implant supported retainer for metal FPD - titanium and titanium alloys (*Only allowed up to age 19 (end of month))	NA	NA	375	273
D6190	Radiographic/surgical implant index, by report (*Only allowed up to age 19 (end of month))	NA	NA	76	112
D6210	Pontic - cast high noble metal	370	229	370	229
D6211	Pontic - cast predominantly base metal	295	197	295	197
D6212	Pontic - cast noble metal	297	220	297	220
D6214	Pontic - titanium and titanium alloys	527	59	375	211
D6240	Pontic - porcelain fused to high noble metal	435	211	375	271
D6241	Pontic - porcelain fused to predominantly base metal	366	184	366	184
D6242	Pontic - porcelain fused to noble metal	399	199	375	223
D6243	Pontic - porcelain fused to titanium and titanium alloys	367	184	367	184
D6245	Pontic - porcelain/ceramic	362	195	362	195
D6250	Pontic - resin with high noble metal	400	214	375	239
D6251	Pontic - resin with predominantly base metal	346	218	346	218
D6252	Pontic - resin with noble metal	378	192	375	195
D6545	Retainer - cast metal for resin bonded fixed prosthesis	226	51	226	51
D6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	319	119	319	119
D6720	Retainer crown - resin with high noble metal	404	235	375	264
D6721	Retainer crown - resin with predominantly base metal	398	243	375	266
D6722	Retainer crown - resin with noble metal	398	250	375	273
D6740	Retainer crown - porcelain/ceramic	376	226	375	227
D6750	Retainer crown - porcelain fused to high noble metal	447	239	375	311
D6751	Retainer crown - porcelain fused to predominantly base metal	351	181	351	181
D6752	Retainer crown - porcelain fused to noble metal	393	209	375	227
D6753	Retainer crown - porcelain fused to titanium and titanium alloys	312	160	312	160
D6780	Retainer crown - 3/4 cast high noble metal	393	223	375	241
D6781	Retainer crown - 3/4 cast predominantly base metal	378	209	375	212
D6782	Retainer crown - 3/4 cast noble metal	353	195	353	195
D6783	Retainer crown - 3/4 porcelain/ceramic	381	215	375	221
D6784	Retainer crown 3/4 - titanium and titanium alloys	373	206	373	206
D6790	Retainer crown - full cast high noble metal	384	215	375	224
D6791	Retainer crown - full cast predominantly base metal	352	195	352	195
D6792	Retainer crown - full cast noble metal	369	204	369	204
D6930	Recement fixed partial denture	62	15	62	15
D6980	Fixed partial denture repair necessitated by restorative material failure	115	37	115	37
D7111	Coronal remnants - deciduous tooth	44	21	44	21
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	62	31	62	31
D7210	Surgical removal of erupted tooth requiring elevation of mucoperiosteal flap and removal of bone and/or section of tooth	116	42	116	42
D7220	Removal of impacted tooth - soft tissue	151	42	151	42
D7230	Removal of impacted tooth - partially bony	180	66	180	66

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Code	Code Name	In Network Patient Co-Pay*	In and Out of Network Claim Payment*	In Network Patient Co-Pay*	In and Out of Network Claim Payment*
D7240	Removal of impacted tooth - completely bony	236	50	236	50
D7241	Removal of impacted tooth - completely bony, with unusual surgical complications	251	67	251	67
D7250	Surgical removal of residual tooth roots (cutting procedure)	127	13	127	13
D7251	Coronectomy – intentional partial tooth removal, impacted teeth only	229	35	229	35
D7270	Tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth	142	141	142	141
D7280	Surgical access of an unerupted tooth	185	46	185	46
D7285	Biopsy of oral tissue - hard (bone, tooth)	194	191	194	191
D7286	Biopsy of oral tissue - soft (all others)	95	95	95	95
D7310	Alveoloplasty in conjunction with extractions - per quadrant	72	70	72	70
D7311	Alveoloplasty in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	100	24	100	24
D7320	Alveoloplasty not in conjunction with extractions - per quadrant	109	109	109	109
D7321	Alveoloplasty not in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	138	36	138	36
D7471	Removal of lateral exostosis (maxilla or mandible)	323	79	323	79
D7510	Incision and drainage of abscess - intraoral soft tissue	100	26	100	26
D7910	Suture of recent small wounds up to 5 cm	22	33	22	33
D7921	Collection and application of autologous blood concentrate product	107	15	107	15
D7953	Bone replacement graft for ridge preservation – per site	152	17	152	17
D7956	Guided tissue regeneration, edentulous area - resorbable barrier, per site	245	119	245	119
D7957	Guided tissue regeneration, edentulous area - non-resorbable barrier, per site	295	149	295	149
D7961	Buccal / labial frenectomy (frenulectomy)	271	271	271	29
D7962	Lingual frenectomy (frenulectomy)	271	29	271	29
D7971	Excision of pericoronal gingiva	58	55	58	55
D8010-D8999	Orthodontic services. (*Only allowed up to age 19 (end of month))	NA	NA	50%	50%
D9110	Palliative (emergency) treatment of dental pain – minor procedure – per visit	53	10	53	10
D9215	Local anesthesia	9	7	9	7
D9222	Deep sedation/general anesthesia - first 15 minutes	68	29	68	29
D9223	Deep sedation/general anesthesia - each subsequent 15 minute increment	68	29	68	29
D9230	Analgesia, anxiolysis, inhalation of nitrous oxide	26	5	26	5
D9239	Intravenous moderate (conscious) sedation/analgesia - first 15 minutes	75	22	75	22
D9243	Intravenous moderate (conscious) sedation/analgesia - each subsequent 15 minute increment	75	22	75	22
D9310	Consultation (diagnostic service by dentist or physician other than practitioner providing treatment)	0	78	0	78
D9430	Office visit for observation (during regularly scheduled hours) - no other services performed	0	36	0	36
D9440	Office visit - after regularly scheduled hours	0	57	0	57
D9610	Therapeutic parenteral drug, single administration	26	7	26	7
D9930	Treatment of complications (post-surgical) - unusual circumstances, by report	38	10	38	10
D9944	Occlusal guard - hard appliance, full arch	279	25	279	25
D9945	Occlusal guard - soft appliance, full arch	243	22	243	22
D9946	Occlusal guard - hard appliance, partial arch	266	24	266	24
D9951	Occlusal adjustment - limited	34	33	34	33
D9995	Teledentistry - synchronous; real-time encounter	0	78	0	78

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