## SECURECARE DENTAL

### COPAY SCHEDULE 130 - SCHEDULE OF COPAYMENTS

### **GENERAL INFORMATION**

Lab fees are included in "Network General Dentist Copay" unless indicated by specific code. Services not listed are not covered. Services listed in the Limitations and Exclusions section of the Certificate of Coverage, as well as, services determined to be unnecessary by the member's general dentists or specialist are not covered.

You can search for a General or Specialist dentist on our website at <a href="www.securecaredental.com">www.securecaredental.com</a>. Click the Look For a Dentist link and follow the instructions. Please note the contracted dentist needs to be seen at the address listed to receive In Network Benefits.

For SECURECARE DENTAL customer service call (602)241-0914 or toll free (888)429-0914.

### **GENERAL DENTIST**

Copays in the column entitled "Network General Dentist Copay" apply to services performed by SECURECARE DENTAL contracted general dentists. Along with any applicable Office Visit Copay and/or Deductible listed on your Schedule of Dental Benefits, the "Network General Dentist Copay" is all that you will pay when you visit a contracted general dentist.

Visiting a non-contracted dentist is not recommended. The plan is designed for use with a contracted dentist in order to limit your out-of-pocket cost beyond the listed copayment.

### SPECIALIST DENTIST

SECURECARE DENTAL has contracted specialists of oral surgery, endodontics, periodontics, pediatric dentists and prosthodontics. Referrals and Prior Authorization are not required to see a specialist. You may call directly and make an appointment. Please note Pediatric Dentists are Specialists and "Network Specialist Copays" apply when seeking treatment from a Pediatric Dentist.

Along with any applicable Office Visit Copay and/or Deductible shown on your Schedule of Dental Benefits, as a **SECURECARE DENTAL** member, all you will pay when you visit a network specialist, is the copay listed in the "**Network Specialist Copay**" column.

Visiting a non-contracted specialist is not recommended. The plan is designed for use with a contracted specialist in order to limit your out-of-pocket cost beyond the listed copayment.

### **ORTHODONTICS**

For a description of the Orthodontic Services available to you, see your Certificate of Coverage.

COVERED SERVICES	ADA CODE	NETWORK GENERAL DENTIST COPAY	NETWORK SPECIALIST DENTIST COPAY	COVERED SERVICES	ADA CODE	NETWORK GENERAL DENTIST COPAY	NETWORK SPECIALIST DENTIST COPAY
Type I - Diagnostic/Evaluation Services							
Periodic Oral Evaluation	D0120	\$12	\$22	Type I - Preventive Services			
Limited Oral Evaluation - Problem Focused	D0140	\$12	\$44	Prophylaxis Cleaning - Adult	D1110	\$12	\$19
Oral Evaluation - under 3 years old	D0145	\$12	\$57	Prophylaxis Cleaning - Child	D1120	\$12	\$19
Comprehensive Oral Evaluation	D0150	\$12	\$43	Fluoride - Topical Application of Fluoride Varnish	D1206	\$5	\$31
Detailed and Extensive Oral Eval - Problem Focused	D0160	\$12	\$122	Fluoride - Topical Application Fluoride excl Varnish	D1208	\$5	\$24
Re-evaluation - Limited - Problem Focused	D0170	\$12	\$20	Sealant - Per Tooth	D1351	\$20	\$30
Re-evaluation Post-Operative Office Visit	D0171	\$0	\$0	Preventive Resin Restoration (Including Sealant)	D1352	\$16	\$44
Comprehensive Periodontal Evaluation	D0180	\$12	\$51	Sealant Repair - Per Tooth	D1353	\$18	\$38
Intraoral - Complete Series of Images	D0210	\$7	\$53	Space Maintainer - Fixed - Unilateral	D1510	\$100	\$210
Intraoral - Periapical - 1st Image	D0220	\$7	\$17	Space Maintainer - Fixed - Bilateral	D1515	\$105	\$227
Intraoral - Periapical - Each Additional Image	D0230	\$7	\$14	Space Maintainer - Removable - Unilateral	D1520	\$70	\$194
Intraoral - Occlusal Image	D0240	\$7	\$23	Space Maintainer - Removable - Bilateral	D1525	\$70	\$256
Extraoral - 2D Image	D0250	\$7	\$21	Re-cement or Re-bond Space Maintainer	D1550	\$21	\$51
Extraoral - Posterior Image	D0251	\$14	\$21	Distal Shoe Space Maintainer - Fixed - Unilateral	D1575	\$98	\$202
Bitewing - 1 Image	D0270	\$7	\$14				
Bitewing - 2 Images	D0272	\$7	\$21	Type II - Restorative Dentistry			
Bitewing - 3 Images	D0273	\$7	\$24	Amalgam - 1 Surface - Primary or Permanent	D2140	\$49	\$115
Bitewing - 4 Images	D0274	\$7	\$28	Amalgam - 2 Surfaces - Primary or Permanent	D2150	\$50	\$137
Vertical Bitewings - 7 to 8 Images	D0277	\$7	\$31	Amalgam - 3 Surfaces - Primary or Permanent	D2160	\$49	\$159
Panoramic Image	D0330	\$20	\$58	Amalgam - 4+ Surfaces - Primary or Permanent	D2161	\$55	\$184
Pulp Vitality Tests	D0460	\$0	\$0	Resin Composite - 1 Surface - Anterior	D2330	\$55	\$106
Diagnostic Casts	D0470	\$20	\$88	Resin Composite - 2 Surfaces - Anterior	D2331	\$58	\$116

Resin Composite - 48- Surfaces - Austerior   D2390   S69   S145   Resement/Re-hond Crown   D2390   S69   S145   Resin Composite - 1 Surface - Posterior   D2391   S59   S112   Prefabricated Posterior   D2390   S61   S7   Resin Composite - 1 Surface - Posterior   D2391   S81   S179   Prefabricated Statinsics Steel Crown - Primary   D2392   S83   S179   Prefabricated Statinsics Steel Crown - Primary   D2392   S83   S179   Prefabricated Statinsics Steel Crown - Primary   D2393   S81   S179   Prefabricated Statinsics Steel Crown - Primary   D2391   S59   S81   S179   Prefabricated Statinsics Steel Crown - Primary   D2391   S59   S81   S179   Prefabricated Statinsics Steel Crown - Primary   D2391   S59   S81   S179   Prefabricated Statinsics Steel Crown - Primary   D2391   S59   S81   S179   Prefabricated Statinsics Steel Crown - Primary   D2391   S59   S81   S179   Prefabricated Statinsics Steel Crown - Primary   D2391   S59   S81   S179   Prefabricated Statinsics Steel Crown - Primary   D2391   S59   S81   S179   Prefabricated Statinsics Steel Crown - Primary   D2391   S59   S81   S179   Prefabricated Statinsics Steel Crown - Primary   D2391   S59   S81   S179   Prefabricated Statinsics Steel Crown - Primary   D2391   S59   S81   S179   Prefabricated Statinsics Steel Crown - Primary   D2391   S59   S81   S179   Prefabricated Statinsics Steel Crown - Primary   D2391   S59   S81   S179   Prefabricated Post statinsics Steel Crown - Primary   D2391   S59   S81   S179   Prefabricated Post statinsics Steel Crown - Primary   D2391   S59   S81   S179   Prefabricated Post statinsics Steel Crown - Primary   D2391   S59   S81   S179   Prefabricated Post statinsics Steel Crown - Primary   D2391   S59	COVERED SERVICES	ADA CODE	NETWORK GENERAL DENTIST COPAY	NETWORK SPECIALIST DENTIST COPAY	COVERED SERVICES	ADA CODE	NETWORK GENERAL DENTIST COPAY	NETWORK SPECIALIST DENTIST COPAY
Resin Composite - Flowers - Surfaces - Posterior   D2391   S59   S145   Recement/Re-band Crown - Primary   D290   S416   S58   Resin Composite - 2 Surfaces - Posterior   D2391   S51   S148   Perfabricated Precision/Cramine Crown - Primary   D290   S416   S58   Resin Composite - 2 Surfaces - Posterior   D2393   S81   S179   Perfabricated Stainless Steel Crown - Primary   D290   S61   S58   S58   Resin Composite - 4 Surfaces - Posterior   D2394   S81   S209   Perfabricated Stainless Steel Crown - Primary   D290   S61   S58   S58   Resin Composite - 4 Surfaces - Posterior   D2394   S81   S209   Perfabricated Stainless Steel Crown - Primary   D290   S61	Resin Composite - 3 Surfaces - Anterior	D2332	\$68	\$145	Crown - Titanium	D2794	\$360	\$493
Resin Composite - 1 Surface - Posterior	Resin Composite - 4+ Surfaces - Anterior	D2335	\$83	\$184	Re-cement/Re-bond Inlay/Onlay/Partial Restoration	D2910	\$16	\$24
Resin Composite - 2 Surfaces - Posterior   D293   \$81   \$179   Perfabricated Stainless Steel Crown - Primany   D293   \$81   \$179   Perfabricated Stainless Steel Crown - Primany   D293   \$81   \$179   Perfabricated Stainless Steel Crown - Primany   D293   \$85   \$81   \$870   Perfabricated Stainless Steel Crown - Primany   D293   \$80   \$81   \$870   Perfabricated Stainless Steel Crown - Permanent   D293   \$80   \$81   \$870   Perfabricated Stainless Steel Crown - Permanent   D293   \$80   \$81   \$870   Perfabricated Stainless Steel Crown - Permanent   D293   \$80   \$81   \$81   \$818   \$818   \$819   Perfabricated Stainless Steel Crown - Permanent   D293   \$80   \$81   \$818   \$819   Perfabricated Stainless Steel Crown - Permanent   D293   \$80   \$81   \$818   \$818   \$818   \$819   Perfabricated Stainless Steel Crown - Permanent   D293   \$81   \$818   \$818   \$819   Perfabricated Stainless Steel Crown - Permanent   D293   \$81   \$818   \$8	Resin Composite Crown - Anterior	D2390	\$60	\$145	Re-cement/Re-bond Crown	D2920	\$30	\$45
Resin Composite - 4 Surfaces - Posterior   D2391   S81   S179   Perfabricated Stainless Stoel Crown - Permanent   D2391   S89   S8   S85   S85   S85   C85   Crown - Permanent   D2391   S89   S8   S85   C85   Crown - Permanent   D2391   S89   S8   S85   C85   Crown - Permanent   D2392   S80   S8   S85   C85   Crown - Permanent   D2392   S87   S81   S8	Resin Composite - 1 Surface - Posterior	D2391	\$59	\$112	Prefabricated Porcelain/Ceramic Crown - Primary	D2929	\$147	\$246
Perfabricated Post Rise (Norm)   D294   S81   S209   Perfabricated Rise (Norm)   D294   S81   S7   S7   Perfabricated Post Rise (Norm)   D294   S7   S7   S7   S7   S7   S7   S8   S8	Resin Composite - 2 Surfaces - Posterior	D2392	\$74	\$148	Prefabricated Stainless Steel Crown - Primary	D2930	\$61	\$135
Protective Restoration   D2940   \$7   \$7   \$1   \$1   \$1   \$1   \$1   \$1	Resin Composite - 3 Surfaces - Posterior	D2393	\$81	\$179	Prefabricated Stainless Steel Crown - Permanent	D2931	\$59	\$136
Type   Hollays, Crowns and Bridges	Resin Composite - 4+ Surfaces - Posterior	D2394	\$81	\$209	Prefabricated Resin Crown	D2932	\$80	\$177
Inlay - Metallic - 1 Surface   D2510   \$188   \$361   Pin Kenetino - Per Tooth - in Addition to Restoration   D2951   \$14   \$181   \$18					Protective Restoration	D2940	\$7	\$11
Inlay - Metallic - 2 Surfaces   D.2500   S.202   S.385   Cast Post and Core - in Addition to Crown   D.2952   S.82   S. 10	Type III - Onlays, Crowns and Bridges				Core Build Up - Including any Pins when required	D2950	\$70	\$119
Inlay - Metallic - 3 + Surfaces   D250   S294   S468   Cast Post and Core - Each Additional - same tooth   D2953   S85   S10   S40   Onlay - Metallic - 3 Surfaces   D2542   S287   S310   S440   Post Removal   D2954   S82   S10   S10   Onlay - Metallic - 4 Surfaces   D2543   S301   S440   Post Removal   D2955   S0   S10   S40   Onlay - Metallic - 4 Surfaces   D2544   S301   S302   Each Additional Perfabricated Post - same tooth   D2957   S36   S10   S40   Onlay - Porcelain/Ceramic - 1 Surface   D2610   S203   S467   Labial Veneer (resin laminate) - Chairside   D2960   S183   S85   Inlay - Porcelain/Ceramic - 2 Surfaces   D260   S275   S435   Labial Veneer (resin laminate) - Laboratory   D2961   S316   S86   Inlay - Porcelain/Ceramic - 3 Surfaces   D2642   S225   S436   Crown Repair   D2981   S56   S96   Onlay - Porcelain/Ceramic - 3 Surfaces   D2643   S230   S402   Inlay Repair   D2981   S56   S96   Onlay - Porcelain/Ceramic - 3 Surfaces   D2644   S330   S342   Onlay - Repair   D2981   S56   S96   Inlay - Resin Composite - 1 Surface   D2650   S106   S208   Veneer Repair   D2981   S56   S96   S96   Inlay - Resin Composite - 2 Surfaces   D2663   S246   S319   S320   S97	Inlay - Metallic - 1 Surface	D2510	\$183	\$361	Pin Retention - Per Tooth - in Addition to Restoration	D2951	\$14	\$21
Onlay - Metallic - 2 Surfaces         D2542         \$387         \$\$12         Preflabricated Post and Core - in Addition to Crown         D294         \$82         \$1           Onlay - Metallic - 2 Surfaces         D2543         \$301         \$440         Post Removal         D295         \$80           Onlay - Metallic - 4 Surfaces         D2541         \$301         \$340         Peach Additional Prefabricated Post - same tooth         D2957         \$36         \$3           Inlay - Porcelain/Ceramic - 1 Surfaces         D2620         \$244         \$486         Labial Veneer (resin laminate) - Laboratory         D2960         \$183         \$8           Inlay - Porcelain/Ceramic - 3 Surfaces         D2620         \$225         \$436         Crown Repair         D2960         \$275         \$35           Onlay - Porcelain/Ceramic - 3 Surfaces         D2642         \$225         \$436         Crown Repair         D2980         \$56         \$3           Onlay - Porcelain/Ceramic - 3 Surfaces         D2643         \$233         \$402         Inlay Repair         D2980         \$56         \$3           Inlay - Resin Composite - 1 Surfaces         D2643         \$233         \$402         Inlay Repair         D2980         \$56         \$3           Inlay - Resin Composite - 2 Surfaces         D2650	Inlay - Metallic - 2 Surfaces	D2520	\$202	\$385	Cast Post and Core - in Addition to Crown	D2952	\$82	\$177
Dellay - Metallic - 3 Surfaces   D2543   S301   S440   Post Removal   Post Post Removal   Post Removal   Post Removal   Post Removal   Post Post Removal	Inlay - Metallic - 3+ Surfaces	D2530	\$294	\$468	Cast Post and Core - Each Additional - same tooth	D2953	\$85	\$87
Onlay - Metallic - 4+ Surfaces         D2544         \$301         \$302         Each Additional Perfabricated Post - same tooth         D2957         \$36         \$301           Inlay - Porcelain/Ceramic - 1 Surfaces         D260         \$294         \$486         Labial Veneer (resin laminate) - Chairside         D2961         \$316         \$8           Inlay - Porcelain/Ceramic - 3 Surfaces         D260         \$294         \$486         Labial Veneer (resin laminate) - Laboratory         D2962         \$316         \$8           Onlay - Porcelain/Ceramic - 3 Surfaces         D2643         \$230         \$402         Inlay Repair         D2981         \$56         \$3           Onlay - Porcelain/Ceramic - 3 Surfaces         D2644         \$330         \$342         Onlay Repair         D2982         \$56         \$3           Inlay - Resin Composite - 1 Surface         D2650         \$106         \$308         \$402         Inlay Repair         D2982         \$56         \$3           Inlay - Resin Composite - 2 Surfaces         D2652         \$196         \$284 <b>Type III - Endodontics</b> Inlay - Resin Composite - 3 Surfaces         D2663         \$246         \$319         Pulp Cap - Direct (Excluding Final Restoration)         D3110         \$18         \$3           Onlay - Resin Composite - 3 Surfaces	Onlay - Metallic - 2 Surfaces	D2542	\$287	\$512	Prefabricated Post and Core - in Addition to Crown	D2954	\$82	\$152
Inlay - Porcelain/Ceramic - 1 Surface   D2610   S203   S467   Labial Veneer (resin laminate) - Chairside   D2960   S183   S46   Inlay - Porcelain/Ceramic - 2 Surfaces   D2630   S274   S486   Labial Veneer (resin laminate) - Laboratory   D2961   S316   S58   Inlay - Porcelain/Ceramic - 3 Surfaces   D2630   S275   S435   Labial Veneer (procelain laminate) - Laboratory   D2961   S316   S58   D1849 - Porcelain/Ceramic - 3 Surfaces   D2642   S225   S436   Crown Repair   D2980   S56   S58   D1849 - Porcelain/Ceramic - 3 Surfaces   D2643   S230   S402   Inlay Repair   D2981   S56   S58   D1849 - Resin Composite - 1 Surface   D2650   S106   S208   Veneer Repair   D2981   S56   S58   D1849 - Resin Composite - 2 Surfaces   D2651   S147   S264   D1849 - Resin Composite - 2 Surfaces   D2651   S147   S264   D1849 - Resin Composite - 2 Surfaces   D2662   S189   S222   Pulp Cap - Direct (Excluding Final Restoration)   D3110   S18   S58   D1849 - Resin Composite - 3 Surfaces   D2662   S189   S222   Pulp Cap - Direct (Excluding Final Restoration)   D3120   S14   S58   S58   D1849 - S58   D1849 - Resin Composite - 3 Surfaces   D2664   S281   S346   Therapeutic Pulpotomy (Excluding Final Restoration)   D3220   S45   S58   S58   D1849 - S58   D18	Onlay - Metallic - 3 Surfaces	D2543	\$301	\$440	Post Removal	D2955	\$0	\$0
Inlay - Porcelain/Ceramic - 2 Surfaces   D2620   \$294   \$486   Labial Veneer (resin laminate) - Laboratory   D2961   \$316   \$326   \$1819 - Porcelain/Ceramic - 3 Surfaces   D2642   \$225   \$4365   Crown Repair   D2962   \$275   \$500   Collay - Porcelain/Ceramic - 3 Surfaces   D2643   \$230   \$402   Inlay Repair   D2981   \$566   \$500   Collay - Porcelain/Ceramic - 3 Surfaces   D2644   \$330   \$342   Onlay Repair   D2981   \$566   \$500   Collay - Porcelain/Ceramic - 4 Surfaces   D2643   \$330   \$342   Onlay Repair   D2981   \$566   \$500   Collay - Resin Composite - 1 Surface   D2651   \$147   \$264   Collay - Resin Composite - 2 Surfaces   D2651   \$147   \$264   Collay - Resin Composite - 3 Surfaces   D2652   \$196   \$284   Collay - Resin Composite - 3 Surfaces   D2652   \$196   \$284   Collay - Resin Composite - 3 Surfaces   D2663   \$246   \$319   Pulp Cap - Indirect (Excluding Final Restoration)   D3110   \$18   \$500   Collay - Resin Composite - 3 Surfaces   D2663   \$246   \$319   Pulp Cap - Indirect (Excluding Final Restoration)   D3120   \$14   \$500   Collay - Resin Based Composite - 4 Surfaces   D2664   \$281   \$346   Therapeutic Pulpotomy (Excluding Final Restoration)   D320   \$45   \$500   \$50	Onlay - Metallic - 4+ Surfaces	D2544	\$301	\$302	Each Additional Prefabricated Post - same tooth	D2957	\$36	\$54
Inlay - Porcelain/Ceramic - 3+ Surfaces   D2630   S275   S435   Labial Veneer (porcelain laminate) - Laboratory   D2962   S275   S436   Crown Repair   D2980   S56   S36   S	Inlay - Porcelain/Ceramic - 1 Surface	D2610	\$203	\$467	Labial Veneer (resin laminate) - Chairside	D2960	\$183	\$430
Onlay - Porcelain/Ceramic - 2 Surfaces   D2642   S225   S436   Crown Repair   D2980   S56   S26   Onlay - Porcelain/Ceramic - 3 Surfaces   D2643   S320   S402   Inlay Repair   D2981   S56   S56   S56   Inlay - Resin Composite - 1 Surfaces   D2644   S330   S342   Onlay Repair   D2982   S56   S56   S56   Inlay - Resin Composite - 1 Surfaces   D2650   S106   S208   Veneer Repair   D2983   S56   S56   S56   Inlay - Resin Composite - 2 Surfaces   D2651   S147   S264   Inlay - Resin Composite - 3 Surfaces   D2652   S196   S284   Type III - Endodontics   D1644   S264   D1644   S264   D1644   S264   S26	Inlay - Porcelain/Ceramic - 2 Surfaces	D2620	\$294	\$486	Labial Veneer (resin laminate) - Laboratory	D2961	\$316	\$486
Onlay - Porcelain/Ceramic - 3 Surfaces   D2643   \$230   \$402   Onlay Repair   D2981   \$56   \$50   \$100   \$104   \$330   \$342   Onlay Repair   D2981   \$56   \$50   \$101   \$104	Inlay - Porcelain/Ceramic - 3+ Surfaces	D2630	\$275	\$435	Labial Veneer (porcelain laminate) - Laboratory	D2962	\$275	\$422
Onlay - Porcelain/Ceramic - 4+ Surfaces   D2644   S330   S342   Onlay Repair   D2982   S56   S16   Inlay - Resin Composite - 1 Surface   D2650   S106   S208   Veneer Repair   D2983   S56   S56   S16   S16   S208   Veneer Repair   D2983   S56	Onlay - Porcelain/Ceramic - 2 Surfaces	D2642	\$225	\$436	Crown Repair	D2980	\$56	\$84
Inlay - Resin Composite - 1 Surfaces   D2650   \$106   \$208   Venerr Repair   D2983   \$56   \$10   \$11   \$10   \$11   \$10   \$11   \$10   \$11   \$10   \$11   \$10   \$11   \$10   \$11   \$10   \$11   \$10   \$11   \$10	Onlay - Porcelain/Ceramic - 3 Surfaces	D2643	\$230	\$402	Inlay Repair	D2981	\$56	\$84
Inlay - Resin Composite - 2 Surfaces   D2651   \$147   \$264     Inlay - Resin Composite - 3 + Surfaces   D2652   \$196   \$284     S284   Syle Care Composite - 3 + Surfaces   D2662   \$189   \$222   Pulp Cap - Direct (Excluding Final Restoration)   D3110   \$18   \$18     Onlay - Resin Composite - 3 Surfaces   D2663   \$246   \$319   Pulp Cap - Indirect (Excluding Final Restoration)   D3120   \$14   \$28     Onlay - Resin Composite - 4 + Surfaces   D2664   \$281   \$346   Therapeutic Pulpotomy (Excluding Final Restoration)   D3220   \$45   \$28     Onlay - Resin Composite - 4 + Surfaces   D2664   \$281   \$346   Therapeutic Pulpotomy (Excluding Final Restoration)   D3220   \$45   \$28     Onlay - Resin Based Composite - Indirect   D2710   \$133   \$200   Pulpal Debridement - Primary/Permanent   D3221   \$43   \$38     Crown - Sesin Based Composite - Indirect   D2710   \$139   \$244   Partial Pulpotomy for Apexogenesis   D3222   \$47   \$38     Crown - Sesin with High Noble Metal   D2720   \$371   \$483   Pulpal Therapy Anterior - Primary   D3230   \$56   \$35     Crown - Resin with Base Metal   D2721   \$357   \$486   Pulpal Therapy Posterior - Primary   D3240   \$49   \$38     Crown - Porcelain With Moble Metal   D2750   \$390   \$465   Root Canal - Anterior (Excluding Final Restoration)   D3310   \$180   \$38     Crown - Porcelain with High Noble Metal   D2750   \$390   \$465   Root Canal - Molar (Excluding Final Restoration)   D3330   \$395   \$36     Crown - Porcelain with Predominantly Base Metal   D2751   \$300   \$376   Treatment of Root Canal Obstruction - non surgical   D3331   \$126   \$38     Crown - Was the High Noble Metal   D2780   \$337   \$380   \$360   \$493   Incomplete Endodontic Therapy - Inoperable/Fractured   D3332   \$167   \$38     Crown - Was the High Noble Metal   D2780   \$334   \$406   Retreatment of Previous RCT - Anterior   D3346   \$294   \$38     Crown - Was the High Noble Metal   D2780   \$346   \$495   Retreatment of Previous RCT - Molar   D3341   \$390   \$380   \$390   \$390   \$390   \$390   \$390   \$390   \$390   \$390   \$390   \$390   \$39	Onlay - Porcelain/Ceramic - 4+ Surfaces	D2644	\$330	\$342	Onlay Repair	D2982	\$56	\$84
Inlay - Resin Composite - 3+ Surfaces   D2652   \$196   \$284   S292   Pulp Cap - Direct (Excluding Final Restoration)   D3110   \$18   \$50   \$180   \$284   \$190   \$290   Pulp Cap - Indirect (Excluding Final Restoration)   D3120   \$14   \$180	Inlay - Resin Composite - 1 Surface	D2650	\$106	\$208	Veneer Repair	D2983	\$56	\$84
Onlay - Resin Composite - 2 Surfaces         D2662         \$189         \$222         Pulp Cap - Direct (Excluding Final Restoration)         D3110         \$18         \$20           Onlay - Resin Composite - 3 Surfaces         D2663         \$246         \$319         Pulp Cap - Indirect (Excluding Final Restoration)         D3120         \$14         \$20           Onlay - Resin Composite - 4+ Surfaces         D2664         \$281         \$346         Therapeutic Pulpotomy (Excluding Final Restoration)         D3220         \$45         \$35           Crown - Resin Based Composite - Indirect         D2710         \$133         \$200         Pulpal Debridement - Primary/Permanent         D3221         \$43         \$35           Crown - Wa Resin Based Composite - Indirect         D2712         \$139         \$244         Partial Pulpotomy (for Apexogenesis)         D3222         \$47         \$35           Crown - Wa Resin with High Noble Metal         D2720         \$371         \$483         Pulpal Therapy Anterior - Primary         D3230         \$56         \$35           Crown - Resin with High Noble Metal         D2721         \$357         \$486         Pulpal Therapy Posterior - Primary         D320         \$49         \$30           Crown - Porcelain With Noble Metal         D2752         \$340         \$421         Root Canal - Anterior (Excluding Final Rest	Inlay - Resin Composite - 2 Surfaces	D2651	\$147	\$264				
Onlay - Resin Composite - 3 Surfaces         D2663         \$246         \$319         Pulp Cap - Indirect (Excluding Final Restoration)         D3120         \$14         \$350           Onlay - Resin Composite - 4 Surfaces         D2664         \$281         \$346         Therapeutic Pulpotomy (Excluding Final Restoration)         D3220         \$45         \$550           Crown - Resin Based Composite - Indirect         D2710         \$133         \$200         Pulpal Debridement - Primary/Permanent         D3221         \$43         \$150           Crown - Wasin Based Composite - Indirect         D2712         \$133         \$240         Pulpal Debridement - Primary/Permanent         D3221         \$43         \$150           Crown - Resin with High Noble Metal         D2720         \$371         \$483         Pulpal Therapy Anterior - Primary         D3230         \$56         \$150           Crown - Resin with Base Metal         D2721         \$357         \$486         Pulpal Therapy Posterior - Primary         D3240         \$49         \$150           Crown - Resin with Noble Metal         D2722         \$364         \$499         Root Canal - Anterior (Excluding Final Restoration)         D3310         \$180         \$350           Crown - Porcelain with Noble Metal         D2750         \$340         \$421         Root Canal - Premolar (Excluding Final Restorat	Inlay - Resin Composite - 3+ Surfaces	D2652	\$196	\$284	Type III - Endodontics			
Onlay - Resin Composite - 4+ Surfaces         D2664         \$281         \$346         Therapeutic Pulpotomy (Excluding Final Restoration)         D3220         \$45         \$35           Crown - Resin Based Composite - Indirect         D2710         \$133         \$200         Pulpal Debridement - Primary/Permanent         D3221         \$43         \$15           Crown - 4% Resin Based Composite - Indirect         D2712         \$139         \$244         Partial Pulpotomy for Apexogenesis         D3222         \$47         \$15           Crown - Resin with High Noble Metal         D2720         \$371         \$483         Pulpal Therapy Anterior - Primary         D3230         \$56         \$35           Crown - Resin with Base Metal         D2721         \$357         \$486         Pulpal Therapy Anterior - Primary         D3240         \$49         \$350         \$465         Pulpal Therapy Posterior - Primary         D3240         \$49         \$360         \$499         Root Canal - Anterior (Excluding Final Restoration)         D3310         \$180         \$35         \$360         \$370         \$465         Root Canal - Anterior (Excluding Final Restoration)         D3330         \$395         \$360         \$360         \$376         Treatment of Root Canal Obstruction - non surgical         D3331         \$126         \$131         \$350         \$360         \$360	Onlay - Resin Composite - 2 Surfaces	D2662	\$189	\$222	Pulp Cap - Direct (Excluding Final Restoration)	D3110	\$18	\$54
Crown - Resin Based Composite - Indirect         D2710         \$133         \$200         Pulpal Debridement - Primary/Permanent         D3221         \$43         \$150           Crown - ¾ Resin Based Composite - Indirect         D2712         \$139         \$244         Partial Pulpotomy for Apexogenesis         D3222         \$47         \$150           Crown - Resin with High Noble Metal         D2720         \$371         \$483         Pulpal Therapy Anterior - Primary         D3230         \$56         \$31           Crown - Resin with Base Metal         D2721         \$357         \$486         Pulpal Therapy Anterior - Primary         D3240         \$49         \$30           Crown - Resin with Noble Metal         D2722         \$364         \$449         Root Canal - Anterior (Excluding Final Restoration)         D3310         \$180         \$30           Crown - Porcelain With Predominantly Base Metal         D2750         \$390         \$465         Root Canal - Premolar (Excluding Final Restoration)         D3330         \$395         \$36           Crown - Porcelain with Predominantly Base Metal         D2751         \$300         \$376         Treatment of Root Canal Obstruction - non surgical         D3331         \$126         \$15           Crown - ¾ Cast High Noble Metal         D2781         \$330         \$373         \$507         Internal Ro	Onlay - Resin Composite - 3 Surfaces	D2663	\$246	\$319	Pulp Cap - Indirect (Excluding Final Restoration)	D3120	\$14	\$38
Crown - 34 Resin Based Composite - Indirect D2712 \$139 \$244 Partial Pulpotomy for Apexogenesis D3222 \$47 \$57 \$150 \$150 \$150 \$150 \$150 \$150 \$150 \$150	Onlay - Resin Composite - 4+ Surfaces	D2664	\$281	\$346	Therapeutic Pulpotomy (Excluding Final Restoration)	D3220	\$45	\$94
Crown - Resin with High Noble Metal         D2720         \$371         \$483         Pulpal Therapy Anterior - Primary         D3230         \$56         \$37           Crown - Resin with Base Metal         D2721         \$357         \$486         Pulpal Therapy Posterior - Primary         D3240         \$49         \$37           Crown - Resin with Noble Metal         D2722         \$364         \$499         Root Canal - Anterior (Excluding Final Restoration)         D3310         \$180         \$37           Crown - Porcelain/Ceramic         D2740         \$340         \$421         Root Canal - Anterior (Excluding Final Restoration)         D3320         \$250         \$420           Crown - Porcelain with High Noble Metal         D2750         \$390         \$465         Root Canal - Molar (Excluding Final Restoration)         D3330         \$395         \$465           Crown - Porcelain with Predominantly Base Metal         D2751         \$300         \$376         Treatment of Root Canal Obstruction - non surgical         D3331         \$126         \$37           Crown - Porcelain With Noble Metal         D2752         \$320         \$399         Incomplete Endodontic Therapy - Inoperable/Fractured         D3332         \$167         \$37           Crown - ¾ Cast High Noble Metal         D2781         \$336         \$407         Retreatment of Previous RCT - Ant	Crown - Resin Based Composite - Indirect	D2710	\$133	\$200	Pulpal Debridement - Primary/Permanent	D3221	\$43	\$125
Crown - Resin with High Noble Metal         D2720         \$371         \$483         Pulpal Therapy Anterior - Primary         D3230         \$56         \$15           Crown - Resin with Base Metal         D2721         \$357         \$486         Pulpal Therapy Posterior - Primary         D3240         \$49         \$15           Crown - Resin with Noble Metal         D2722         \$364         \$499         Root Canal - Anterior (Excluding Final Restoration)         D3310         \$180         \$35           Crown - Porcelain/Ceramic         D2740         \$340         \$421         Root Canal - Anterior (Excluding Final Restoration)         D3320         \$250         \$35           Crown - Porcelain with High Noble Metal         D2750         \$390         \$465         Root Canal - Premolar (Excluding Final Restoration)         D3330         \$395         \$36           Crown - Porcelain with Predominantly Base Metal         D2751         \$300         \$376         Treatment of Root Canal Obstruction - non surgical         D3331         \$126         \$37           Crown - Porcelain With Noble Metal         D2752         \$320         \$399         Incomplete Endodontic Therapy - Inoperable/Fractured         D3331         \$16         \$37           Crown - 34 Cast High Noble Metal         D2781         \$336         \$407         Retreatment of Previous RCT - An		D2712	\$139	\$244		D3222	\$47	\$106
Crown - Resin with Base Metal  D2721 \$357 \$486 Pulpal Therapy Posterior - Primary  D3240 \$49 \$50 \$50 \$60 \$60 \$60 \$60 \$60 \$60 \$60 \$60 \$60 \$6	Crown - Resin with High Noble Metal	D2720	\$371	\$483		D3230	\$56	\$112
Crown - Porcelain/Ceramic D2740 \$340 \$421 Root Canal - Premolar (Excluding Final Restoration) D3320 \$250 \$320 \$390 \$465 Root Canal - Molar (Excluding Final Restoration) D3330 \$395 \$300 \$300 \$300 \$300 \$300 \$300 \$300 \$30	Crown - Resin with Base Metal	D2721	\$357	\$486	Pulpal Therapy Posterior - Primary	D3240	\$49	\$122
Crown - Porcelain with High Noble Metal  D2750 \$390 \$465  Root Canal - Molar (Excluding Final Restoration)  D3330 \$395 \$60  Crown - Porcelain with Predominantly Base Metal  D2751 \$300 \$376  Treatment of Root Canal Obstruction - non surgical  D3331 \$126 \$10  Crown - Porcelain With Noble Metal  D2752 \$320 \$399  Incomplete Endodontic Therapy - Inoperable/Fractured  D3332 \$167 \$30  Crown - ¾ Cast High Noble Metal  D2780 \$373 \$507  Internal Root Repair of Perforation Defects  D3333 \$161 \$10  Crown - ¾ Cast Predominantly Base Metal  D2781 \$336 \$407  Retreatment of Previous RCT - Anterior  D3346 \$294 \$70  Crown - ¾ Cast Noble Metal  D2782 \$343 \$406  Retreatment of Previous RCT - Premolar  D3347 \$399 \$80  Crown - ¾ Porcelain/Ceramic  D2783 \$336 \$485  Retreatment of Previous RCT - Molar  D3348 \$306 \$90  Crown - Full Cast High Noble Metal  D2790 \$360 \$493  Apexification/Recalcification - Initial Visit  D3352 \$43 \$90  S453 Apexification/Recalcification - Interim Visit  D3350 \$395  S465  Root Canal - Molar (Excluding Final Restoration)  D3330 \$395  S465  S465  Retreatment of Root Canal Obstruction - non surgical  D3331 \$126  S47  S47  S47  S48  S48  S48  S48  S48	Crown - Resin with Noble Metal	D2722	\$364	\$499	Root Canal - Anterior (Excluding Final Restoration)	D3310	\$180	\$318
Crown - Porcelain with Predominantly Base Metal  D2751 \$300 \$376  Treatment of Root Canal Obstruction - non surgical  D3331 \$126 \$330  Crown - Porcelain With Noble Metal  D2752 \$320 \$399  Incomplete Endodontic Therapy - Inoperable/Fractured  D3332 \$167 \$330  Crown - ¾ Cast High Noble Metal  D2780 \$373 \$507  Internal Root Repair of Perforation Defects  D3333 \$161 \$330  Crown - ¾ Cast Predominantly Base Metal  D2781 \$336 \$407  Retreatment of Previous RCT - Anterior  D3346 \$294 \$70  Crown - ¾ Cast Noble Metal  D2782 \$343 \$406  Retreatment of Previous RCT - Premolar  D3347 \$399 \$800  Crown - ¾ Porcelain/Ceramic  D2783 \$336 \$485  Retreatment of Previous RCT - Molar  D3348 \$306 \$900  Crown - Full Cast High Noble Metal  D2790 \$360 \$493  Apexification/Recalcification - Initial Visit  D3351 \$43 \$300  S43 \$453 Apexification - Interim Visit  D3352 \$43	Crown - Porcelain/Ceramic	D2740	\$340	\$421	Root Canal - Premolar (Excluding Final Restoration)	D3320	\$250	\$428
Crown - Porcelain with Predominantly Base Metal  D2751 \$300 \$376  Treatment of Root Canal Obstruction - non surgical  D3331 \$126 \$51  Crown - Porcelain With Noble Metal  D2752 \$320 \$399  Incomplete Endodontic Therapy - Inoperable/Fractured  D3332 \$167 \$32  Crown - ¾ Cast High Noble Metal  D2780 \$373 \$507  Internal Root Repair of Perforation Defects  D3333 \$161 \$51  Crown - ¾ Cast Predominantly Base Metal  D2781 \$336 \$407  Retreatment of Previous RCT - Anterior  D3346 \$294 \$57  Crown - ¾ Cast Noble Metal  D2782 \$343 \$406  Retreatment of Previous RCT - Premolar  D3347 \$399 \$88  Crown - ¾ Porcelain/Ceramic  D2783 \$336 \$485  Retreatment of Previous RCT - Molar  D3348 \$306 \$99  Crown - Full Cast High Noble Metal  D2790 \$360 \$493  Apexification/Recalcification - Initial Visit  D3351 \$43 \$99  S45  Crown - Full Cast Predominantly Base Metal  D2791 \$330 \$453  Apexification/Recalcification - Interim Visit  D3351 \$43 \$59  S45	Crown - Porcelain with High Noble Metal	D2750	\$390	\$465	=	D3330	\$395	\$674
Crown - ¾ Cast High Noble Metal D2780 \$373 \$507 Internal Root Repair of Perforation Defects D3333 \$161 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1	Crown - Porcelain with Predominantly Base Metal	D2751	\$300	\$376		D3331	\$126	\$152
Crown - ¾ Cast High Noble Metal  D2780 \$373 \$507  Internal Root Repair of Perforation Defects  D3333 \$161 \$507  Crown - ¾ Cast Predominantly Base Metal  D2781 \$336 \$407  Retreatment of Previous RCT - Anterior  D3346 \$294 \$507  Crown - ¾ Cast Noble Metal  D2782 \$343 \$406  Retreatment of Previous RCT - Premolar  D3347 \$399 \$600  Crown - ¾ Porcelain/Ceramic  D2783 \$336 \$485  Retreatment of Previous RCT - Molar  D3348 \$306 \$909  Crown - Full Cast High Noble Metal  D2790 \$360 \$493  Apexification/Recalcification - Initial Visit  D3351 \$43 \$509  Crown - Full Cast Predominantly Base Metal  D2791 \$330 \$453  Apexification/Recalcification - Interim Visit  D3352 \$430 \$509  Crown - Full Cast Predominantly Base Metal	Crown - Porcelain With Noble Metal	D2752	\$320	\$399	Incomplete Endodontic Therapy - Inoperable/Fractured	D3332	\$167	\$370
Crown - ¾ Cast Predominantly Base Metal  D2781 \$336 \$407  Retreatment of Previous RCT - Anterior  D3346 \$294 \$57  Crown - ¾ Cast Noble Metal  D2782 \$343 \$406  Retreatment of Previous RCT - Premolar  D3347 \$399 \$87  Crown - ¾ Porcelain/Ceramic  D2783 \$336 \$485  Retreatment of Previous RCT - Molar  D3348 \$306 \$97  Crown - Full Cast High Noble Metal  D2790 \$360 \$493  Apexification/Recalcification - Initial Visit  D3351 \$43 \$57  Crown - Full Cast Predominantly Base Metal  D2791 \$330 \$453  Apexification/Recalcification - Interim Visit  D3352 \$43 \$57  Crown - Full Cast Predominantly Base Metal	Crown - 3/4 Cast High Noble Metal	D2780				D3333	\$161	\$196
Crown - ¾ Cast Noble MetalD2782\$343\$406Retreatment of Previous RCT - PremolarD3347\$399\$8Crown - ¾ Porcelain/CeramicD2783\$336\$485Retreatment of Previous RCT - MolarD3348\$306\$9Crown - Full Cast High Noble MetalD2790\$360\$493Apexification/Recalcification - Initial VisitD3351\$43\$2Crown - Full Cast Predominantly Base MetalD2791\$330\$453Apexification/Recalcification - Interim VisitD3352\$43\$2	•		\$336		<u> </u>		\$294	\$708
Crown - ¾ Porcelain/CeramicD2783\$336\$485Retreatment of Previous RCT - MolarD3348\$306\$9Crown - Full Cast High Noble MetalD2790\$360\$493Apexification/Recalcification - Initial VisitD3351\$43\$2Crown - Full Cast Predominantly Base MetalD2791\$330\$453Apexification/Recalcification - Interim VisitD3352\$43\$2		D2782			Retreatment of Previous RCT - Premolar	D3347		\$831
Crown - Full Cast High Noble Metal D2790 \$360 \$493 Apexification/Recalcification - Initial Visit D3351 \$43 \$2 Crown - Full Cast Predominantly Base Metal D2791 \$330 \$453 Apexification/Recalcification - Interim Visit D3352 \$43 \$5	Crown - 3/4 Porcelain/Ceramic							\$903
Crown - Full Cast Predominantly Base Metal D2791 \$330 \$453 Apexification/Recalcification - Interim Visit D3352 \$43								\$256
					-			\$89
Crown - Fun Cast noble Metal D2/92 \$343 \$480   Apexincation/Recalcification - Final Visit D3353 \$43 \$5	Crown - Full Cast Noble Metal	D2792	\$345	\$486	Apexification/Recalcification - Final Visit	D3353	\$43	\$396

COVERED SERVICES	ADA CODE	NETWORK GENERAL DENTIST COPAY	NETWORK SPECIALIST DENTIST COPAY	COVERED SERVICES	ADA CODE	NETWORK GENERAL DENTIST COPAY	NETWORK SPECIALIST DENTIST COPAY
Apicoectomy - Anterior	D3410	\$203	\$556	Upper Partial Denture - Resin Base	D5211	\$357	\$837
Apicoectomy - Premolar - 1st Root	D3421	\$188	\$537	Lower Partial Denture - Resin Base	D5212	\$357	\$1,002
Apicoectomy - Molar - 1st Root	D3425	\$221	\$610	Upper Partial - Cast Metal Frame - Resin Base	D5213	\$425	\$947
Apicoectomy - Each Additional Root	D3426	\$43	\$85	Lower Partial - Cast Metal Frame - Resin Base	D5214	\$425	\$947
Retrograde Filling - Per Root	D3430	\$43	\$149	Upper Immediate Partial Denture - Resin Base	D5221	\$500	\$750
Root Amputation - Per Root	D3450	\$93	\$280	Lower Immediate Partial Denture - Resin Base	D5222	\$500	\$750
Hemisection (Including any Root Removal)	D3920	\$93	\$262	Upper Immediate Partial Denture - Cast Metal with Resin	D5223	\$666	\$999
Canal Preparation/Post Fitting	D3950	\$0	\$0	Lower Immediate Partial Denture - Cast Metal with Resin	D5224	\$666	\$999
				Removable Unilateral Partial - 1 Piece Cast Metal	D5281	\$237	\$514
Type III - Periodontics				Adjust Complete Denture - Upper	D5410	\$21	\$32
Gingivectomy/Gingivoplasty - 4+ teeth/quad	D4210	\$203	\$699	Adjust Complete Denture - Lower	D5411	\$21	\$32
Gingivectomy/Gingivoplasty - 1 to 3 teeth/quad	D4211	\$56	\$278	Adjust Partial Denture - Upper	D5421	\$21	\$32
Gingivectomy/Gingivoplasty for restorative procedure	D4212	\$35	\$278	Adjust Partial Denture - Lower	D5422	\$21	\$32
Gingival Flap-Incl. Root Planing - 4+ teeth/quad	D4240	\$259	\$718	Repair Broken Complete Denture Base - Mandibular	D5511	\$62	\$125
Gingival Flap-Incl. Root Planing - 1 to 3 teeth/quad	D4241	\$167	\$376	Repair Broken Complete Denture Base - Maxillary	D5512	\$62	\$125
Crown Lengthening - Hard Tissue	D4249	\$280	\$750	Replace Missing or Broken Teeth - Complete Denture - Per	D5520	\$43	\$65
Osseous Surgery - 4+ teeth/quad	D4260	\$369	\$1,226	Tooth	20020	Ψ.5	Ψ03
Osseous Surgery - 1-3 teeth/quad	D4261	\$199	\$505	Repair Resin Partial Denture Base - Mandibular	D5611	\$51	\$117
Pedicle Soft Tissue Graft Procedure	D4270	\$91	\$908	Repair Resin Partial Denture Base - Maxillary	D5612	\$51	\$117
Autogenous Connective Tissue Graft - 1st Tooth (excl implants)	D4273	\$350	\$1,001	Repair Cast Partial Framework - Mandibular	D5621	\$61	\$114
Mesial/Distal Wedge Procedure - Single Tooth	D4274	\$253	\$380	Repair Cast Partial Framework - Maxillary	D5622	\$61	\$114
Non-Autogenous Connective Tissue Graft - 1st Tooth (excl	D4275	\$350	\$522	Repair or Replace Broken Clasp - per tooth	D5630	\$49	\$110
implants)	D-12/13	Ψ330	Ψ322	Replace Broken Teeth - Per Tooth	D5640	\$49	\$65
Combined Connective Tissue/Double Pedicle Graft	D4276	\$469	\$704	Add Tooth to Existing Partial Denture	D5650	\$49	\$96
Free Soft Tissue Graft Procedure - 1st Tooth (excl implants)	D4277	\$196	\$891	Add Clasp to Existing Partial Denture - per tooth	D5660	\$49	\$104
Free Soft Tissue Graft Procedure - Each Addl Tooth (excl	D4278	\$196	\$891	Replace Teeth/Acrylic on Cast Metal Framework (Upper)	D5670	\$176	\$253
implants)				Replace Teeth/Acrylic on Cast Metal Framework (Lower)	D5671	\$176	\$253
Autogenous Connective Tissue Graft - Each Addl Tooth (excl	D4283	\$312	\$468	Rebase Complete Upper Denture	D5710	\$91	\$185
implants)				Rebase Complete Lower Denture	D5711	\$91	\$163
Non-Autogenous Connective Tissue Graft - Each Addl Tooth	D4285	\$231	\$347	Rebase Upper Partial Denture	D5720	\$91	\$196
(excl implants)	D 1220	Φ00	<b>#204</b>	Rebase Lower Partial Denture	D5721	\$91	\$196
Provisional Intracoronal Splint	D4320	\$99	\$304	Reline Complete Upper Denture (Chairside)	D5730	\$91	\$117
Provisional Extracoronal Splint	D4321	\$97	\$272	Reline Complete Lower Denture (Chairside)	D5731	\$91	\$125
Perio. Scaling & Root Planing - 4+ teeth/quad	D4341	\$90	\$161	Reline Upper Partial Denture (Chairside)	D5740	\$91	\$92
Perio. Scaling & Root Planing - 1 to 3 teeth/quad	D4342	\$44	\$86	Reline Lower Partial Denture (Chairside)	D5741	\$91	\$92
Scaling - Full Mouth - After Oral Evaluation	D4346	\$46	\$116	Reline Complete Upper Denture (Laboratory)	D5750	\$91	\$122
Full Mouth Debridement	D4355	\$50	\$117	Reline Complete Lower Denture (Laboratory)	D5751	\$91	\$122
Periodontal Maintenance Procedures	D4910	\$55	\$102	Reline Upper Partial Denture (Laboratory)	D5760		\$129
				Reline Lower Partial Denture (Laboratory)	D5761	\$91	\$129
Type III - Removable Prosthetics				Tissue Conditioning - Upper	D5850	\$22	\$33
Complete Denture - Upper	D5110	\$380	\$758	Tissue Conditioning - Copper Tissue Conditioning - Lower	D5851	\$21	\$33 \$32
Complete Denture - Lower	D5120	\$380	\$758	Tipode Conditioning Dower	D3031	Ψ21	Φ32
Immediate Denture - Upper	D5130	\$385	\$892	Type III - Implants			
Immediate Denture - Lower	D5140	\$385	\$892	1 pe m - mpano			

COVERED SERVICES	ADA CODE		NETWORK SPECIALIST DENTIST COPAY	COVERED SERVICES	ADA CODE		NETWORK SPECIALIST DENTIST COPAY
Surgical Placement of Implant Body - Endosteal	D6010	\$863	\$1,736	Retainer Onlay - Cast High Noble Metal - 2 Surfaces	D6610	\$301	\$465
Surgical Placement of Mini Implant	D6013	\$863	\$1,736	Retainer Onlay - Cast High Noble Metal - 3+ Surfaces	D6611	\$371	\$493
Prefabricated Abutment - includes modification & placement	D6056	\$233	\$331	Retainer Onlay - Cast Predom. Base Metal - 2 Surfaces	D6612	\$280	\$490
Crown - Abutment Supp. Porcelain/Ceramic	D6058	\$554	\$969	Retainer Onlay - Cast Predom. Base Metal - 3+ Surfaces	D6613	\$350	\$468
Crown - Abutment Supp. Porcelain Fused to High Noble Metal	D6059	\$546	\$956	Retainer Onlay - Cast Noble Metal - 2 Surfaces	D6614	\$294	\$451
Crown - Abutment Supp. Porcelain Fused to Predom. Base Metal	D6060	\$482	\$923	Retainer Onlay - Cast Noble Metal - 3+ Surfaces	D6615	\$377	\$440
Crown - Abutment Supp. Porcelain Fused to Noble Metal	D6061	\$515	\$930	Retainer Inlay - Titanium	D6624	\$258	\$412
Crown - Abutment Supp. Cast High Noble Metal	D6062	\$519	\$923	Retainer Onlay - Titanium	D6634	\$273	\$429
Crown - Abutment Supp. Cast Predominantly Base Metal	D6063	\$412	\$826	Retainer Crown - Resin With High Noble Metal	D6720	\$350	\$564
Crown - Abutment Supp. Cast Noble Metal	D6064	\$442	\$857	Retainer Crown - Resin With Base Metal	D6721	\$329	\$564
Crown - Implant Supp. Porcelain/Ceramic Crown	D6065	\$534	\$960	Retainer Crown - Resin With Noble Metal	D6722	\$336	\$558
Crown - Implant Supp. Porcelain Fused to Metal	D6066	\$521	\$935	Retainer Crown - Porcelain/Ceramic Substrate	D6740	\$375	\$543
Crown - Implant Supp. Metal	D6067	\$486	\$917	Retainer Crown - Porcelain With High Noble Metal	D6750	\$350	\$495
Re-cement or Re-bond Implant/Abutment Supported Crown	D6092	\$31	\$81	Retainer Crown - Porcelain With Predominantly Base Metal	D6751	\$299	\$442
Crown - Abutment Supp. Titanium	D6094	\$482	\$733	Retainer Crown - Porcelain With Noble Metal	D6752	\$350	\$497
Repair Implant Abutment - By Report	D6095	\$162	\$309	Retainer Crown - 3/4 Cast High Noble Metal	D6780	\$397	\$534
Remove Broken Implant Retaining Screw	D6096	\$35	\$35	Retainer Crown - 3/4 Cast Predominantly Base Metal	D6781	\$336	\$504
				Retainer Crown - 3/4 Cast Noble Metal	D6782	\$329	\$409
Type III - Pontics and Retainers				Retainer Crown - 3/4 Porcelain/Ceramic	D6783	\$336	\$485
Pontic - Cast High Noble Metal	D6210	\$357	\$451	Retainer Crown - Full Cast High Noble Metal	D6790	\$350	\$511
Pontic - Cast Predominantly Base Metal	D6211	\$336	\$487	Retainer Crown - Full Cast Predominantly Base Metal	D6791	\$343	\$566
Pontic - Cast Noble Metal	D6212	\$350	\$474	Retainer Crown - Full Cast Noble Metal	D6792	\$364	\$559
Pontic - Titanium	D6214	\$357	\$451	Retainer Crown - Titanium	D6794	\$360	\$493
Pontic - Porcelain Fused to High Noble Metal	D6240	\$360	\$449	Re-cement or Re-bond Fixed Partial Denture	D6930	\$14	\$24
Pontic - Porcelain Fused to Predominantly Base Metal	D6241	\$340	\$415	Stress Breaker	D6940	\$45	\$62
Pontic - Porcelain Fused to Noble Metal	D6242	\$350	\$451	Fixed Partial Denture Repair - by Report	D6980	\$91	\$137
Pontic - Porcelain/Ceramic	D6245	\$410	\$440				
Pontic - Resin with High Noble Metal	D6250	\$339	\$610	Type II - Oral Surgery			
Pontic - Resin with Predominantly Base Metal	D6251	\$309	\$566	Extraction - Coronal Remnants - Primary Tooth	D7111	\$30	\$70
Pontic - Resin with Noble Metal	D6252	\$360	\$561	Extraction - Erupted Tooth or Exposed Root	D7140	\$40	\$78
Retainer - Cast Metal or Resin Bonded Fixed Prosthesis	D6545	\$224	\$336	Extraction - Erupted Tooth	D7210	\$78	\$153
Retainer - Porcelain/Ceramic/Resin Bonded Fixed Prosthesis	D6548	\$210	\$315	Removal of Impacted Tooth - Soft Tissue	D7220	\$85	\$192
Retainer - Resin for Resin Bonded Fixed Prosthesis	D6549	\$220	\$330	Removal of Impacted Tooth - Partially Bony	D7230	\$100	\$245
Retainer Inlay - Porcelain/Ceramic - 2 Surfaces	D6600	\$307	\$426	Removal of Impacted Tooth - Completely Bony	D7240	\$145	\$322
Retainer Inlay - Porcelain/Ceramic - 3+ Surfaces	D6601	\$323	\$413	Removal of Residual Tooth Roots	D7250	\$51	\$144
Retainer Inlay - Cast High Noble Metal - 2 Surfaces	D6602	\$307	\$418	Coronectomy - Intentional Partial Tooth Removal	D7251	\$94	\$371
Retainer Inlay - Cast High Noble Metal - 3+ Surfaces	D6603	\$357	\$470	Oroantral Fistula Closure	D7260	\$115	\$1,211
Retainer Inlay - Cast Predom. Base Metal - 2 Surfaces	D6604	\$280	\$421	Tooth Reimplantation and/or Stabilization of Accidentally	D7270	\$210	\$324
Retainer Inlay - Cast Predom. Base Metal - 3+ Surfaces	D6605	\$323	\$458	Evulsed or Displaced Teeth/Alveolus			
Retainer Inlay - Cast Noble Metal - 2 Surfaces	D6606	\$316	\$416	Tooth Transplantation	D7272		\$748
Retainer Inlay - Cast Noble Metal - 3+ Surfaces	D6607	\$350	\$462	Exposure of an Unerupted Tooth	D7280	\$161	\$293
Retainer Onlay - Porcelain/Ceramic - 2 Surfaces	D6608	\$350	\$380	Incisional Biopsy of Oral Tissue - Hard (Bone - Tooth)	D7285	\$56	\$659
Retainer Onlay - Porcelain/Ceramic - 3+ Surfaces	D6609	\$364	\$410	Incisional Biopsy of Oral Tissue - Soft (All Others)	D7286	\$56	\$285

COVERED SERVICES	ADA CODE	NETWORK GENERAL	SPECIALIST	COVERED SERVICES	ADA CODE	NETWORK GENERAL	NETWORK SPECIALIST
		DENTIST COPAY	DENTIST COPAY			DENTIST COPAY	DENTIST COPAY
Alveoplasty in Conjunction w/Extract- 4+ Teeth/Per Quad	D7310	\$84	\$219	II - Therapeutic Drug Injection (Antibiotics)	D9610	\$43	\$65
Alveoplasty in Conjunction w/Extract- 1 to 3 Teeth/Per Quad	D7311	\$40	\$292	II - Treatment of Complications (Post Surgical)	D9930	\$14	\$21
Alveoplasty not in Conjunct w/Extract- 4+ Teeth/Per Quad	D7320	\$126	\$312	III - Occlusal Guard (for Bruxism)	D9940	\$78	\$135
Alveoplasty not in Conjunct w/Extract- 1 to 3 Teeth/Per Quad	D7321	\$56	\$463	III - Occlusal Adjustment - Limited	D9951	\$45	\$102
Vestibuloplasty-Ridge Ext (2nd Epithelialization)	D7340	\$167	\$1,613	III - Occlusal Adjustment - Complete	D9952	\$106	\$539
Vestibuloplasty-Ridge Ext (Grafts - Hypertissue)	D7350	\$253	\$5,124	* Covered only when performed in conjunction with covered oral			
Removal of Odontogenic Cyst/Tumor <=1.25cm	D7450	\$266	\$572	surgery.			
Removal of Odontogenic Cyst/Tumor > 1.25cm	D7451	\$301	\$911				
Removal of Nonodontogenic Cyst/Tumor<=1.25cm	D7460	\$287	\$593				
Removal of Nonodontogenic Cyst/Tumor> 1.25cm	D7461	\$336	\$952				
Removal of Lateral Exostosis - Per Site	D7471	\$88	\$658				
Removal of Torus Palantinus	D7472	\$224	\$784				
Removal of Torus Mandibularus	D7473	\$224	\$738				
Reduction of Osseous Tuberosity	D7485	\$224	\$653				
Incision/Drain of Abscess Intraoral Soft Tissue	D7510	\$52	\$192				
Incision/Drain of Abscess Extraoral Soft Tissue	D7520	\$113	\$895				
Removal of Foreign Body - Skin or Subc. Areolar Tissue	D7530	\$52	\$336				
Removal of Reaction Producing Foreign Bodies - Musculoskeletal System	D7540	\$113	\$320				
Sequestrectomy for Osteomyletis	D7550	\$52	\$291				
Maxillary Sinusotomy for Removal of Tooth Fragment or Foreign Body	D7560	\$545	\$3,343				
Suture of Recent Small Wounds up to 5cm	D7910	\$52	\$312				
Frenulectomy (Frenectomy or Frenotomy)	D7960	\$97	\$303				
Excision of Hyperplastic Tissue - Per Arch	D7970	\$93	\$395				
Excision of Pericoronal Gingiva	D7971	\$73	\$120				
Surgical Reduction of Fibrous Tuberosity	D7972	\$280	\$447				
Non-Surgical Sialolithotomy	D7979	\$305	\$925				
Surgical Sialolithotomy	D7980	\$246	\$836				
Closure of Salivary Fistula	D7983	\$725	\$2,185				
Type - Miscellaneous Services							
I - Palliative (Emergency) Treatment of Pain	D9110	\$16	\$48				
I - Evaluation for Deep Sedation/General Anesthesia	D9219	\$0	\$0				
III - Deep Sedation/General Ansethesia - First 15 Min*	D9222	\$56	\$165				
III - Deep Sedation/General Anesthesia - Each Additional 15 Min*	D9223	\$50	\$75				
III - Analgesia - Anxiolysis - Inhal Nitrous Oxide*	D9230	\$16	\$24				
III - Intravenous Moderate Sedation/Analgesia - First 15 Min*	D9239	\$47	\$141				
III - Intravenous Moderate Sedation/Analgesia - Each Additional 15 Min*		\$42	\$63				
III - Non-Intravenous Conscious Sedation*	D9248	\$59	\$62				
I - Consultation	D9310	\$0	\$122				
I - Office Visit for Observ During Regular Scheduled Hours	D9430	\$0	\$0				