

# 2024 SECURECARE DENTAL

## COPAY PLAN NV300 - SCHEDULE OF DENTIST COPAYMENTS

### GENERAL INFORMATION

When \$0 is listed, the provider is reimbursed 100% of the SPDO Fee Schedule. Lab fees are included in the SPDO Fee Schedule unless indicated specifically by separate code. See Member ID Card for Office Visit Copay.

**THIS IS NOT A PRE-PAID CAPITATION PLAN.** You MUST submit claims according to the instructions provided in the Provider Manual for reimbursement.

### GENERAL DENTIST

The Copay Plan is a fee-for-service dental plan designed with convenient copays. If the treating dentist is a General Dentist, the patient is responsible for the General Dentist Copay(s) for services rendered.

**SecureCare Dental** will compensate you the remainder up to the maximum allowable in the SPDO Fee Schedule.

### SPECIALIST DENTIST

The Copay Plan is a fee-for-service dental plan designed with convenient copays. If the treating dentist is a Specialist, including Pediatric, the patient is responsible for the Specialist Dentist Copay(s) for services rendered.

**SecureCare Dental** will compensate you the remainder up to the maximum allowable in the SPDO Fee Schedule.

COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY	COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY
<b>Type I - Diagnostic/Evaluation Services</b>				<b>Type II - Restorative Dentistry</b>			
Periodic Oral Evaluation	D0120	\$13	\$35	Prophylaxis Cleaning - Child	D1120	\$13	\$28
Limited Oral Evaluation - Problem Focused	D0140	\$13	\$58	Fluoride - Topical Application of Fluoride Varnish	D1206	\$5	\$37
Oral Evaluation - under 3 years old	D0145	\$13	\$66	Fluoride - Topical Application Fluoride excl Varnish	D1208	\$5	\$19
Comprehensive Oral Evaluation	D0150	\$13	\$60	Sealant - Per Tooth	D1351	\$21	\$46
Detailed and Extensive Oral Eval - Problem Focused	D0160	\$13	\$145	Preventive Resin Restoration (Including Sealant)	D1352	\$21	\$62
Re-evaluation - Limited - Problem Focused	D0170	\$13	\$46	Sealant Repair - Per Tooth	D1353	\$17	\$63
Re-evaluation Post-Operative Office Visit	D0171	\$13	\$46	Space Maintainer; Fixed Unilateral - per quad	D1510	\$106	\$227
Comprehensive Periodontal Evaluation	D0180	\$13	\$75	Upper Space Maintainer; Fixed Bilateral	D1516	\$111	\$317
Intraoral - Comprehensive Series of Images	D0210	\$21	\$98	Lower Space Maintainer; Fixed Bilateral	D1517	\$111	\$317
Intraoral - Periapical - 1st Image	D0220	\$7	\$18	Space Maintainer; Removable Unilateral - per quad	D1520	\$83	\$189
Intraoral - Periapical - Each Additional Image	D0230	\$7	\$23	Upper Space Maintainer; Removable Bilateral	D1526	\$83	\$286
Intraoral - Occlusal Image	D0240	\$7	\$33	Lower Space Maintainer; Removable Bilateral	D1527	\$83	\$286
Extraoral - 2D Image	D0250	\$7	\$31	Re-cement or Re-bond Bilateral Upper Space Maintainer	D1551	\$20	\$20
Extraoral - Posterior Image	D0251	\$21	\$45	Re-cement or Re-bond Bilateral Lower Space Maintainer	D1552	\$20	\$20
Bitewing - 1 Image	D0270	\$7	\$18	Re-cement or Re-bond Unilateral Space Maintainer - per quad	D1553	\$20	\$20
Bitewing - 2 Images	D0272	\$7	\$29	Distal Shoe Space Maintainer - Fixed - Unilateral - per quad	D1575	\$134	\$279
Bitewing - 3 Images	D0273	\$7	\$37				
Bitewing - 4 Images	D0274	\$7	\$41				
Vertical Bitewings - 7 to 8 Images	D0277	\$7	\$60	Amalgam - 1 Surface - Primary or Permanent	D2140	\$52	\$102
Panoramic Image	D0330	\$21	\$112	Amalgam - 2 Surfaces - Primary or Permanent	D2150	\$53	\$129
Pulp Vitality Tests	D0460	\$0	\$64	Amalgam - 3 Surfaces - Primary or Permanent	D2160	\$52	\$147
Diagnostic Casts	D0470	\$21	\$115	Amalgam - 4+ Surfaces - Primary or Permanent	D2161	\$58	\$170
Panoramic Image - Image Capture Only	D0701	\$21	\$134	Resin Composite - 1 Surface - Anterior	D2330	\$58	\$131
Intraoral - Occlusal Image - Image Capture Only	D0706	\$7	\$34	Resin Composite - 2 Surfaces - Anterior	D2331	\$61	\$162
Intraoral - Periapical image - Image Capture Only	D0707	\$7	\$20	Resin Composite - 3 Surfaces - Anterior	D2332	\$72	\$198
Intraoral - Bitewing Image - Image Capture Only	D0708	\$7	\$21	Resin Composite - 4+ Surfaces - Anterior	D2335	\$88	\$224
Intraoral - Comprehensive Series - Image Capture Only	D0709	\$21	\$98	Resin Composite Crown - Anterior	D2390	\$64	\$183
				Resin Composite - 1 Surface - Posterior	D2391	\$63	\$156
				Resin Composite - 2 Surfaces - Posterior	D2392	\$78	\$211
				Resin Composite - 3 Surfaces - Posterior	D2393	\$86	\$232
				Resin Composite - 4+ Surfaces - Posterior	D2394	\$86	\$269
<b>Type I - Preventive Services</b>							
Prophylaxis Cleaning - Adult	D1110	\$13	\$48				

COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY	COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY
<b>Type III - Onlays Crowns and Bridges</b>				Core Build Up - Including any Pins when required	D2950	\$99	\$204
Inlay - Metallic - 1 Surface	D2510	\$218	\$431	Pin Retention - Per Tooth - in Addition to Restoration	D2951	\$16	\$25
Inlay - Metallic - 2 Surfaces	D2520	\$280	\$440	Cast Post and Core - in Addition to Crown	D2952	\$137	\$308
Inlay - Metallic - 3+ Surfaces	D2530	\$353	\$518	Cast Post and Core - Each Additional - same tooth	D2953	\$93	\$141
Onlay - Metallic - 2 Surfaces	D2542	\$340	\$582	Prefabricated Post and Core - in Addition to Crown	D2954	\$108	\$226
Onlay - Metallic - 3 Surfaces	D2543	\$360	\$523	Post Removal	D2955	\$0	\$0
Onlay - Metallic - 4+ Surfaces	D2544	\$360	\$360	Each Additional Prefabricated Post - same tooth	D2957	\$38	\$38
Inlay - Porcelain/Ceramic - 1 Surface	D2610	\$177	\$177	Labial Veneer (resin laminate) - Chairside	D2960	\$215	\$606
Inlay - Porcelain/Ceramic - 2 Surfaces	D2620	\$273	\$273	Labial Veneer (resin laminate) - Laboratory	D2961	\$369	\$652
Inlay - Porcelain/Ceramic - 3+ Surfaces	D2630	\$313	\$454	Labial Veneer (porcelain laminate) - Laboratory	D2962	\$329	\$613
Onlay - Porcelain/Ceramic - 2 Surfaces	D2642	\$286	\$502	Crown Repair	D2980	\$67	\$147
Onlay - Porcelain/Ceramic - 3 Surfaces	D2643	\$297	\$447	Inlay Repair	D2981	\$59	\$138
Onlay - Porcelain/Ceramic - 4+ Surfaces	D2644	\$403	\$403	Onlay Repair	D2982	\$59	\$138
Inlay - Resin Composite - 1 Surface	D2650	\$126	\$251	Veneer Repair	D2983	\$59	\$138
Inlay - Resin Composite - 2 Surfaces	D2651	\$176	\$311	<b>Type III - Endodontics</b>			
Inlay - Resin Composite - 3+ Surfaces	D2652	\$230	\$324	Pulp Cap - Direct (Excluding Final Restoration)	D3110	\$19	\$77
Onlay - Resin Composite - 2 Surfaces	D2662	\$222	\$248	Pulp Cap - Indirect (Excluding Final Restoration)	D3120	\$15	\$50
Onlay - Resin Composite - 3 Surfaces	D2663	\$287	\$359	Therapeutic Pulpotomy (Excluding Final Restoration)	D3220	\$48	\$162
Onlay - Resin Composite - 4+ Surfaces	D2664	\$348	\$415	Pulpal Debridement - Primary/Permanent	D3221	\$46	\$186
Crown - Resin Based Composite - Indirect	D2710	\$158	\$211	Partial Pulpotomy for Apexogenesis	D3222	\$65	\$169
Crown - ¾ Resin Based Composite - Indirect	D2712	\$186	\$375	Pulpal Therapy Anterior - Primary	D3230	\$59	\$177
Crown - Resin with High Noble Metal	D2720	\$393	\$713	Pulpal Therapy Posterior - Primary	D3240	\$59	\$211
Crown - Resin with Base Metal	D2721	\$378	\$712	Root Canal - Anterior (Excluding Final Restoration)	D3310	\$191	\$573
Crown - Resin with Noble Metal	D2722	\$386	\$727	Root Canal - Premolar (Excluding Final Restoration)	D3320	\$265	\$784
Crown - Porcelain/Ceramic	D2740	\$403	\$778	Root Canal - Molar (Excluding Final Restoration)	D3330	\$419	\$1,026
Crown - Porcelain with High Noble Metal	D2750	\$413	\$796	Treatment of Root Canal Obstruction - non surgical	D3331	\$149	\$272
Crown - Porcelain with Predominantly Base Metal	D2751	\$378	\$727	Incomplete Endodontic Therapy - Inoperable/Fractured	D3332	\$177	\$541
Crown - Porcelain With Noble Metal	D2752	\$382	\$736	Internal Root Repair of Perforation Defects	D3333	\$171	\$218
Crown - Porcelain with Titanium	D2753	\$378	\$727	Retreatment of Previous RCT - Anterior	D3346	\$350	\$1,097
Crown - ¾ Cast High Noble Metal	D2780	\$425	\$748	Retreatment of Previous RCT - Premolar	D3347	\$360	\$1,163
Crown - ¾ Cast Predominantly Base Metal	D2781	\$386	\$675	Retreatment of Previous RCT - Molar	D3348	\$370	\$1,263
Crown - ¾ Cast Noble Metal	D2782	\$394	\$689	Apexification/Recalcification - Initial Visit	D3351	\$46	\$303
Crown - ¾ Porcelain/Ceramic	D2783	\$393	\$768	Apexification/Recalcification - Interim Visit	D3352	\$46	\$127
Crown - Full Cast High Noble Metal	D2790	\$418	\$837	Apexification/Recalcification - Final Visit	D3353	\$46	\$434
Crown - Full Cast Predominantly Base Metal	D2791	\$382	\$815	Apicoectomy - Anterior	D3410	\$239	\$695
Crown - Full Cast Noble Metal	D2792	\$395	\$792	Apicoectomy - Premolar - 1st Root	D3421	\$255	\$788
Crown - Titanium	D2794	\$382	\$837	Apicoectomy - Molar - 1st Root	D3425	\$366	\$945
Re-cement/Re-bond Inlay/Onlay/Partial Restoration	D2910	\$17	\$28	Apicoectomy - Each Additional Root	D3426	\$46	\$141
Re-cement/Re-bond Crown	D2920	\$32	\$57	Retrograde Filling - Per Root	D3430	\$46	\$183
Prefabricated Porcelain/Ceramic Crown - Permanent	D2928	\$194	\$286	Root Amputation - Per Root	D3450	\$99	\$418
Prefabricated Porcelain/Ceramic Crown - Primary	D2929	\$194	\$286	Hemisection (Including any Root Removal)	D3920	\$99	\$369
Prefabricated Stainless Steel Crown - Primary	D2930	\$65	\$147	Canal Preparation/Post Fitting	D3950	\$0	\$0
Prefabricated Stainless Steel Crown - Permanent	D2931	\$63	\$185	<b>Type III - Periodontics</b>			
Prefabricated Resin Crown	D2932	\$85	\$234	Gingivectomy/Gingivoplasty - 4+ teeth/quad	D4210	\$215	\$869
Protective Restoration	D2940	\$8	\$42				

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Gingivectomy/Gingivoplasty - 1 to 3 teeth/quad	D4211	\$59	\$331	Removable Flexible Unilateral Partial Denture - per quad	D5284	\$280	\$505
Gingivectomy/Gingivoplasty for restorative procedure	D4212	\$42	\$274	Removable Resin Unilateral Partial Denture - per quad	D5286	\$280	\$505
Gingival Flap-Incl. Root Planing - 4+ teeth/quad	D4240	\$275	\$907	Adjust Complete Denture - Upper	D5410	\$22	\$60
Gingival Flap-Incl. Root Planing - 1 to 3 teeth/quad	D4241	\$177	\$562	Adjust Complete Denture - Lower	D5411	\$22	\$60
Crown Lengthening - Hard Tissue	D4249	\$297	\$1,092	Adjust Partial Denture - Upper	D5421	\$22	\$22
Osseous Surgery - 4+ teeth/quad	D4260	\$391	\$1,635	Adjust Partial Denture - Lower	D5422	\$22	\$22
Osseous Surgery - 1-3 teeth/quad	D4261	\$211	\$835	Repair Broken Complete Denture Base - Mandibular	D5511	\$60	\$125
Pedicle Soft Tissue Graft Procedure	D4270	\$96	\$1,266	Repair Broken Complete Denture Base - Maxillary	D5512	\$60	\$125
Autogenous Connective Tissue Graft - 1st Tooth (excl implants)	D4273	\$422	\$1,507	Replace Missing or Broken Teeth - Complete Denture - Per Tooth	D5520	\$49	\$102
Mesial/Distal Wedge Procedure - Single Tooth	D4274	\$268	\$767	Repair Resin Partial Denture Base - Mandibular	D5611	\$49	\$119
Non-Autogenous Connective Tissue Graft - 1st Tooth (excl implants)	D4275	\$430	\$1,086	Repair Resin Partial Denture Base - Maxillary	D5612	\$49	\$119
Combined Connective Tissue/Pedicle Graft	D4276	\$497	\$1,509	Repair Cast Partial Framework - Mandibular	D5621	\$57	\$108
Free Soft Tissue Graft Procedure - 1st Tooth (excl implants)	D4277	\$250	\$1,253	Repair Cast Partial Framework - Maxillary	D5622	\$57	\$108
Free Soft Tissue Graft Procedure - Each Addl Tooth (excl implants)	D4278	\$250	\$301	Repair or Replace Broken Clasp - per tooth	D5630	\$57	\$171
Autogenous Connective Tissue Graft - Each Addl Tooth (excl implants)	D4283	\$422	\$1,260	Replace Broken Teeth - Per Tooth	D5640	\$57	\$120
Non-Autogenous Connective Tissue Graft - Each Addl Tooth (excl implants)	D4285	\$430	\$902	Add Tooth to Existing Partial Denture	D5650	\$57	\$152
Provisional Intracoronar Splint; Natural or Prosthetic Teeth	D4322	\$105	\$421	Add Clasp to Existing Partial Denture - per tooth	D5660	\$57	\$164
Provisional Extracoronar Splint; Natural or Prosthetic Teeth	D4323	\$103	\$393	Replace Teeth/Acrylic on Cast Metal Framework (Upper)	D5670	\$201	\$396
Perio. Scaling & Root Planing - 4+ teeth/quad	D4341	\$95	\$253	Replace Teeth/Acrylic on Cast Metal Framework (Lower)	D5671	\$201	\$396
Perio. Scaling & Root Planing - 1 to 3 teeth/quad	D4342	\$47	\$135	Rebase Complete Upper Denture	D5710	\$109	\$323
Scaling - Full Mouth - After Oral Evaluation	D4346	\$53	\$149	Rebase Complete Lower Denture	D5711	\$109	\$292
Full Mouth Debridement	D4355	\$53	\$191	Rebase Upper Partial Denture	D5720	\$109	\$338
Periodontal Maintenance Procedures	D4910	\$58	\$159	Rebase Lower Partial Denture	D5721	\$109	\$338
<b>Type III - Removable Prosthetics</b>				Rebase Hybrid Prosthesis	D5725	\$298	\$504
Complete Denture - Upper	D5110	\$403	\$1,156	Reline Complete Upper Denture (Chairside)	D5730	\$110	\$213
Complete Denture - Lower	D5120	\$403	\$1,156	Reline Complete Lower Denture (Chairside)	D5731	\$110	\$213
Immediate Denture - Upper	D5130	\$408	\$1,286	Reline Upper Partial Denture (Chairside)	D5740	\$110	\$178
Immediate Denture - Lower	D5140	\$408	\$1,286	Reline Lower Partial Denture (Chairside)	D5741	\$110	\$178
Upper Partial Denture - Resin Base	D5211	\$378	\$1,220	Reline Complete Upper Denture (Laboratory)	D5750	\$109	\$267
Lower Partial Denture - Resin Base	D5212	\$378	\$1,458	Reline Complete Lower Denture (Laboratory)	D5751	\$109	\$267
Upper Partial Denture - Cast Metal Frame - Resin Base	D5213	\$451	\$1,375	Reline Upper Partial Denture (Laboratory)	D5760	\$110	\$278
Lower Partial Denture - Cast Metal Frame - Resin Base	D5214	\$451	\$1,375	Reline Lower Partial Denture (Laboratory)	D5761	\$110	\$278
Upper Immediate Partial Denture - Resin Base	D5221	\$610	\$1,334	Tissue Conditioning - Upper	D5850	\$27	\$724
Lower Immediate Partial Denture - Resin Base	D5222	\$610	\$1,592	Tissue Conditioning - Lower	D5851	\$25	\$785
Upper Immediate Partial Denture - Cast Metal with Resin	D5223	\$819	\$1,723	<b>Type III - Implants</b>			
Lower Immediate Partial Denture - Cast Metal with Resin	D5224	\$819	\$1,723	Surgical Placement of Implant Body - Endosteal	D6010	\$1,105	\$2,421
Upper Partial Denture - Flexible Base	D5225	\$451	\$1,375	Surgical Placement of Mini Implant	D6013	\$1,105	\$2,406
Lower Partial Denture - Flexible Base	D5226	\$451	\$1,375	Prefabricated Abutment - includes modification & placement	D6056	\$298	\$504
Upper Immediate Partial Denture - Flexible Base	D5227	\$451	\$1,375	Crown - Abutment Supp. Porcelain/Ceramic	D6058	\$713	\$1,360
Lower Immediate Partial Denture - Flexible Base	D5228	\$451	\$1,375	Crown - Abutment Supp. Porcelain Fused to High Noble Metal	D6059	\$695	\$1,344
Upper Removable Unilateral Partial Denture - Cast Metal	D5282	\$280	\$770	Crown - Abutment Supp. Porcelain Fused to Predom. Base Metal	D6060	\$614	\$1,282
Lower Removable Unilateral Partial Denture - Cast Metal	D5283	\$280	\$770	Crown - Abutment Supp. Porcelain Fused to Noble Metal	D6061	\$656	\$1,305
				Crown - Abutment Supp. Cast High Noble Metal	D6062	\$660	\$1,296
				Crown - Abutment Supp. Cast Predominantly Base Metal	D6063	\$524	\$1,144

COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY	COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY
Crown - Abutment Supp. Cast Noble Metal	D6064	\$563	\$1,197	Retainer Onlay - Cast Noble Metal - 2 Surfaces	D6614	\$343	\$556
Crown - Implant Supp. Porcelain/Ceramic Crown	D6065	\$679	\$1,347	Retainer Onlay - Cast Noble Metal - 3+ Surfaces	D6615	\$442	\$524
Crown - Implant Supp. Porcelain Fused to High Noble Alloy	D6066	\$663	\$1,312	Retainer Inlay - Titanium	D6624	\$321	\$621
Crown - Implant Supp. High Noble Alloy	D6067	\$619	\$1,284	Retainer Onlay - Titanium	D6634	\$340	\$649
Crown - Implant Supp. - Porcelain Fused to Predom. Base Alloy	D6082	\$614	\$1,325	Retainer Crown - Resin With High Noble Metal	D6720	\$409	\$689
Crown - Implant Supp. - Porcelain Fused to Noble Alloy	D6083	\$656	\$1,316	Retainer Crown - Resin With Base Metal	D6721	\$386	\$699
Crown - Implant Supp. - Porcelain Fused to Titanium	D6084	\$656	\$1,316	Retainer Crown - Resin With Noble Metal	D6722	\$393	\$686
Crown - Implant Supp. - Predom. Base Alloy	D6086	\$524	\$1,340	Retainer Crown - Porcelain/Ceramic Substrate	D6740	\$398	\$708
Crown - Implant Supp. - Noble Alloy	D6087	\$563	\$1,307	Retainer Crown - Porcelain With High Noble Metal	D6750	\$371	\$665
Crown - Implant Supp. - Titanium	D6088	\$614	\$1,278	Retainer Crown - Porcelain With Predominantly Base Metal	D6751	\$317	\$585
Re-cement or Re-bond Implant/Abutment Supported Crown	D6092	\$40	\$1,533	Retainer Crown - Porcelain With Noble Metal	D6752	\$371	\$642
Crown - Abutment Supp. Titanium	D6094	\$614	\$1,033	Retainer Crown - Porcelain Fused to Titanium	D6753	\$317	\$585
Repair Implant Abutment - By Report	D6095	\$207	\$207	Retainer Crown - ¾ Cast High Noble Metal	D6780	\$485	\$664
Remove Broken Implant Retaining Screw	D6096	\$40	\$40	Retainer Crown - ¾ Cast Predominantly Base Metal	D6781	\$435	\$655
Crown - Abutment Supp. Porcelain Fused to Titanium	D6097	\$663	\$1,312	Retainer Crown - ¾ Cast Noble Metal	D6782	\$450	\$575
				Retainer Crown - ¾ Porcelain/Ceramic	D6783	\$356	\$623
				Retainer Crown ¾ -Titanium	D6784	\$435	\$655
<b>Type III - Pontics and Retainers</b>				Retainer Crown - Full Cast High Noble Metal	D6790	\$410	\$651
Pontic - Cast High Noble Metal	D6210	\$378	\$668	Retainer Crown - Full Cast Predominantly Base Metal	D6791	\$403	\$731
Pontic - Cast Predominantly Base Metal	D6211	\$356	\$718	Retainer Crown - Full Cast Noble Metal	D6792	\$406	\$696
Pontic - Cast Noble Metal	D6212	\$371	\$700	Retainer Crown - Titanium	D6794	\$382	\$711
Pontic - Titanium	D6214	\$378	\$641	Re-cement or Re-bond Fixed Partial Denture	D6930	\$16	\$95
Pontic - Porcelain Fused to High Noble Metal	D6240	\$382	\$673	Stress Breaker	D6940	\$55	\$151
Pontic - Porcelain Fused to Predominantly Base Metal	D6241	\$360	\$614	Fixed Partial Denture Repair - by Report	D6980	\$108	\$108
Pontic - Porcelain Fused to Noble Metal	D6242	\$371	\$660				
Pontic - Porcelain Fused to Titanium	D6243	\$360	\$614	<b>Type II - Oral Surgery</b>			
Pontic - Porcelain/Ceramic	D6245	\$435	\$639	Extraction - Coronal Remnants - Primary Tooth	D7111	\$41	\$88
Pontic - Resin with High Noble Metal	D6250	\$495	\$954	Extraction - Erupted Tooth or Exposed Root	D7140	\$42	\$126
Pontic - Resin with Predominantly Base Metal	D6251	\$425	\$855	Extraction - Erupted Tooth	D7210	\$90	\$229
Pontic - Resin with Noble Metal	D6252	\$459	\$890	Removal of Impacted Tooth - Soft Tissue	D7220	\$98	\$289
Retainer - Cast Metal or Resin Bonded Fixed Prosthesis	D6545	\$262	\$262	Removal of Impacted Tooth - Partially Bony	D7230	\$114	\$376
Retainer - Porcelain/Ceramic/Resin Bonded Fixed Prosthesis	D6548	\$246	\$246	Removal of Impacted Tooth - Completely Bony	D7240	\$163	\$472
Retainer - Resin for Resin Bonded Fixed Prosthesis	D6549	\$231	\$231	Removal of Residual Tooth Roots	D7250	\$77	\$228
Retainer Inlay - Porcelain/Ceramic - 2 Surfaces	D6600	\$360	\$526	Coronectomy - Intentional Partial Tooth Removal	D7251	\$124	\$532
Retainer Inlay - Porcelain/Ceramic - 3+ Surfaces	D6601	\$376	\$499	Oroantral Fistula Closure	D7260	\$152	\$1,741
Retainer Inlay - Cast High Noble Metal - 2 Surfaces	D6602	\$360	\$514	Tooth Reimplantation and/or Stabilization of Accidentally Evulsed or Displaced Teeth/Alveolus	D7270	\$246	\$444
Retainer Inlay - Cast High Noble Metal - 3+ Surfaces	D6603	\$419	\$567	Tooth Transplantation	D7272	\$246	\$598
Retainer Inlay - Cast Predom. Base Metal - 2 Surfaces	D6604	\$328	\$522	Exposure of an Unerupted Tooth	D7280	\$171	\$419
Retainer Inlay - Cast Predom. Base Metal - 3+ Surfaces	D6605	\$376	\$559	Excisional Biopsy of Minor Salivary Gland	D7284	\$67	\$396
Retainer Inlay - Cast Noble Metal - 2 Surfaces	D6606	\$369	\$508	Incisional Biopsy of Oral Tissue - Hard (Bone - Tooth)	D7285	\$67	\$999
Retainer Inlay - Cast Noble Metal - 3+ Surfaces	D6607	\$409	\$559	Incisional Biopsy of Oral Tissue - Soft (All Others)	D7286	\$67	\$397
Retainer Onlay - Porcelain/Ceramic - 2 Surfaces	D6608	\$409	\$450	Alveoplasty in Conjunction w/Extract- 4+ Teeth/Per Quad	D7310	\$99	\$401
Retainer Onlay - Porcelain/Ceramic - 3+ Surfaces	D6609	\$426	\$488	Alveoplasty in Conjunction w/Extract- 1 to 3 Teeth/Per Quad	D7311	\$53	\$329
Retainer Onlay - Cast High Noble Metal - 2 Surfaces	D6610	\$353	\$574	Alveoplasty not in Conjunct w/Extract- 4+ Teeth/Per Quad	D7320	\$149	\$670
Retainer Onlay - Cast High Noble Metal - 3+ Surfaces	D6611	\$435	\$593	Alveoplasty not in Conjunct w/Extract- 1 to 3 Teeth/Per Quad	D7321	\$74	\$528
Retainer Onlay - Cast Predom. Base Metal - 2 Surfaces	D6612	\$328	\$611				
Retainer Onlay - Cast Predom. Base Metal - 3+ Surfaces	D6613	\$409	\$565				

COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY	COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY
Vestibuloplasty-Ridge Ext (2nd Epithelialization)	D7340	\$177	\$2,730	III - Occlusal Guard - Hard Appliance; Partial Arch (for Bruxism)	D9946	\$95	\$344
Vestibuloplasty-Ridge Ext (Grafts - Hypertissue)	D7350	\$268	\$8,103				
Removal of Odontogenic Cyst/Tumor <=1.25cm	D7450	\$311	\$1,035	III - Occlusal Adjustment - Limited	D9951	\$53	\$138
Removal of Odontogenic Cyst/Tumor > 1.25cm	D7451	\$189	\$1,261	III - Occlusal Adjustment - Complete	D9952	\$124	\$616
Removal of Nonodontogenic Cyst/Tumor<=1.25cm	D7460	\$370	\$1,104	* Covered only when performed in conjunction with covered oral surgery.			
Removal of Nonodontogenic Cyst/Tumor> 1.25cm	D7461	\$400	\$1,450				
Removal of Lateral Exostosis - Per Site	D7471	\$105	\$1,481				
Removal of Torus Palatinus	D7472	\$265	\$1,732				
Removal of Torus Mandibularus	D7473	\$265	\$1,627				
Reduction of Osseous Tuberosity	D7485	\$265	\$1,439				
Marsupialization of Odontogenic Cyst	D7509	\$62	\$378				
Incision/Drain of Abscess Intraoral Soft Tissue	D7510	\$62	\$375				
Incision/Drain of Abscess Extraoral Soft Tissue	D7520	\$135	\$2,026				
Removal of Foreign Body - Skin or Subc. Areolar Tissue	D7530	\$62	\$746				
Removal of Reaction Producing Foreign Bodies - Musculoskeletal System	D7540	\$135	\$739				
Sequestrectomy for Osteomyelitis	D7550	\$62	\$432				
Maxillary Sinusotomy for Removal of Tooth Fragment or Foreign Body	D7560	\$723	\$3,925				
Suture of Recent Small Wounds up to 5cm	D7910	\$62	\$682				
Buccal/Labial Frenectomy (Frenulectomy)	D7961	\$116	\$450				
Lingual Frenectomy (Frenulectomy)	D7962	\$116	\$450				
Excision of Hyperplastic Tissue - Per Arch	D7970	\$112	\$744				
Excision of Pericoronal Gingiva	D7971	\$87	\$261				
Surgical Reduction of Fibrous Tuberosity	D7972	\$330	\$991				
Non-Surgical Sialolithotomy	D7979	\$290	\$290				
Surgical Sialolithotomy	D7980	\$290	\$1,003				
Closure of Salivary Fistula	D7983	\$960	\$2,576				
<b>Type - Miscellaneous Services</b>							
I - Palliative Treatment of Dental Pain	D9110	\$17	\$108				
I - Evaluation for Deep Sedation/General Anesthesia	D9219	\$0	\$106				
III - Deep Sedation/General Anesthesia - First 15 Min*	D9222	\$54	\$289				
III - Deep Sedation/General Anesthesia - Each Additional 15 Min*	D9223	\$54	\$214				
III - Analgesia - Anxiolysis - Inhal Nitrous Oxide*	D9230	\$17	\$64				
III - Intravenous Moderate Sedation/Analgesia - First 15 Min*	D9239	\$43	\$238				
III - Intravenous Moderate Sedation/Analgesia - Each Additional 15 Min*	D9243	\$43	\$182				
III - Non-Intravenous Conscious Sedation*	D9248	\$70	\$101				
I - Consultation	D9310	\$0	\$134				
I - Office Visit for Observ During Regular Scheduled Hours	D9430	\$0	\$0				
II - Therapeutic Drug Injection (Antibiotics)	D9610	\$49	\$49				
II - Treatment of Complications (Post Surgical)	D9930	\$15	\$15				
III - Occlusal Guard - Hard Appliance; Full Arch (for Bruxism)	D9944	\$95	\$344				
III - Occlusal Guard - Soft Appliance; Full Arch (for Bruxism)	D9945	\$95	\$344				