

# SECURECARE DENTAL

## COPAY PLAN 141 - 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>							
Periodic Oral Evaluation	D0120	\$6	\$9	Sealant Repair - Per Tooth	D1353	\$14	\$27
Limited Oral Evaluation - Problem Focused	D0140	\$6	\$31	Space Maintainer - Fixed - Unilateral	D1510	\$100	\$183
Oral Evaluation - under 3 years old	D0145	\$6	\$44	Space Maintainer - Fixed - Bilateral	D1515	\$105	\$223
Comprehensive Oral Evaluation	D0150	\$6	\$27	Space Maintainer - Removable - Unilateral	D1520	\$77	\$159
Detailed and Extensive Oral Eval - Problem Focused	D0160	\$6	\$107	Space Maintainer - Removable - Bilateral	D1525	\$77	\$209
Re-evaluation - Limited - Problem Focused	D0170	\$6	\$8	Re-cement or Re-bond Space Maintainer	D1550	\$24	\$49
Re-evaluation Post-Operative Office Visit	D0171	\$0	\$0	Distal Shoe Space Maintainer - Fixed - Unilateral	D1575	\$125	\$214
Comprehensive Periodontal Evaluation	D0180	\$6	\$39	<b>Type II - Restorative Dentistry</b>			
Intraoral - Complete Series of Images	D0210	\$20	\$54	Amalgam - 1 Surface - Primary or Permanent	D2140	\$40	\$86
Intraoral - Periapical - 1st Image	D0220	\$6	\$12	Amalgam - 2 Surfaces - Primary or Permanent	D2150	\$40	\$106
Intraoral - Periapical - Each Additional Image	D0230	\$6	\$12	Amalgam - 3 Surfaces - Primary or Permanent	D2160	\$40	\$122
Intraoral - Occlusal Image	D0240	\$6	\$16	Amalgam - 4+ Surfaces - Primary or Permanent	D2161	\$45	\$144
Extraoral - 2D Image	D0250	\$6	\$14	Resin Composite - 1 Surface - Anterior	D2330	\$45	\$81
Extraoral - Posterior Image	D0251	\$19	\$26	Resin Composite - 2 Surfaces - Anterior	D2331	\$48	\$101
Bitewing - 1 Image	D0270	\$6	\$8	Resin Composite - 3 Surfaces - Anterior	D2332	\$58	\$126
Bitewing - 2 Images	D0272	\$6	\$13	Resin Composite - 4+ Surfaces - Anterior	D2335	\$73	\$141
Bitewing - 3 Images	D0273	\$6	\$17	Resin Composite Crown - Anterior	D2390	\$50	\$95
Bitewing - 4 Images	D0274	\$6	\$18	Resin Composite - 1 Surface - Posterior	D2391	\$49	\$99
Vertical Bitewings - 7 to 8 Images	D0277	\$6	\$22	Resin Composite - 2 Surfaces - Posterior	D2392	\$64	\$140
Panoramic Image	D0330	\$20	\$41	Resin Composite - 3 Surfaces - Posterior	D2393	\$71	\$152
Pulp Vitality Tests	D0460	\$0	\$0	Resin Composite - 4+ Surfaces - Posterior	D2394	\$71	\$172
Diagnostic Casts	D0470	\$20	\$53	<b>Type III - Onlays, Crowns and Bridges</b>			
<b>Type I - Preventive Services</b>							
Prophylaxis Cleaning - Adult	D1110	\$6	\$15	Inlay - Metallic - 1 Surface	D2510	\$201	\$315
Prophylaxis Cleaning - Child	D1120	\$6	\$9	Inlay - Metallic - 2 Surfaces	D2520	\$250	\$301
Fluoride - Topical Application of Fluoride Varnish	D1206	\$5	\$27	Inlay - Metallic - 3+ Surfaces	D2530	\$324	\$365
Fluoride - Topical Application Fluoride excl Varnish	D1208	\$5	\$14	Onlay - Metallic - 2 Surfaces	D2542	\$317	\$434
Sealant - Per Tooth	D1351	\$15	\$18	Onlay - Metallic - 3 Surfaces	D2543	\$333	\$363
Preventive Resin Restoration (Including Sealant)	D1352	\$19	\$44	Onlay - Metallic - 4+ Surfaces	D2544	\$333	\$500
				Inlay - Porcelain/Ceramic - 1 Surface	D2610	\$225	\$420

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Inlay - Porcelain/Ceramic - 2 Surfaces	D2620	\$324	\$416	Inlay Repair	D2981	\$62	\$232
Inlay - Porcelain/Ceramic - 3+ Surfaces	D2630	\$295	\$306	Onlay Repair	D2982	\$62	\$232
Onlay - Porcelain/Ceramic - 2 Surfaces	D2642	\$270	\$356	Veneer Repair	D2983	\$62	\$232
Onlay - Porcelain/Ceramic - 3 Surfaces	D2643	\$280	\$294				
Onlay - Porcelain/Ceramic - 4+ Surfaces	D2644	\$380	\$570	<b>Type III - Endodontics</b>			
Inlay - Resin Composite - 1 Surface	D2650	\$117	\$168	Pulp Cap - Direct (Excluding Final Restoration)	D3110	\$20	\$53
Inlay - Resin Composite - 2 Surfaces	D2651	\$163	\$210	Pulp Cap - Indirect (Excluding Final Restoration)	D3120	\$15	\$36
Inlay - Resin Composite - 3+ Surfaces	D2652	\$216	\$219	Therapeutic Pulpotomy (Excluding Final Restoration)	D3220	\$44	\$95
Onlay - Resin Composite - 2 Surfaces	D2662	\$209	\$314	Pulpal Debridement - Primary/Permanent	D3221	\$46	\$115
Onlay - Resin Composite - 3 Surfaces	D2663	\$271	\$407	Partial Pulpotomy for Apexogenesis	D3222	\$60	\$102
Onlay - Resin Composite - 4+ Surfaces	D2664	\$306	\$360	Pulpal Therapy Anterior - Primary	D3230	\$62	\$100
Crown - Resin Based Composite - Indirect	D2710	\$147	\$221	Pulpal Therapy Posterior - Primary	D3240	\$55	\$112
Crown - ¾ Resin Based Composite - Indirect	D2712	\$170	\$243	Root Canal - Anterior (Excluding Final Restoration)	D3310	\$175	\$258
Crown - Resin with High Noble Metal	D2720	\$410	\$615	Root Canal - Premolar (Excluding Final Restoration)	D3320	\$240	\$388
Crown - Resin with Base Metal	D2721	\$395	\$593	Root Canal - Molar (Excluding Final Restoration)	D3330	\$380	\$563
Crown - Resin with Noble Metal	D2722	\$402	\$603	Treatment of Root Canal Obstruction - non surgical	D3331	\$139	\$209
Crown - Porcelain/Ceramic	D2740	\$380	\$570	Incomplete Endodontic Therapy - Inoperable/Fractured	D3332	\$185	\$336
Crown - Porcelain with High Noble Metal	D2750	\$380	\$570	Internal Root Repair of Perforation Defects	D3333	\$178	\$181
Crown - Porcelain with Predominantly Base Metal	D2751	\$350	\$525	Retreatment of Previous RCT - Anterior	D3346	\$324	\$669
Crown - Porcelain with Noble Metal	D2752	\$360	\$540	Retreatment of Previous RCT - Premolar	D3347	\$441	\$776
Crown - ¾ Cast High Noble Metal	D2780	\$370	\$380	Retreatment of Previous RCT - Molar	D3348	\$310	\$647
Crown - ¾ Cast Predominantly Base Metal	D2781	\$371	\$557	Apexification/Recalcification - Initial Visit	D3351	\$46	\$239
Crown - ¾ Cast Noble Metal	D2782	\$379	\$569	Apexification/Recalcification - Interim Visit	D3352	\$46	\$69
Crown - ¾ Porcelain/Ceramic	D2783	\$371	\$371	Apexification/Recalcification - Final Visit	D3353	\$46	\$383
Crown - Full Cast High Noble Metal	D2790	\$360	\$410	Apicoectomy - Anterior	D3410	\$225	\$520
Crown - Full Cast Predominantly Base Metal	D2791	\$360	\$442	Apicoectomy - Premolar - 1st Root	D3421	\$206	\$480
Crown - Full Cast Noble Metal	D2792	\$360	\$401	Apicoectomy - Molar - 1st Root	D3425	\$345	\$608
Crown - Titanium	D2794	\$360	\$540	Apicoectomy - Each Additional Root	D3426	\$46	\$69
Re-cement/Re-bond Inlay/Onlay/Partial Restoration	D2910	\$18	\$27	Retrograde Filling - Per Root	D3430	\$46	\$135
Re-cement/Re-bond Crown	D2920	\$30	\$45	Root Amputation - Per Root	D3450	\$104	\$246
Prefabricated Porcelain/Ceramic Crown - Primary	D2929	\$177	\$232	Hemisection (Including any Root Removal)	D3920	\$104	\$245
Prefabricated Stainless Steel Crown - Primary	D2930	\$98	\$106	Canal Preparation/Post Fitting	D3950	\$0	\$0
Prefabricated Stainless Steel Crown - Permanent	D2931	\$65	\$103				
Prefabricated Resin Crown	D2932	\$88	\$148	<b>Type III - Periodontics</b>			
Protective Restoration	D2940	\$8	\$12	Gingivectomy/Gingivoplasty - 4+ teeth/quad	D4210	\$225	\$546
Core Build Up - Including any Pins when required	D2950	\$93	\$128	Gingivectomy/Gingivoplasty - 1 to 3 teeth/quad	D4211	\$62	\$215
Pin Retention - Per Tooth - in Addition to Restoration	D2951	\$15	\$23	Gingivectomy/Gingivoplasty for restorative procedure	D4212	\$39	\$215
Cast Post and Core - in Addition to Crown	D2952	\$129	\$188	Gingival Flap-Incl. Root Planing - 4+ teeth/quad	D4240	\$286	\$501
Cast Post and Core - Each Additional - same tooth	D2953	\$88	\$132	Gingival Flap-Incl. Root Planing - 1 to 3 teeth/quad	D4241	\$185	\$261
Prefabricated Post and Core - in Addition to Crown	D2954	\$102	\$131	Crown Lengthening - Hard Tissue	D4249	\$310	\$617
Post Removal	D2955	\$0	\$0	Osseous Surgery - 4+ teeth/quad	D4260	\$380	\$815
Each Additional Prefabricated Post - same tooth	D2957	\$39	\$59	Osseous Surgery - 1-3 teeth/quad	D4261	\$210	\$385
Labial Veneer (resin laminate) - Chairside	D2960	\$201	\$375	Pedicle Soft Tissue Graft Procedure	D4270	\$101	\$706
Labial Veneer (resin laminate) - Laboratory	D2961	\$348	\$394	Autogenous Connective Tissue Graft - 1st Tooth (excl implants)	D4273	\$375	\$783
Labial Veneer (porcelain laminate) - Laboratory	D2962	\$310	\$331	Mesial/Distal Wedge Procedure - Single Tooth	D4274	\$278	\$417
Crown Repair	D2980	\$62	\$232				

COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY	COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY
Non-Autogenous Connective Tissue Graft - 1st Tooth (excl implants)	D4275	\$386	\$579	Add Clasp to Existing Partial Denture - per tooth	D5660	\$55	\$58
Combined Connective Tissue/Double Pedicle Graft	D4276	\$518	\$777	Replace Teeth/Acrylic on Cast Metal Framework (Upper)	D5670	\$194	\$291
Free Soft Tissue Graft Procedure - 1st Tooth (excl implants)	D4277	\$216	\$645	Replace Teeth/Acrylic on Cast Metal Framework (Lower)	D5671	\$194	\$291
Free Soft Tissue Graft Procedure - Each Addl Tooth (excl implants)	D4278	\$216	\$645	Rebase Complete Upper Denture	D5710	\$101	\$152
Autogenous Connective Tissue Graft - Each Addl Tooth (excl implants)	D4283	\$394	\$831	Rebase Complete Lower Denture	D5711	\$101	\$152
Non-Autogenous Connective Tissue Graft - Each Addl Tooth (excl implants)	D4285	\$281	\$593	Rebase Upper Partial Denture	D5720	\$101	\$152
Provisional Intracoronaral Splint	D4320	\$110	\$257	Rebase Lower Partial Denture	D5721	\$101	\$152
Provisional Extracoronaral Splint	D4321	\$108	\$233	Reline Complete Upper Denture (Chairside)	D5730	\$101	\$152
Perio. Scaling & Root Planing - 4+ teeth/quad	D4341	\$86	\$134	Reline Complete Lower Denture (Chairside)	D5731	\$101	\$152
Perio. Scaling & Root Planing - 1 to 3 teeth/quad	D4342	\$47	\$68	Reline Upper Partial Denture (Chairside)	D5740	\$101	\$152
Scaling - Full Mouth - After Oral Evaluation	D4346	\$49	\$107	Reline Lower Partial Denture (Chairside)	D5741	\$101	\$152
Full Mouth Debridement	D4355	\$50	\$109	Reline Complete Upper Denture (Laboratory)	D5750	\$101	\$152
Periodontal Maintenance Procedures	D4910	\$54	\$84	Reline Complete Lower Denture (Laboratory)	D5751	\$101	\$152
				Reline Upper Partial Denture (Laboratory)	D5760	\$101	\$152
				Reline Lower Partial Denture (Laboratory)	D5761	\$101	\$152
				Tissue Conditioning - Upper	D5850	\$25	\$38
				Tissue Conditioning - Lower	D5851	\$24	\$36
<b>Type III - Removable Prosthetics</b>				<b>Type III - Implants</b>			
Complete Denture - Upper	D5110	\$375	\$490	Surgical Placement of Implant Body - Endosteal	D6010	\$1,015	\$1,456
Complete Denture - Lower	D5120	\$375	\$475	Surgical Placement of Mini Implant	D6013	\$1,015	\$1,456
Immediate Denture - Upper	D5130	\$375	\$555	Prefabricated Abutment - includes modification & placement	D6056	\$273	\$410
Immediate Denture - Lower	D5140	\$375	\$555	Crown - Abutment Supp. Porcelain/Ceramic	D6058	\$655	\$803
Upper Partial Denture - Resin Base	D5211	\$324	\$662	Crown - Abutment Supp. Porcelain Fused to High Noble Metal	D6059	\$639	\$796
Lower Partial Denture - Resin Base	D5212	\$324	\$806	Crown - Abutment Supp. Porcelain Fused to Predom. Base Metal	D6060	\$564	\$772
Upper Partial - Cast Metal Frame - Resin Base	D5213	\$415	\$630	Crown - Abutment Supp. Porcelain Fused to Noble Metal	D6061	\$603	\$775
Lower Partial - Cast Metal Frame - Resin Base	D5214	\$415	\$630	Crown - Abutment Supp. Cast High Noble Metal	D6062	\$607	\$769
Upper Immediate Partial Denture - Resin Base	D5221	\$569	\$763	Crown - Abutment Supp. Cast Predominantly Base Metal	D6063	\$481	\$692
Lower Immediate Partial Denture - Resin Base	D5222	\$569	\$763	Crown - Abutment Supp. Cast Noble Metal	D6064	\$517	\$717
Upper Immediate Partial Denture - Cast Metal with Resin	D5223	\$765	\$1,019	Crown - Implant Supp. Porcelain/Ceramic Crown	D6065	\$625	\$801
Lower Immediate Partial Denture - Cast Metal with Resin	D5224	\$765	\$1,019	Crown - Implant Supp. Porcelain Fused to Metal	D6066	\$609	\$779
Removable Unilateral Partial - 1 Piece Cast Metal	D5281	\$263	\$347	Crown - Implant Supp. Metal	D6067	\$568	\$767
Adjust Complete Denture - Upper	D5410	\$24	\$36	Re-cement or Re-bond Implant/Abutment Supported Crown	D6092	\$37	\$69
Adjust Complete Denture - Lower	D5411	\$24	\$36	Crown - Abutment Supp. Titanium	D6094	\$564	\$604
Adjust Partial Denture - Upper	D5421	\$24	\$36	Repair Implant Abutment - By Report	D6095	\$190	\$254
Adjust Partial Denture - Lower	D5422	\$24	\$36	Remove Broken Implant Retaining Screw	D6096	\$35	\$35
Repair Broken Complete Denture Base - Mandibular	D5511	\$59	\$97				
Repair Broken Complete Denture Base - Maxillary	D5512	\$59	\$97	<b>Type III - Pontics and Retainers</b>			
Replace Missing or Broken Teeth - Complete Denture - Per Tooth	D5520	\$46	\$69	Pontic - Cast High Noble Metal	D6210	\$395	\$593
Repair Resin Partial Denture Base - Mandibular	D5611	\$49	\$90	Pontic - Cast Predominantly Base Metal	D6211	\$371	\$557
Repair Resin Partial Denture Base - Maxillary	D5612	\$49	\$90	Pontic - Cast Noble Metal	D6212	\$386	\$579
Repair Cast Partial Framework - Mandibular	D5621	\$58	\$78	Pontic - Titanium	D6214	\$395	\$593
Repair Cast Partial Framework - Maxillary	D5622	\$58	\$78	Pontic - Porcelain Fused to High Noble Metal	D6240	\$320	\$480
Repair or Replace Broken Clasp - per tooth	D5630	\$55	\$72	Pontic - Porcelain Fused to Predominantly Base Metal	D6241	\$320	\$480
Replace Broken Teeth - Per Tooth	D5640	\$55	\$83	Pontic - Porcelain Fused to Noble Metal	D6242	\$320	\$480
Add Tooth to Existing Partial Denture	D5650	\$55	\$63	Pontic - Porcelain/Ceramic	D6245	\$452	\$678

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Pontic - Resin with High Noble Metal	D6250	\$396	\$613	Extraction - Erupted Tooth	D7210	\$85	\$127
Pontic - Resin with Predominantly Base Metal	D6251	\$361	\$567	Removal of Impacted Tooth - Soft Tissue	D7220	\$92	\$157
Pontic - Resin with Noble Metal	D6252	\$422	\$562	Removal of Impacted Tooth - Partially Bony	D7230	\$108	\$197
Retainer - Cast Metal or Resin Bonded Fixed Prosthesis	D6545	\$247	\$371	Removal of Impacted Tooth - Completely Bony	D7240	\$154	\$258
Retainer - Porcelain/Ceramic/Resin Bonded Fixed Prosthesis	D6548	\$232	\$348	Removal of Residual Tooth Roots	D7250	\$73	\$120
Retainer - Resin for Resin Bonded Fixed Prosthesis	D6549	\$218	\$327	Coronectomy - Intentional Partial Tooth Removal	D7251	\$114	\$336
Retainer Inlay - Porcelain/Ceramic - 2 Surfaces	D6600	\$340	\$510	Oroantral Fistula Closure	D7260	\$139	\$1,211
Retainer Inlay - Porcelain/Ceramic - 3+ Surfaces	D6601	\$355	\$533	Tooth Reimplantation and/or Stabilization of Accidentally Evulsed or Displaced Teeth/Alveolus	D7270	\$232	\$235
Retainer Inlay - Cast High Noble Metal - 2 Surfaces	D6602	\$340	\$510	Tooth Transplantation	D7272	\$232	\$724
Retainer Inlay - Cast High Noble Metal - 3+ Surfaces	D6603	\$395	\$593	Exposure of an Unerupted Tooth	D7280	\$178	\$224
Retainer Inlay - Cast Predom. Base Metal - 2 Surfaces	D6604	\$309	\$312	Incisional Biopsy of Oral Tissue - Hard (Bone - Tooth)	D7285	\$62	\$584
Retainer Inlay - Cast Predom. Base Metal - 3+ Surfaces	D6605	\$355	\$533	Incisional Biopsy of Oral Tissue - Soft (All Others)	D7286	\$62	\$242
Retainer Inlay - Cast Noble Metal - 2 Surfaces	D6606	\$348	\$522	Alveoplasty in Conjunction w/Extract- 4+ Teeth/Per Quad	D7310	\$93	\$187
Retainer Inlay - Cast Noble Metal - 3+ Surfaces	D6607	\$386	\$579	Alveoplasty in Conjunction w/Extract- 1 to 3 Teeth/Per Quad	D7311	\$48	\$265
Retainer Onlay - Porcelain/Ceramic - 2 Surfaces	D6608	\$386	\$579	Alveoplasty not in Conjunct w/Extract- 4+ Teeth/Per Quad	D7320	\$139	\$266
Retainer Onlay - Porcelain/Ceramic - 3+ Surfaces	D6609	\$402	\$603	Alveoplasty not in Conjunct w/Extract- 1 to 3 Teeth/Per Quad	D7321	\$68	\$347
Retainer Onlay - Cast High Noble Metal - 2 Surfaces	D6610	\$333	\$343	Vestibuloplasty-Ridge Ext (2nd Epithelialization)	D7340	\$185	\$1,417
Retainer Onlay - Cast High Noble Metal - 3+ Surfaces	D6611	\$410	\$615	Vestibuloplasty-Ridge Ext (Grafts - Hypertissue)	D7350	\$278	\$4,580
Retainer Onlay - Cast Predom. Base Metal - 2 Surfaces	D6612	\$309	\$379	Removal of Odontogenic Cyst/Tumor <=1.25cm	D7450	\$293	\$411
Retainer Onlay - Cast Predom. Base Metal - 3+ Surfaces	D6613	\$386	\$579	Removal of Odontogenic Cyst/Tumor > 1.25cm	D7451	\$178	\$539
Retainer Onlay - Cast Noble Metal - 2 Surfaces	D6614	\$324	\$331	Removal of Nonodontogenic Cyst/Tumor<=1.25cm	D7460	\$317	\$435
Retainer Onlay - Cast Noble Metal - 3+ Surfaces	D6615	\$417	\$626	Removal of Nonodontogenic Cyst/Tumor> 1.25cm	D7461	\$371	\$728
Retainer Inlay - Titanium	D6624	\$303	\$418	Removal of Lateral Exostosis - Per Site	D7471	\$97	\$562
Retainer Onlay - Titanium	D6634	\$321	\$436	Removal of Torus Palatinus	D7472	\$247	\$641
Retainer Crown - Resin With High Noble Metal	D6720	\$386	\$420	Removal of Torus Mandibularis	D7473	\$247	\$598
Retainer Crown - Resin With Base Metal	D6721	\$364	\$442	Reduction of Osseous Tuberosity	D7485	\$247	\$521
Retainer Crown - Resin With Noble Metal	D6722	\$371	\$425	Incision/Drain of Abscess Intraoral Soft Tissue	D7510	\$58	\$159
Retainer Crown - Porcelain/Ceramic Substrate	D6740	\$385	\$404	Incision/Drain of Abscess Extraoral Soft Tissue	D7520	\$124	\$761
Retainer Crown - Porcelain With High Noble Metal	D6750	\$318	\$329	Removal of Foreign Body - Skin or Subc. Areolar Tissue	D7530	\$58	\$290
Retainer Crown - Porcelain With Predominantly Base Metal	D6751	\$298	\$300	Removal of Reaction Producing Foreign Bodies - Musculoskeletal System	D7540	\$124	\$235
Retainer Crown - Porcelain With Noble Metal	D6752	\$318	\$318	Sequestrectomy for Osteomyelitis	D7550	\$58	\$276
Retainer Crown - ¾ Cast High Noble Metal	D6780	\$437	\$656	Maxillary Sinusotomy for Removal of Tooth Fragment or Foreign Body	D7560	\$661	\$3,026
Retainer Crown - ¾ Cast Predominantly Base Metal	D6781	\$371	\$557	Suture of Recent Small Wounds up to 5cm	D7910	\$58	\$275
Retainer Crown - ¾ Cast Noble Metal	D6782	\$364	\$546	Frenulectomy (Frenectomy or Frenotomy)	D7960	\$108	\$296
Retainer Crown - ¾ Porcelain/Ceramic	D6783	\$371	\$371	Excision of Hyperplastic Tissue - Per Arch	D7970	\$104	\$332
Retainer Crown - Full Cast High Noble Metal	D6790	\$386	\$579	Excision of Pericoronal Gingiva	D7971	\$81	\$122
Retainer Crown - Full Cast Predominantly Base Metal	D6791	\$379	\$443	Surgical Reduction of Fibrous Tuberosity	D7972	\$309	\$464
Retainer Crown - Full Cast Noble Metal	D6792	\$402	\$422	Non-Surgical Sialolithotomy	D7979	\$287	\$819
Retainer Crown - Titanium	D6794	\$360	\$540	Surgical Sialolithotomy	D7980	\$271	\$810
Re-cement or Re-bond Fixed Partial Denture	D6930	\$15	\$23	Closure of Salivary Fistula	D7983	\$878	\$1,937
Stress Breaker	D6940	\$51	\$77				
Fixed Partial Denture Repair - by Report	D6980	\$101	\$152				
<b>Type II - Oral Surgery</b>				<b>Type - Miscellaneous Services</b>			
Extraction - Coronal Remnants - Primary Tooth	D7111	\$39	\$47	I - Palliative (Emergency) Treatment of Pain	D9110	\$18	\$34
Extraction - Erupted Tooth or Exposed Root	D7140	\$57	\$83				

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I - Evaluation for Deep Sedation/General Anesthesia	D9219	\$0	\$0				
III - Deep Sedation/General Anesthesia - First 15 Min*	D9222	\$53	\$190				
III - Deep Sedation/General Anesthesia - Each Additional 15 Min*	D9223	\$50	\$139				
III - Analgesia - Anxiolysis - Inhal Nitrous Oxide*	D9230	\$18	\$22				
III - Intravenous Moderate Sedation/Analgesia - First 15 Min*	D9239	\$42	\$161				
III - Intravenous Moderate Sedation/Analgesia - Each Additional 15 Min*	D9243	\$40	\$112				
III - Non-Intravenous Conscious Sedation*	D9248	\$65	\$98				
I - Consultation	D9310	\$0	\$108				
I - Office Visit for Observ During Regular Scheduled Hours	D9430	\$0	\$0				
II - Therapeutic Drug Injection (Antibiotics)	D9610	\$46	\$69				
II - Treatment of Complications (Post Surgical)	D9930	\$15	\$23				
III - Occlusal Guard (for Bruxism)	D9940	\$90	\$124				
III - Occlusal Adjustment - Limited	D9951	\$49	\$92				
III - Occlusal Adjustment - Complete	D9952	\$117	\$504				
* Covered only when performed in conjunction with covered oral surgery.	D9999						