

2024 SECURECARE DENTAL

COPAY PLAN NV500 - 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
Type I - Diagnostic/Evaluation Services				Type II - Restorative Dentistry			
Periodic Oral Evaluation	D0120	\$0	\$22	Prophylaxis Cleaning - Child	D1120	\$0	\$15
Limited Oral Evaluation - Problem Focused	D0140	\$0	\$45	Fluoride - Topical Application of Fluoride Varnish	D1206	\$0	\$32
Oral Evaluation - under 3 years old	D0145	\$0	\$53	Fluoride - Topical Application Fluoride excl Varnish	D1208	\$0	\$14
Comprehensive Oral Evaluation	D0150	\$0	\$47	Sealant - Per Tooth	D1351	\$16	\$41
Detailed and Extensive Oral Eval - Problem Focused	D0160	\$0	\$132	Preventive Resin Restoration (Including Sealant)	D1352	\$21	\$62
Re-evaluation - Limited - Problem Focused	D0170	\$0	\$33	Sealant Repair - Per Tooth	D1353	\$16	\$62
Re-evaluation Post-Operative Office Visit	D0171	\$0	\$33	Space Maintainer; Fixed Unilateral - per quad	D1510	\$106	\$227
Comprehensive Periodontal Evaluation	D0180	\$0	\$62	Upper Space Maintainer; Fixed Bilateral	D1516	\$111	\$317
Intraoral - Comprehensive Series of Images	D0210	\$11	\$88	Lower Space Maintainer; Fixed Bilateral	D1517	\$111	\$317
Intraoral - Periapical - 1st Image	D0220	\$5	\$16	Space Maintainer; Removable Unilateral - per quad	D1520	\$81	\$187
Intraoral - Periapical - Each Additional Image	D0230	\$5	\$21	Upper Space Maintainer; Removable Bilateral	D1526	\$81	\$284
Intraoral - Occlusal Image	D0240	\$5	\$31	Lower Space Maintainer; Removable Bilateral	D1527	\$81	\$284
Extraoral - 2D Image	D0250	\$5	\$29	Re-cement or Re-bond Bilateral Upper Space Maintainer	D1551	\$20	\$20
Extraoral - Posterior Image	D0251	\$19	\$43	Re-cement or Re-bond Bilateral Lower Space Maintainer	D1552	\$20	\$20
Bitewing - 1 Image	D0270	\$5	\$16	Re-cement or Re-bond Unilateral Space Maintainer - per quad	D1553	\$20	\$20
Bitewing - 2 Images	D0272	\$5	\$27	Distal Shoe Space Maintainer - Fixed - Unilateral - per quad	D1575	\$131	\$276
Bitewing - 3 Images	D0273	\$5	\$35				
Bitewing - 4 Images	D0274	\$5	\$39				
Vertical Bitewings - 7 to 8 Images	D0277	\$5	\$58	Amalgam - 1 Surface - Primary or Permanent	D2140	\$37	\$87
Panoramic Image	D0330	\$11	\$102	Amalgam - 2 Surfaces - Primary or Permanent	D2150	\$37	\$113
Pulp Vitality Tests	D0460	\$0	\$64	Amalgam - 3 Surfaces - Primary or Permanent	D2160	\$37	\$132
Diagnostic Casts	D0470	\$11	\$105	Amalgam - 4+ Surfaces - Primary or Permanent	D2161	\$42	\$154
Panoramic Image - Image Capture Only	D0701	\$11	\$124	Resin Composite - 1 Surface - Anterior	D2330	\$48	\$121
Intraoral - Occlusal Image - Image Capture Only	D0706	\$5	\$32	Resin Composite - 2 Surfaces - Anterior	D2331	\$51	\$152
Intraoral - Periapical image - Image Capture Only	D0707	\$5	\$18	Resin Composite - 3 Surfaces - Anterior	D2332	\$61	\$187
Intraoral - Bitewing Image - Image Capture Only	D0708	\$5	\$19	Resin Composite - 4+ Surfaces - Anterior	D2335	\$77	\$213
Intraoral - Comprehensive Series - Image Capture Only	D0709	\$11	\$88	Resin Composite Crown - Anterior	D2390	\$53	\$172
				Resin Composite - 1 Surface - Posterior	D2391	\$52	\$145
				Resin Composite - 2 Surfaces - Posterior	D2392	\$68	\$201
				Resin Composite - 3 Surfaces - Posterior	D2393	\$75	\$221
				Resin Composite - 4+ Surfaces - Posterior	D2394	\$75	\$258
Type I - Preventive Services							
Prophylaxis Cleaning - Adult	D1110	\$0	\$35				

COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY	COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY
Type III - Onlays Crowns and Bridges				Core Build Up - Including any Pins when required	D2950	\$99	\$204
Inlay - Metallic - 1 Surface	D2510	\$209	\$422	Pin Retention - Per Tooth - in Addition to Restoration	D2951	\$16	\$25
Inlay - Metallic - 2 Surfaces	D2520	\$265	\$425	Cast Post and Core - in Addition to Crown	D2952	\$137	\$308
Inlay - Metallic - 3+ Surfaces	D2530	\$338	\$503	Cast Post and Core - Each Additional - same tooth	D2953	\$92	\$140
Onlay - Metallic - 2 Surfaces	D2542	\$331	\$573	Prefabricated Post and Core - in Addition to Crown	D2954	\$108	\$226
Onlay - Metallic - 3 Surfaces	D2543	\$347	\$510	Post Removal	D2955	\$0	\$0
Onlay - Metallic - 4+ Surfaces	D2544	\$347	\$347	Each Additional Prefabricated Post - same tooth	D2957	\$41	\$41
Inlay - Porcelain/Ceramic - 1 Surface	D2610	\$177	\$177	Labial Veneer (resin laminate) - Chairside	D2960	\$209	\$600
Inlay - Porcelain/Ceramic - 2 Surfaces	D2620	\$273	\$273	Labial Veneer (resin laminate) - Laboratory	D2961	\$363	\$646
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	\$65	\$145
Onlay - Porcelain/Ceramic - 3 Surfaces	D2643	\$297	\$447	Inlay Repair	D2981	\$65	\$144
Onlay - Porcelain/Ceramic - 4+ Surfaces	D2644	\$403	\$403	Onlay Repair	D2982	\$65	\$144
Inlay - Resin Composite - 1 Surface	D2650	\$122	\$247	Veneer Repair	D2983	\$65	\$144
Inlay - Resin Composite - 2 Surfaces	D2651	\$170	\$305	Type III - Endodontics			
Inlay - Resin Composite - 3+ Surfaces	D2652	\$225	\$319	Pulp Cap - Direct (Excluding Final Restoration)	D3110	\$20	\$78
Onlay - Resin Composite - 2 Surfaces	D2662	\$218	\$244	Pulp Cap - Indirect (Excluding Final Restoration)	D3120	\$16	\$51
Onlay - Resin Composite - 3 Surfaces	D2663	\$282	\$354	Therapeutic Pulpotomy (Excluding Final Restoration)	D3220	\$47	\$161
Onlay - Resin Composite - 4+ Surfaces	D2664	\$346	\$413	Pulpal Debridement - Primary/Permanent	D3221	\$49	\$189
Crown - Resin Based Composite - Indirect	D2710	\$154	\$207	Partial Pulpotomy for Apexogenesis	D3222	\$64	\$168
Crown - ¾ Resin Based Composite - Indirect	D2712	\$180	\$369	Pulpal Therapy Anterior - Primary	D3230	\$65	\$183
Crown - Resin with High Noble Metal	D2720	\$427	\$747	Pulpal Therapy Posterior - Primary	D3240	\$57	\$209
Crown - Resin with Base Metal	D2721	\$412	\$746	Root Canal - Anterior (Excluding Final Restoration)	D3310	\$186	\$568
Crown - Resin with Noble Metal	D2722	\$419	\$760	Root Canal - Premolar (Excluding Final Restoration)	D3320	\$254	\$773
Crown - Porcelain/Ceramic	D2740	\$403	\$778	Root Canal - Molar (Excluding Final Restoration)	D3330	\$403	\$1,010
Crown - Porcelain with High Noble Metal	D2750	\$403	\$786	Treatment of Root Canal Obstruction - non surgical	D3331	\$145	\$268
Crown - Porcelain with Predominantly Base Metal	D2751	\$371	\$720	Incomplete Endodontic Therapy - Inoperable/Fractured	D3332	\$193	\$557
Crown - Porcelain With Noble Metal	D2752	\$382	\$736	Internal Root Repair of Perforation Defects	D3333	\$186	\$233
Crown - Porcelain with Titanium	D2753	\$371	\$720	Retreatment of Previous RCT - Anterior	D3346	\$338	\$1,085
Crown - ¾ Cast High Noble Metal	D2780	\$400	\$723	Retreatment of Previous RCT - Premolar	D3347	\$350	\$1,153
Crown - ¾ Cast Predominantly Base Metal	D2781	\$386	\$675	Retreatment of Previous RCT - Molar	D3348	\$360	\$1,253
Crown - ¾ Cast Noble Metal	D2782	\$395	\$690	Apexification/Recalcification - Initial Visit	D3351	\$49	\$306
Crown - ¾ Porcelain/Ceramic	D2783	\$386	\$761	Apexification/Recalcification - Interim Visit	D3352	\$49	\$130
Crown - Full Cast High Noble Metal	D2790	\$418	\$837	Apexification/Recalcification - Final Visit	D3353	\$49	\$437
Crown - Full Cast Predominantly Base Metal	D2791	\$382	\$815	Apicoectomy - Anterior	D3410	\$235	\$691
Crown - Full Cast Noble Metal	D2792	\$395	\$792	Apicoectomy - Premolar - 1st Root	D3421	\$250	\$783
Crown - Titanium	D2794	\$382	\$837	Apicoectomy - Molar - 1st Root	D3425	\$366	\$945
Re-cement/Re-bond Inlay/Onlay/Partial Restoration	D2910	\$19	\$30	Apicoectomy - Each Additional Root	D3426	\$49	\$144
Re-cement/Re-bond Crown	D2920	\$50	\$75	Retrograde Filling - Per Root	D3430	\$49	\$186
Prefabricated Porcelain/Ceramic Crown - Permanent	D2928	\$189	\$281	Root Amputation - Per Root	D3450	\$108	\$427
Prefabricated Porcelain/Ceramic Crown - Primary	D2929	\$189	\$281	Hemisection (Including any Root Removal)	D3920	\$108	\$378
Prefabricated Stainless Steel Crown - Primary	D2930	\$104	\$186	Canal Preparation/Post Fitting	D3950	\$0	\$0
Prefabricated Stainless Steel Crown - Permanent	D2931	\$67	\$189	Type III - Periodontics			
Prefabricated Resin Crown	D2932	\$92	\$241	Gingivectomy/Gingivoplasty - 4+ teeth/quad	D4210	\$234	\$888
Protective Restoration	D2940	\$8	\$42				

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Gingivectomy/Gingivoplasty - 1 to 3 teeth/quad	D4211	\$65	\$337	Removable Flexible Unilateral Partial Denture - per quad	D5284	\$273	\$498
Gingivectomy/Gingivoplasty for restorative procedure	D4212	\$41	\$273	Removable Resin Unilateral Partial Denture - per quad	D5286	\$273	\$498
Gingival Flap-Incl. Root Planing - 4+ teeth/quad	D4240	\$298	\$930	Adjust Complete Denture - Upper	D5410	\$24	\$62
Gingival Flap-Incl. Root Planing - 1 to 3 teeth/quad	D4241	\$193	\$578	Adjust Complete Denture - Lower	D5411	\$24	\$62
Crown Lengthening - Hard Tissue	D4249	\$329	\$1,124	Adjust Partial Denture - Upper	D5421	\$24	\$24
Osseous Surgery - 4+ teeth/quad	D4260	\$403	\$1,647	Adjust Partial Denture - Lower	D5422	\$24	\$24
Osseous Surgery - 1-3 teeth/quad	D4261	\$223	\$847	Repair Broken Complete Denture Base - Mandibular	D5511	\$58	\$123
Pedicle Soft Tissue Graft Procedure	D4270	\$105	\$1,275	Repair Broken Complete Denture Base - Maxillary	D5512	\$58	\$123
Autogenous Connective Tissue Graft - 1st Tooth (excl implants)	D4273	\$385	\$1,470	Replace Missing or Broken Teeth - Complete Denture - Per Tooth	D5520	\$49	\$102
Mesial/Distal Wedge Procedure - Single Tooth	D4274	\$289	\$788	Repair Resin Partial Denture Base - Mandibular	D5611	\$49	\$119
Non-Autogenous Connective Tissue Graft - 1st Tooth (excl implants)	D4275	\$390	\$1,046	Repair Resin Partial Denture Base - Maxillary	D5612	\$49	\$119
Combined Connective Tissue/Pedicle Graft	D4276	\$540	\$1,552	Repair Cast Partial Framework - Mandibular	D5621	\$57	\$108
Free Soft Tissue Graft Procedure - 1st Tooth (excl implants)	D4277	\$225	\$1,228	Repair Cast Partial Framework - Maxillary	D5622	\$57	\$108
Free Soft Tissue Graft Procedure - Each Addl Tooth (excl implants)	D4278	\$225	\$276	Repair or Replace Broken Clasp - per tooth	D5630	\$57	\$171
Autogenous Connective Tissue Graft - Each Addl Tooth (excl implants)	D4283	\$385	\$1,223	Replace Broken Teeth - Per Tooth	D5640	\$57	\$120
Non-Autogenous Connective Tissue Graft - Each Addl Tooth (excl implants)	D4285	\$390	\$862	Add Tooth to Existing Partial Denture	D5650	\$57	\$152
Provisional Intracoronar Splint; Natural or Prosthetic Teeth	D4322	\$114	\$430	Add Clasp to Existing Partial Denture - per tooth	D5660	\$57	\$164
Provisional Extracoronar Splint; Natural or Prosthetic Teeth	D4323	\$112	\$402	Replace Teeth/Acrylic on Cast Metal Framework (Upper)	D5670	\$201	\$396
Perio. Scaling & Root Planing - 4+ teeth/quad	D4341	\$91	\$249	Replace Teeth/Acrylic on Cast Metal Framework (Lower)	D5671	\$201	\$396
Perio. Scaling & Root Planing - 1 to 3 teeth/quad	D4342	\$50	\$138	Rebase Complete Upper Denture	D5710	\$105	\$319
Scaling - Full Mouth - After Oral Evaluation	D4346	\$51	\$147	Rebase Complete Lower Denture	D5711	\$105	\$288
Full Mouth Debridement	D4355	\$53	\$191	Rebase Upper Partial Denture	D5720	\$105	\$334
Periodontal Maintenance Procedures	D4910	\$57	\$158	Rebase Lower Partial Denture	D5721	\$105	\$334
				Rebase Hybrid Prosthesis	D5725	\$292	\$498
				Reline Complete Upper Denture (Chairside)	D5730	\$105	\$208
				Reline Complete Lower Denture (Chairside)	D5731	\$105	\$208
				Reline Upper Partial Denture (Chairside)	D5740	\$105	\$173
				Reline Lower Partial Denture (Chairside)	D5741	\$105	\$173
				Reline Complete Upper Denture (Laboratory)	D5750	\$105	\$263
				Reline Complete Lower Denture (Laboratory)	D5751	\$105	\$263
				Reline Upper Partial Denture (Laboratory)	D5760	\$105	\$273
				Reline Lower Partial Denture (Laboratory)	D5761	\$105	\$273
				Tissue Conditioning - Upper	D5850	\$27	\$724
				Tissue Conditioning - Lower	D5851	\$24	\$784
Type III - Removable Prosthetics				Type III - Implants			
Complete Denture - Upper	D5110	\$398	\$1,151	Surgical Placement of Implant Body - Endosteal	D6010	\$1,082	\$2,398
Complete Denture - Lower	D5120	\$398	\$1,151	Surgical Placement of Mini Implant	D6013	\$1,082	\$2,383
Immediate Denture - Upper	D5130	\$398	\$1,276	Prefabricated Abutment - includes modification & placement	D6056	\$292	\$498
Immediate Denture - Lower	D5140	\$398	\$1,276	Crown - Abutment Supp. Porcelain/Ceramic	D6058	\$699	\$1,346
Upper Partial Denture - Resin Base	D5211	\$338	\$1,180	Crown - Abutment Supp. Porcelain Fused to High Noble Metal	D6059	\$682	\$1,331
Lower Partial Denture - Resin Base	D5212	\$338	\$1,418	Crown - Abutment Supp. Porcelain Fused to Predom. Base Metal	D6060	\$601	\$1,269
Upper Partial Denture - Cast Metal Frame - Resin Base	D5213	\$440	\$1,364	Crown - Abutment Supp. Porcelain Fused to Noble Metal	D6061	\$642	\$1,291
Lower Partial Denture - Cast Metal Frame - Resin Base	D5214	\$440	\$1,364	Crown - Abutment Supp. Cast High Noble Metal	D6062	\$647	\$1,283
Upper Immediate Partial Denture - Resin Base	D5221	\$598	\$1,322	Crown - Abutment Supp. Cast Predominantly Base Metal	D6063	\$513	\$1,133
Lower Immediate Partial Denture - Resin Base	D5222	\$598	\$1,580				
Upper Immediate Partial Denture - Cast Metal with Resin	D5223	\$803	\$1,707				
Lower Immediate Partial Denture - Cast Metal with Resin	D5224	\$793	\$1,697				
Upper Partial Denture - Flexible Base	D5225	\$440	\$1,364				
Lower Partial Denture - Flexible Base	D5226	\$440	\$1,364				
Upper Immediate Partial Denture - Flexible Base	D5227	\$440	\$1,364				
Lower Immediate Partial Denture - Flexible Base	D5228	\$440	\$1,364				
Upper Removable Unilateral Partial Denture - Cast Metal	D5282	\$273	\$763				
Lower Removable Unilateral Partial Denture - Cast Metal	D5283	\$273	\$763				

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	\$551	\$1,185	Retainer Onlay - Cast Noble Metal - 2 Surfaces	D6614	\$338	\$551
Crown - Implant Supp. Porcelain/Ceramic Crown	D6065	\$666	\$1,334	Retainer Onlay - Cast Noble Metal - 3+ Surfaces	D6615	\$435	\$517
Crown - Implant Supp. Porcelain Fused to High Noble Alloy	D6066	\$649	\$1,298	Retainer Inlay - Titanium	D6624	\$323	\$623
Crown - Implant Supp. High Noble Alloy	D6067	\$605	\$1,270	Retainer Onlay - Titanium	D6634	\$343	\$652
Crown - Implant Supp. - Porcelain Fused to Predom. Base Alloy	D6082	\$601	\$1,312	Retainer Crown - Resin With High Noble Metal	D6720	\$402	\$682
Crown - Implant Supp. - Porcelain Fused to Noble Alloy	D6083	\$642	\$1,302	Retainer Crown - Resin With Base Metal	D6721	\$378	\$691
Crown - Implant Supp. - Porcelain Fused to Titanium	D6084	\$642	\$1,302	Retainer Crown - Resin With Noble Metal	D6722	\$386	\$679
Crown - Implant Supp. - Predom. Base Alloy	D6086	\$513	\$1,329	Retainer Crown - Porcelain/Ceramic Substrate	D6740	\$408	\$718
Crown - Implant Supp. - Noble Alloy	D6087	\$551	\$1,295	Retainer Crown - Porcelain With High Noble Metal	D6750	\$337	\$631
Crown - Implant Supp. - Titanium	D6088	\$601	\$1,265	Retainer Crown - Porcelain With Predominantly Base Metal	D6751	\$316	\$584
Re-cement or Re-bond Implant/Abutment Supported Crown	D6092	\$39	\$1,532	Retainer Crown - Porcelain With Noble Metal	D6752	\$337	\$608
Crown - Abutment Supp. Titanium	D6094	\$601	\$1,020	Retainer Crown - Porcelain Fused to Titanium	D6753	\$316	\$584
Repair Implant Abutment - By Report	D6095	\$202	\$202	Retainer Crown - ¾ Cast High Noble Metal	D6780	\$455	\$634
Remove Broken Implant Retaining Screw	D6096	\$31	\$31	Retainer Crown - ¾ Cast Predominantly Base Metal	D6781	\$378	\$598
Crown - Abutment Supp. Porcelain Fused to Titanium	D6097	\$649	\$1,298	Retainer Crown - ¾ Cast Noble Metal	D6782	\$386	\$511
				Retainer Crown - ¾ Porcelain/Ceramic	D6783	\$386	\$653
Type III - Pontics and Retainers				Retainer Crown ¾ -Titanium	D6784	\$378	\$598
Pontic - Cast High Noble Metal	D6210	\$411	\$701	Retainer Crown - Full Cast High Noble Metal	D6790	\$402	\$643
Pontic - Cast Predominantly Base Metal	D6211	\$386	\$748	Retainer Crown - Full Cast Predominantly Base Metal	D6791	\$395	\$723
Pontic - Cast Noble Metal	D6212	\$402	\$731	Retainer Crown - Full Cast Noble Metal	D6792	\$419	\$709
Pontic - Titanium	D6214	\$411	\$674	Retainer Crown - Titanium	D6794	\$382	\$711
Pontic - Porcelain Fused to High Noble Metal	D6240	\$339	\$630	Re-cement or Re-bond Fixed Partial Denture	D6930	\$16	\$95
Pontic - Porcelain Fused to Predominantly Base Metal	D6241	\$339	\$593	Stress Breaker	D6940	\$53	\$149
Pontic - Porcelain Fused to Noble Metal	D6242	\$339	\$628	Fixed Partial Denture Repair - by Report	D6980	\$105	\$105
Pontic - Porcelain Fused to Titanium	D6243	\$339	\$593				
Pontic - Porcelain/Ceramic	D6245	\$471	\$675	Type II - Oral Surgery			
Pontic - Resin with High Noble Metal	D6250	\$449	\$908	Extraction - Coronal Remnants - Primary Tooth	D7111	\$41	\$88
Pontic - Resin with Predominantly Base Metal	D6251	\$385	\$815	Extraction - Erupted Tooth or Exposed Root	D7140	\$60	\$144
Pontic - Resin with Noble Metal	D6252	\$422	\$853	Extraction - Erupted Tooth	D7210	\$90	\$229
Retainer - Cast Metal or Resin Bonded Fixed Prosthesis	D6545	\$258	\$258	Removal of Impacted Tooth - Soft Tissue	D7220	\$98	\$289
Retainer - Porcelain/Ceramic/Resin Bonded Fixed Prosthesis	D6548	\$242	\$242	Removal of Impacted Tooth - Partially Bony	D7230	\$114	\$376
Retainer - Resin for Resin Bonded Fixed Prosthesis	D6549	\$227	\$227	Removal of Impacted Tooth - Completely Bony	D7240	\$163	\$472
Retainer Inlay - Porcelain/Ceramic - 2 Surfaces	D6600	\$354	\$520	Removal of Residual Tooth Roots	D7250	\$77	\$228
Retainer Inlay - Porcelain/Ceramic - 3+ Surfaces	D6601	\$370	\$493	Coronectomy - Intentional Partial Tooth Removal	D7251	\$121	\$529
Retainer Inlay - Cast High Noble Metal - 2 Surfaces	D6602	\$354	\$508	Oroantral Fistula Closure	D7260	\$147	\$1,736
Retainer Inlay - Cast High Noble Metal - 3+ Surfaces	D6603	\$411	\$559	Tooth Reimplantation and/or Stabilization of Accidentally Evulsed or Displaced Teeth/Alveolus	D7270	\$242	\$440
Retainer Inlay - Cast Predom. Base Metal - 2 Surfaces	D6604	\$322	\$516	Tooth Transplantation	D7272	\$242	\$594
Retainer Inlay - Cast Predom. Base Metal - 3+ Surfaces	D6605	\$370	\$553	Exposure of an Unerupted Tooth	D7280	\$186	\$434
Retainer Inlay - Cast Noble Metal - 2 Surfaces	D6606	\$363	\$502	Excisional Biopsy of Minor Salivary Gland	D7284	\$65	\$394
Retainer Inlay - Cast Noble Metal - 3+ Surfaces	D6607	\$402	\$552	Incisional Biopsy of Oral Tissue - Hard (Bone - Tooth)	D7285	\$65	\$997
Retainer Onlay - Porcelain/Ceramic - 2 Surfaces	D6608	\$402	\$443	Incisional Biopsy of Oral Tissue - Soft (All Others)	D7286	\$65	\$395
Retainer Onlay - Porcelain/Ceramic - 3+ Surfaces	D6609	\$419	\$481	Alveoplasty in Conjunction w/Extract- 4+ Teeth/Per Quad	D7310	\$96	\$398
Retainer Onlay - Cast High Noble Metal - 2 Surfaces	D6610	\$347	\$568	Alveoplasty in Conjunction w/Extract- 1 to 3 Teeth/Per Quad	D7311	\$52	\$328
Retainer Onlay - Cast High Noble Metal - 3+ Surfaces	D6611	\$427	\$585	Alveoplasty not in Conjunct w/Extract- 4+ Teeth/Per Quad	D7320	\$145	\$666
Retainer Onlay - Cast Predom. Base Metal - 2 Surfaces	D6612	\$322	\$605	Alveoplasty not in Conjunct w/Extract- 1 to 3 Teeth/Per Quad	D7321	\$72	\$526
Retainer Onlay - Cast Predom. Base Metal - 3+ Surfaces	D6613	\$402	\$558				

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Vestibuloplasty-Ridge Ext (2nd Epithelialization)	D7340	\$193	\$2,746	III - Occlusal Guard - Hard Appliance; Partial Arch (for Bruxism)	D9946	\$95	\$344
Vestibuloplasty-Ridge Ext (Grafts - Hypertissue)	D7350	\$289	\$8,124	III - Occlusal Adjustment - Limited	D9951	\$51	\$136
Removal of Odontogenic Cyst/Tumor <=1.25cm	D7450	\$305	\$1,029	III - Occlusal Adjustment - Complete	D9952	\$122	\$614
Removal of Odontogenic Cyst/Tumor > 1.25cm	D7451	\$186	\$1,258	* Covered only when performed in conjunction with covered oral surgery.			
Removal of Nonodontogenic Cyst/Tumor<=1.25cm	D7460	\$331	\$1,065				
Removal of Nonodontogenic Cyst/Tumor> 1.25cm	D7461	\$386	\$1,436				
Removal of Lateral Exostosis - Per Site	D7471	\$101	\$1,477				
Removal of Torus Palatinus	D7472	\$258	\$1,725				
Removal of Torus Mandibularus	D7473	\$258	\$1,620				
Reduction of Osseous Tuberosity	D7485	\$258	\$1,432				
Marsupialization of Odontogenic Cyst	D7509	\$60	\$376				
Incision/Drain of Abscess Intraoral Soft Tissue	D7510	\$60	\$373				
Incision/Drain of Abscess Extraoral Soft Tissue	D7520	\$128	\$2,019				
Removal of Foreign Body - Skin or Subc. Areolar Tissue	D7530	\$60	\$744				
Removal of Reaction Producing Foreign Bodies - Musculoskeletal System	D7540	\$128	\$732				
Sequestrectomy for Osteomyelitis	D7550	\$60	\$430				
Maxillary Sinusotomy for Removal of Tooth Fragment or Foreign Body	D7560	\$702	\$3,904				
Suture of Recent Small Wounds up to 5cm	D7910	\$60	\$680				
Buccal/Labial Frenectomy (Frenulectomy)	D7961	\$112	\$446				
Lingual Frenectomy (Frenulectomy)	D7962	\$112	\$446				
Excision of Hyperplastic Tissue - Per Arch	D7970	\$108	\$740				
Excision of Pericoronal Gingiva	D7971	\$85	\$259				
Surgical Reduction of Fibrous Tuberosity	D7972	\$322	\$983				
Non-Surgical Sialolithotomy	D7979	\$282	\$282				
Surgical Sialolithotomy	D7980	\$282	\$995				
Closure of Salivary Fistula	D7983	\$933	\$2,549				
Type - Miscellaneous Services							
I - Palliative Treatment of Dental Pain	D9110	\$19	\$110				
I - Evaluation for Deep Sedation/General Anesthesia	D9219	\$0	\$106				
III - Deep Sedation/General Anesthesia - First 15 Min*	D9222	\$52	\$287				
III - Deep Sedation/General Anesthesia - Each Additional 15 Min*	D9223	\$52	\$212				
III - Analgesia - Anxiolysis - Inhal Nitrous Oxide*	D9230	\$19	\$66				
III - Intravenous Moderate Sedation/Analgesia - First 15 Min*	D9239	\$41	\$236				
III - Intravenous Moderate Sedation/Analgesia - Each Additional 15 Min*	D9243	\$41	\$180				
III - Non-Intravenous Conscious Sedation*	D9248	\$67	\$98				
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	\$16	\$16				
III - Occlusal Guard - Hard Appliance; Full Arch (for Bruxism)	D9944	\$95	\$344				
III - Occlusal Guard - Soft Appliance; Full Arch (for Bruxism)	D9945	\$95	\$344				