

# SECURECARE DENTAL

## COPAY PLAN 150 - SCHEDULE OF DENTIST COPAYMENTS

### GENERAL INFORMATION

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

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

### GENERAL DENTIST

The Copay Plan is a fee-for-service dental plan designed with convenient copays. If the treating dentist is a General Dentist, the patient is responsible for the General Dentist Copay(s) for services rendered. **SecureCare Dental** will compensate you the remainder up to the maximum allowable in the SPDO Fee Schedule.

### SPECIALIST DENTIST

The Copay Plan is a fee-for-service dental plan designed with convenient copays. If the treating dentist is a Specialist, including Pediatric, the patient is responsible for the Specialist Dentist Copay(s) for services rendered. **SecureCare Dental** will compensate you the remainder up to the maximum allowable in the SPDO Fee Schedule.

COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY	COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY
<b>Type I - Diagnostic/Evaluation Services</b>				<b>Type II - Restorative Dentistry</b>			
Periodic Oral Evaluation	D0120	\$0	\$10	Sealant Repair - Per Tooth	D1353	\$16	\$36
Limited Oral Evaluation - Problem Focused	D0140	\$0	\$32	Space Maintainer - Fixed - Unilateral	D1510	\$100	\$210
Oral Evaluation - under 3 years old	D0145	\$0	\$45	Space Maintainer - Fixed - Bilateral	D1515	\$105	\$227
Comprehensive Oral Evaluation	D0150	\$0	\$31	Space Maintainer - Removable - Unilateral	D1520	\$76	\$200
Detailed and Extensive Oral Eval - Problem Focused	D0160	\$0	\$110	Space Maintainer - Removable - Bilateral	D1525	\$76	\$262
Re-evaluation - Limited - Problem Focused	D0170	\$0	\$8	Re-cement or Re-bond Space Maintainer	D1550	\$23	\$53
Re-evaluation Post-Operative Office Visit	D0171	\$0	\$0	Distal Shoe Space Maintainer - Fixed - Unilateral	D1575	\$96	\$200
Comprehensive Periodontal Evaluation	D0180	\$0	\$39	<b>Type III - Onlays, Crowns and Bridges</b>			
Intraoral - Complete Series of Images	D0210	\$10	\$56	Inlay - Metallic - 1 Surface	D2510	\$197	\$375
Intraoral - Periapical - 1st Image	D0220	\$5	\$15	Inlay - Metallic - 2 Surfaces	D2520	\$250	\$433
Intraoral - Periapical - Each Additional Image	D0230	\$5	\$12	Inlay - Metallic - 3+ Surfaces	D2530	\$319	\$493
Intraoral - Occlusal Image	D0240	\$5	\$21	Onlay - Metallic - 2 Surfaces	D2542	\$312	\$537
Extraoral - 2D Image	D0250	\$5	\$19	Onlay - Metallic - 3 Surfaces	D2543	\$327	\$466
Extraoral - Posterior Image	D0251	\$12	\$18	Onlay - Metallic - 4+ Surfaces	D2544	\$327	\$328
Bitewing - 1 Image	D0270	\$5	\$12	Inlay - Porcelain/Ceramic - 1 Surface	D2610	\$221	\$485
Bitewing - 2 Images	D0272	\$5	\$19				
Bitewing - 3 Images	D0273	\$5	\$22				
Bitewing - 4 Images	D0274	\$5	\$26				
Vertical Bitewings - 7 to 8 Images	D0277	\$5	\$29				
Panoramic Image	D0330	\$10	\$48				
Pulp Vitality Tests	D0460	\$0	\$0				
Diagnostic Casts	D0470	\$10	\$78				
<b>Type I - Preventive Services</b>							
Prophylaxis Cleaning - Adult	D1110	\$0	\$7				
Prophylaxis Cleaning - Child	D1120	\$0	\$7				
Fluoride - Topical Application of Fluoride Varnish	D1206	\$0	\$26				
Fluoride - Topical Application Fluoride excl Varnish	D1208	\$0	\$19				
Sealant - Per Tooth	D1351	\$15	\$25				
Preventive Resin Restoration (Including Sealant)	D1352	\$17	\$45				

COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY	COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY
Inlay - Porcelain/Ceramic - 2 Surfaces	D2620	\$319	\$511	Inlay Repair	D2981	\$61	\$92
Inlay - Porcelain/Ceramic - 3+ Surfaces	D2630	\$295	\$455	Onlay Repair	D2982	\$61	\$92
Onlay - Porcelain/Ceramic - 2 Surfaces	D2642	\$270	\$481	Veneer Repair	D2983	\$61	\$92
Onlay - Porcelain/Ceramic - 3 Surfaces	D2643	\$280	\$452				
Onlay - Porcelain/Ceramic - 4+ Surfaces	D2644	\$380	\$392	<b>Type III - Endodontics</b>			
Inlay - Resin Composite - 1 Surface	D2650	\$115	\$217	Pulp Cap - Direct (Excluding Final Restoration)	D3110	\$19	\$55
Inlay - Resin Composite - 2 Surfaces	D2651	\$160	\$277	Pulp Cap - Indirect (Excluding Final Restoration)	D3120	\$15	\$39
Inlay - Resin Composite - 3+ Surfaces	D2652	\$212	\$300	Therapeutic Pulpotomy (Excluding Final Restoration)	D3220	\$44	\$93
Onlay - Resin Composite - 2 Surfaces	D2662	\$206	\$239	Pulpal Debridement - Primary/Permanent	D3221	\$46	\$128
Onlay - Resin Composite - 3 Surfaces	D2663	\$266	\$339	Partial Pulpotomy for Apexogenesis	D3222	\$46	\$104
Onlay - Resin Composite - 4+ Surfaces	D2664	\$326	\$391	Pulpal Therapy Anterior - Primary	D3230	\$61	\$117
Crown - Resin Based Composite - Indirect	D2710	\$145	\$218	Pulpal Therapy Posterior - Primary	D3240	\$54	\$127
Crown - ¾ Resin Based Composite - Indirect	D2712	\$135	\$240	Root Canal - Anterior (Excluding Final Restoration)	D3310	\$175	\$313
Crown - Resin with High Noble Metal	D2720	\$403	\$515	Root Canal - Premolar (Excluding Final Restoration)	D3320	\$240	\$418
Crown - Resin with Base Metal	D2721	\$389	\$518	Root Canal - Molar (Excluding Final Restoration)	D3330	\$380	\$659
Crown - Resin with Noble Metal	D2722	\$395	\$530	Treatment of Root Canal Obstruction - non surgical	D3331	\$137	\$163
Crown - Porcelain/Ceramic	D2740	\$380	\$461	Incomplete Endodontic Therapy - Inoperable/Fractured	D3332	\$182	\$385
Crown - Porcelain with High Noble Metal	D2750	\$380	\$455	Internal Root Repair of Perforation Defects	D3333	\$175	\$210
Crown - Porcelain with Predominantly Base Metal	D2751	\$350	\$426	Retreatment of Previous RCT - Anterior	D3346	\$319	\$733
Crown - Porcelain With Noble Metal	D2752	\$360	\$439	Retreatment of Previous RCT - Premolar	D3347	\$433	\$865
Crown - ¾ Cast High Noble Metal	D2780	\$370	\$504	Retreatment of Previous RCT - Molar	D3348	\$310	\$907
Crown - ¾ Cast Predominantly Base Metal	D2781	\$364	\$435	Apexification/Recalcification - Initial Visit	D3351	\$46	\$259
Crown - ¾ Cast Noble Metal	D2782	\$373	\$436	Apexification/Recalcification - Interim Visit	D3352	\$46	\$92
Crown - ¾ Porcelain/Ceramic	D2783	\$364	\$513	Apexification/Recalcification - Final Visit	D3353	\$46	\$399
Crown - Full Cast High Noble Metal	D2790	\$360	\$493	Apicoectomy - Anterior	D3410	\$221	\$574
Crown - Full Cast Predominantly Base Metal	D2791	\$360	\$483	Apicoectomy - Premolar - 1st Root	D3421	\$203	\$552
Crown - Full Cast Noble Metal	D2792	\$360	\$501	Apicoectomy - Molar - 1st Root	D3425	\$345	\$734
Crown - Titanium	D2794	\$360	\$493	Apicoectomy - Each Additional Root	D3426	\$46	\$88
Re-cement/Re-bond Inlay/Onlay/Partial Restoration	D2910	\$18	\$27	Retrograde Filling - Per Root	D3430	\$46	\$152
Re-cement/Re-bond Crown	D2920	\$47	\$71	Root Amputation - Per Root	D3450	\$102	\$289
Prefabricated Porcelain/Ceramic Crown - Primary	D2929	\$142	\$241	Hemisection (Including any Root Removal)	D3920	\$102	\$271
Prefabricated Stainless Steel Crown - Primary	D2930	\$98	\$172	Canal Preparation/Post Fitting	D3950	\$0	\$0
Prefabricated Stainless Steel Crown - Permanent	D2931	\$63	\$140				
Prefabricated Resin Crown	D2932	\$87	\$184	<b>Type III - Periodontics</b>			
Protective Restoration	D2940	\$8	\$12	Gingivectomy/Gingivoplasty - 4+ teeth/quad	D4210	\$221	\$717
Core Build Up - Including any Pins when required	D2950	\$93	\$142	Gingivectomy/Gingivoplasty - 1 to 3 teeth/quad	D4211	\$61	\$283
Pin Retention - Per Tooth - in Addition to Restoration	D2951	\$15	\$23	Gingivectomy/Gingivoplasty for restorative procedure	D4212	\$35	\$283
Cast Post and Core - in Addition to Crown	D2952	\$129	\$224	Gingival Flap-Incl. Root Planing - 4+ teeth/quad	D4240	\$281	\$740
Cast Post and Core - Each Additional - same tooth	D2953	\$87	\$89	Gingival Flap-Incl. Root Planing - 1 to 3 teeth/quad	D4241	\$182	\$391
Prefabricated Post and Core - in Addition to Crown	D2954	\$102	\$172	Crown Lengthening - Hard Tissue	D4249	\$310	\$780
Post Removal	D2955	\$0	\$0	Osseous Surgery - 4+ teeth/quad	D4260	\$380	\$1,237
Each Additional Prefabricated Post - same tooth	D2957	\$39	\$59	Osseous Surgery - 1-3 teeth/quad	D4261	\$210	\$516
Labial Veneer (resin laminate) - Chairside	D2960	\$197	\$444	Pedicle Soft Tissue Graft Procedure	D4270	\$99	\$916
Labial Veneer (resin laminate) - Laboratory	D2961	\$342	\$512	Autogenous Connective Tissue Graft - 1st Tooth (excl implants)	D4273	\$375	\$1,026
Labial Veneer (porcelain laminate) - Laboratory	D2962	\$310	\$457	Mesial/Distal Wedge Procedure - Single Tooth	D4274	\$273	\$410
Crown Repair	D2980	\$61	\$92				

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Non-Autogenous Connective Tissue Graft - 1st Tooth (excl implants)	D4275	\$379	\$551	Add Clasp to Existing Partial Denture - per tooth	D5660	\$54	\$109
Combined Connective Tissue/Double Pedicle Graft	D4276	\$509	\$764	Replace Teeth/Acrylic on Cast Metal Framework (Upper)	D5670	\$190	\$267
Free Soft Tissue Graft Procedure - 1st Tooth (excl implants)	D4277	\$212	\$907	Replace Teeth/Acrylic on Cast Metal Framework (Lower)	D5671	\$190	\$267
Free Soft Tissue Graft Procedure - Each Addl Tooth (excl implants)	D4278	\$212	\$907	Rebase Complete Upper Denture	D5710	\$99	\$193
Autogenous Connective Tissue Graft - Each Addl Tooth (excl implants)	D4283	\$310	\$465	Rebase Complete Lower Denture	D5711	\$99	\$171
Non-Autogenous Connective Tissue Graft - Each Addl Tooth (excl implants)	D4285	\$229	\$344	Rebase Upper Partial Denture	D5720	\$99	\$204
Provisional Intracoronal Splint	D4320	\$108	\$313	Rebase Lower Partial Denture	D5721	\$99	\$204
Provisional Extracoronal Splint	D4321	\$106	\$281	Reline Complete Upper Denture (Chairside)	D5730	\$99	\$125
Perio. Scaling & Root Planing - 4+ teeth/quad	D4341	\$86	\$157	Reline Complete Lower Denture (Chairside)	D5731	\$99	\$133
Perio. Scaling & Root Planing - 1 to 3 teeth/quad	D4342	\$47	\$89	Reline Upper Partial Denture (Chairside)	D5740	\$99	\$100
Scaling - Full Mouth - After Oral Evaluation	D4346	\$44	\$114	Reline Lower Partial Denture (Chairside)	D5741	\$99	\$100
Full Mouth Debridement	D4355	\$50	\$117	Reline Complete Upper Denture (Laboratory)	D5750	\$99	\$130
Periodontal Maintenance Procedures	D4910	\$54	\$101	Reline Complete Lower Denture (Laboratory)	D5751	\$99	\$130
				Reline Upper Partial Denture (Laboratory)	D5760	\$99	\$137
				Reline Lower Partial Denture (Laboratory)	D5761	\$99	\$137
				Tissue Conditioning - Upper	D5850	\$25	\$38
				Tissue Conditioning - Lower	D5851	\$23	\$35
<b>Type III - Removable Prosthetics</b>				<b>Type III - Implants</b>			
Complete Denture - Upper	D5110	\$375	\$753	Surgical Placement of Implant Body - Endosteal	D6010	\$848	\$1,716
Complete Denture - Lower	D5120	\$360	\$738	Surgical Placement of Mini Implant	D6013	\$848	\$1,716
Immediate Denture - Upper	D5130	\$375	\$882	Prefabricated Abutment - includes modification & placement	D6056	\$228	\$326
Immediate Denture - Lower	D5140	\$375	\$882	Crown - Abutment Supp. Porcelain/Ceramic	D6058	\$541	\$956
Upper Partial Denture - Resin Base	D5211	\$319	\$799	Crown - Abutment Supp. Porcelain Fused to High Noble Metal	D6059	\$534	\$944
Lower Partial Denture - Resin Base	D5212	\$319	\$964	Crown - Abutment Supp. Porcelain Fused to Predom. Base Metal	D6060	\$471	\$912
Upper Partial - Cast Metal Frame - Resin Base	D5213	\$415	\$937	Crown - Abutment Supp. Porcelain Fused to Noble Metal	D6061	\$503	\$918
Lower Partial - Cast Metal Frame - Resin Base	D5214	\$415	\$937	Crown - Abutment Supp. Cast High Noble Metal	D6062	\$506	\$910
Upper Immediate Partial Denture - Resin Base	D5221	\$498	\$747	Crown - Abutment Supp. Cast Predominantly Base Metal	D6063	\$402	\$816
Lower Immediate Partial Denture - Resin Base	D5222	\$498	\$747	Crown - Abutment Supp. Cast Noble Metal	D6064	\$432	\$847
Upper Immediate Partial Denture - Cast Metal with Resin	D5223	\$653	\$979	Crown - Implant Supp. Porcelain/Ceramic Crown	D6065	\$522	\$948
Lower Immediate Partial Denture - Cast Metal with Resin	D5224	\$653	\$979	Crown - Implant Supp. Porcelain Fused to Metal	D6066	\$508	\$922
Removable Unilateral Partial - 1 Piece Cast Metal	D5281	\$258	\$535	Crown - Implant Supp. Metal	D6067	\$475	\$906
Adjust Complete Denture - Upper	D5410	\$23	\$35	Re-cement or Re-bond Implant/Abutment Supported Crown	D6092	\$30	\$80
Adjust Complete Denture - Lower	D5411	\$23	\$35	Crown - Abutment Supp. Titanium	D6094	\$470	\$721
Adjust Partial Denture - Upper	D5421	\$23	\$35	Repair Implant Abutment - By Report	D6095	\$158	\$305
Adjust Partial Denture - Lower	D5422	\$23	\$35	Remove Broken Implant Retaining Screw	D6096	\$26	\$26
Repair Broken Complete Denture Base - Mandibular	D5511	\$61	\$124				
Repair Broken Complete Denture Base - Maxillary	D5512	\$61	\$124	<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	\$388	\$482
Repair Resin Partial Denture Base - Mandibular	D5611	\$51	\$117	Pontic - Cast Predominantly Base Metal	D6211	\$364	\$515
Repair Resin Partial Denture Base - Maxillary	D5612	\$51	\$117	Pontic - Cast Noble Metal	D6212	\$379	\$503
Repair Cast Partial Framework - Mandibular	D5621	\$60	\$113	Pontic - Titanium	D6214	\$388	\$482
Repair Cast Partial Framework - Maxillary	D5622	\$60	\$113	Pontic - Porcelain Fused to High Noble Metal	D6240	\$320	\$409
Repair or Replace Broken Clasp - per tooth	D5630	\$54	\$115	Pontic - Porcelain Fused to Predominantly Base Metal	D6241	\$320	\$395
Replace Broken Teeth - Per Tooth	D5640	\$54	\$70	Pontic - Porcelain Fused to Noble Metal	D6242	\$320	\$421
Add Tooth to Existing Partial Denture	D5650	\$54	\$101	Pontic - Porcelain/Ceramic	D6245	\$444	\$474

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Pontic - Resin with High Noble Metal	D6250	\$311	\$602	Extraction - Erupted Tooth	D7210	\$85	\$160
Pontic - Resin with Predominantly Base Metal	D6251	\$301	\$558	Removal of Impacted Tooth - Soft Tissue	D7220	\$92	\$199
Pontic - Resin with Noble Metal	D6252	\$352	\$553	Removal of Impacted Tooth - Partially Bony	D7230	\$108	\$253
Retainer - Cast Metal or Resin Bonded Fixed Prosthesis	D6545	\$243	\$365	Removal of Impacted Tooth - Completely Bony	D7240	\$154	\$331
Retainer - Porcelain/Ceramic/Resin Bonded Fixed Prosthesis	D6548	\$228	\$342	Removal of Residual Tooth Roots	D7250	\$73	\$166
Retainer - Resin for Resin Bonded Fixed Prosthesis	D6549	\$239	\$359	Coronectomy - Intentional Partial Tooth Removal	D7251	\$91	\$368
Retainer Inlay - Porcelain/Ceramic - 2 Surfaces	D6600	\$334	\$453	Oroantral Fistula Closure	D7260	\$111	\$1,207
Retainer Inlay - Porcelain/Ceramic - 3+ Surfaces	D6601	\$349	\$439	Tooth Reimplantation and/or Stabilization of Accidentally Evulsed or Displaced Teeth/Alveolus	D7270	\$228	\$342
Retainer Inlay - Cast High Noble Metal - 2 Surfaces	D6602	\$334	\$445	Tooth Transplantation	D7272	\$228	\$766
Retainer Inlay - Cast High Noble Metal - 3+ Surfaces	D6603	\$388	\$501	Exposure of an Unerupted Tooth	D7280	\$175	\$307
Retainer Inlay - Cast Predom. Base Metal - 2 Surfaces	D6604	\$304	\$445	Incisional Biopsy of Oral Tissue - Hard (Bone - Tooth)	D7285	\$61	\$664
Retainer Inlay - Cast Predom. Base Metal - 3+ Surfaces	D6605	\$349	\$484	Incisional Biopsy of Oral Tissue - Soft (All Others)	D7286	\$61	\$290
Retainer Inlay - Cast Noble Metal - 2 Surfaces	D6606	\$342	\$442	Alveoplasty in Conjunction w/Extract- 4+ Teeth/Per Quad	D7310	\$91	\$226
Retainer Inlay - Cast Noble Metal - 3+ Surfaces	D6607	\$379	\$491	Alveoplasty in Conjunction w/Extract- 1 to 3 Teeth/Per Quad	D7311	\$39	\$291
Retainer Onlay - Porcelain/Ceramic - 2 Surfaces	D6608	\$379	\$409	Alveoplasty not in Conjunct w/Extract- 4+ Teeth/Per Quad	D7320	\$137	\$323
Retainer Onlay - Porcelain/Ceramic - 3+ Surfaces	D6609	\$395	\$441	Alveoplasty not in Conjunct w/Extract- 1 to 3 Teeth/Per Quad	D7321	\$54	\$461
Retainer Onlay - Cast High Noble Metal - 2 Surfaces	D6610	\$327	\$491	Vestibuloplasty-Ridge Ext (2nd Epithelialization)	D7340	\$182	\$1,628
Retainer Onlay - Cast High Noble Metal - 3+ Surfaces	D6611	\$403	\$525	Vestibuloplasty-Ridge Ext (Grafts - Hypertissue)	D7350	\$273	\$5,144
Retainer Onlay - Cast Predom. Base Metal - 2 Surfaces	D6612	\$304	\$514	Removal of Odontogenic Cyst/Tumor <=1.25cm	D7450	\$288	\$594
Retainer Onlay - Cast Predom. Base Metal - 3+ Surfaces	D6613	\$379	\$497	Removal of Odontogenic Cyst/Tumor > 1.25cm	D7451	\$175	\$785
Retainer Onlay - Cast Noble Metal - 2 Surfaces	D6614	\$319	\$476	Removal of Nonodontogenic Cyst/Tumor<=1.25cm	D7460	\$312	\$618
Retainer Onlay - Cast Noble Metal - 3+ Surfaces	D6615	\$410	\$473	Removal of Nonodontogenic Cyst/Tumor> 1.25cm	D7461	\$364	\$980
Retainer Inlay - Titanium	D6624	\$250	\$404	Removal of Lateral Exostosis - Per Site	D7471	\$95	\$665
Retainer Onlay - Titanium	D6634	\$265	\$421	Removal of Torus Palatinus	D7472	\$243	\$803
Retainer Crown - Resin With High Noble Metal	D6720	\$379	\$593	Removal of Torus Mandibularis	D7473	\$243	\$757
Retainer Crown - Resin With Base Metal	D6721	\$357	\$592	Reduction of Osseous Tuberosity	D7485	\$243	\$672
Retainer Crown - Resin With Noble Metal	D6722	\$364	\$586	Incision/Drain of Abscess Intraoral Soft Tissue	D7510	\$57	\$197
Retainer Crown - Porcelain/Ceramic Substrate	D6740	\$385	\$553	Incision/Drain of Abscess Extraoral Soft Tissue	D7520	\$121	\$903
Retainer Crown - Porcelain With High Noble Metal	D6750	\$318	\$463	Removal of Foreign Body - Skin or Subc. Areolar Tissue	D7530	\$57	\$341
Retainer Crown - Porcelain With Predominantly Base Metal	D6751	\$298	\$441	Removal of Reaction Producing Foreign Bodies - Musculoskeletal System	D7540	\$121	\$328
Retainer Crown - Porcelain With Noble Metal	D6752	\$318	\$465	Sequestrectomy for Osteomyelitis	D7550	\$57	\$296
Retainer Crown - ¾ Cast High Noble Metal	D6780	\$429	\$566	Maxillary Sinusotomy for Removal of Tooth Fragment or Foreign Body	D7560	\$528	\$3,326
Retainer Crown - ¾ Cast Predominantly Base Metal	D6781	\$364	\$532	Suture of Recent Small Wounds up to 5cm	D7910	\$57	\$317
Retainer Crown - ¾ Cast Noble Metal	D6782	\$357	\$437	Frenulectomy (Frenectomy or Frenotomy)	D7960	\$106	\$312
Retainer Crown - ¾ Porcelain/Ceramic	D6783	\$364	\$513	Excision of Hyperplastic Tissue - Per Arch	D7970	\$102	\$404
Retainer Crown - Full Cast High Noble Metal	D6790	\$379	\$540	Excision of Pericoronal Gingiva	D7971	\$80	\$127
Retainer Crown - Full Cast Predominantly Base Metal	D6791	\$373	\$596	Surgical Reduction of Fibrous Tuberosity	D7972	\$304	\$471
Retainer Crown - Full Cast Noble Metal	D6792	\$395	\$590	Non-Surgical Sialolithotomy	D7979	\$295	\$915
Retainer Crown - Titanium	D6794	\$360	\$493	Surgical Sialolithotomy	D7980	\$266	\$856
Re-cement or Re-bond Fixed Partial Denture	D6930	\$15	\$25	Closure of Salivary Fistula	D7983	\$702	\$2,162
Stress Breaker	D6940	\$50	\$67				
Fixed Partial Denture Repair - by Report	D6980	\$99	\$149				
<b>Type II - Oral Surgery</b>				<b>Type - Miscellaneous Services</b>			
Extraction - Coronal Remnants - Primary Tooth	D7111	\$39	\$79	I - Palliative (Emergency) Treatment of Pain	D9110	\$18	\$50
Extraction - Erupted Tooth or Exposed Root	D7140	\$57	\$95				

COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY	COVERED SERVICES	ADA CODE	GENERAL DENTIST COPAY	SPECIALIST DENTIST COPAY
I - Evaluation for Deep Sedation/General Anesthesia	D9219	\$0	\$0				
III - Deep Sedation/General Anesthesia - First 15 Min*	D9222	\$53	\$162				
III - Deep Sedation/General Anesthesia - Each Additional 15 Min*	D9223	\$48	\$74				
III - Analgesia - Anxiolysis - Inhal Nitrous Oxide*	D9230	\$18	\$27				
III - Intravenous Moderate Sedation/Analgesia - First 15 Min*	D9239	\$44	\$138				
III - Intravenous Moderate Sedation/Analgesia - Each Additional 15 Min*	D9243	\$40	\$61				
III - Non-Intravenous Conscious Sedation*	D9248	\$63	\$66				
I - Consultation	D9310	\$0	\$122				
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	\$147				
III - Occlusal Adjustment - Limited	D9951	\$48	\$105				
III - Occlusal Adjustment - Complete	D9952	\$115	\$548				
* Covered only when performed in conjunction with covered oral surgery.	D9999						