Code	Name	FEES 8/4/2026	Nominal Charge A,B,C	Nominal Charge D	Nominal Charge E	Nominal Charge F, G
D0120	PERIODIC ORAL EVALUATION - ESTABLISHED PATIENT	75	20	25	30	35
D0140	LIMITED ORAL EVALUATION - PROBLEM FOCUSED	110	30	35	40	45
D0145	ORAL EVALUATION FOR A PATIENT UNDER 3 YEARS OF AGE AND COUNSELING WITH PRIMARY CAREGIVER	97	20	25	30	35
D0150	COMPREHENSIVE ORAL EVALUATION - NEW OR ESTABLISHED PATIENT	130	40	45	50	55
D0160	DETAILED AND EXTENSIVE ORAL EVALUATION - PROBLEM FOCUSED, BY REPORT	200	50	55	60	65
D0170	RE-EVALUATION - LIMITED, PROBLEM FOCUSED (ESTABLISHED PATIENT; NOT POST-OPERATIVE VISIT)	99	20	25	30	35
D0171	RE-EVALUATION - POST-OPERATIVE OFFICE VISIT	93				
D0180	COMPREHENSIVE PERIODONTAL EVALUATION - NEW OR ESTABLISHED PATIENT	136	45	50	55	60
D0190	SCREENING OF A PATIENT	115				
D0191	ASSESSMENT OF A PATIENT	110				
D0210	INTRAORAL - COMPLETE SERIES OF RADIOGRAPHIC IMAGES	180	25	35	45	55
D0220	INTRAORAL - PERIAPICAL FIRST RADIOGRAPHIC IMAGE	42	5	10	15	20
D0230	INTRAORAL - PERIAPICAL EACH ADDITIONAL RADIOGRAPHIC IMAGE	36	5	10	15	20
D0240	INTRAORAL - OCCLUSAL RADIOGRAPHIC IMAGE	55	5	10	15	20
D0250	EXTRAORAL - 2D PROJECTION RADIOGRAPHIC IMAGE CREATED USING A STATIONARY RADIATION SOURCE AND DETECTOR	85	5	10	15	20
D0251	EXTRAORAL POSTERIOR DENTAL RADIOGRAPHIC IMAGE	92	5	10	15	20
D0270	BITEWING - SINGLE RADIOGRAPHIC IMAGE	40	5	5	5	5
D0272	BITEWINGS - 2 RADIOGRAPHIC IMAGES	60	10	10	10	10
D0273	BITEWINGS - 3 RADIOGRAPHIC IMAGES	75	15	15	15	15
D0274	BITEWINGS - 4 RADIOGRAPHIC IMAGES	90	20	20	20	20
D0277	VERTICAL BITEWINGS - 7 TO 8 RADIOGRAPHIC IMAGES	180	25	35	45	55
D0310	SIALOGRAPHY	470				
D0330	PANORAMIC RADIOGRAPHIC IMAGE	159	20	30	40	50
D0340	2D CEPHALOMETRIC RADIOGRAPHIC IMAGE - ACQUISITION, MEASUREMENT AND ANALYSIS	158	20	30	40	50
D0350	2D ORAL/FACIAL PHOTOGRAPHIC IMAGE OBTAINED INTRAORALLY OR EXTRAORALLY	98	5	10	15	20
D0364	CONE BEAM CT CAPTURE AND INTERPRETATION WITH LIMITED FIELD OF VIEW - LESS THAN 1 WHOLE JAW	402				
D0365	CONE BEAM CT CAPTURE AND INTERPRETATION WITH FIELD OF VIEW OF 1 FULL DENTAL ARCH - MANDIBLE	433				
D0366	CONE BEAM CT CAPTURE AND INTERPRETATION WITH FIELD OF VIEW OF 1 FULL DENTAL ARCH - MAXILLA, WITH OR WITHOUT CRANIUM	427				
D0367	CONE BEAM CT CAPTURE AND INTERPRETATION WITH FIELD OF VIEW OF BOTH JAWS; WITH OR WITHOUT CRANIUM	431				
D0368	CONE BEAM CT CAPTURE AND INTERPRETATION FOR TMJ SERIES INCLUDING 2 OR MORE EXPOSURES	474				
D0381	CONE BEAM CT IMAGE CAPTURE WITH FIELD OF VIEW OF 1 FULL DENTAL ARCH - MANDIBLE	436				
D0382	CONE BEAM CT IMAGE CAPTURE WITH FIELD OF VIEW OF 1 FULL DENTAL ARCH - MAXILLA, WITH OR WITHOUT CRANIUM	435				
D0383	CONE BEAM CT IMAGE CAPTURE WITH FIELD OF VIEW OF BOTH JAWS; WITH OR WITHOUT CRANIUM	458				
D0384	CONE BEAM CT IMAGE CAPTURE FOR TMJ SERIES INCLUDING 2 OR MORE EXPOSURES	474				
D0393	TREATMENT SIMULATION USING 3D IMAGE VOLUME	403				

D0394	DIGITAL SUBTRACTION OF 2 OR MORE IMAGES OR IMAGE VOLUMES OF THE SAME MODALITY	367				
D0395	FUSION OF 2 OR MORE 3D IMAGE VOLUMES OF 1 OR MORE MODALITIES	422				
D0411	HBA1C IN-OFFICE POINT OF SERVICE TESTING	74	10	10	15	15
D0412	BLOOD GLUCOSE LEVEL TEST - IN-OFFICE USING A GLUCOSE METER	95	0	0	0	0
D0414	LABORATORY PROCESSING OF MICROBIAL SPECIMEN TO INCLUDE CULTURE AND SENSITIVITY STUDIES, PREPARATION AND TRANSMISS	270	40	50	60	70
D0415	COLLECTION OF MICROORGANISMS FOR CULTURE AND SENSITIVITY	246	40	50	60	70
D0416	VIRAL CULTURE	224	40	50	60	70
D0417	COLLECTION AND PREPARATION OF SALIVA SAMPLE FOR LABORATORY DIAGNOSTIC TESTING	256	40	50	60	70
D0418	ANALYSIS OF SALIVA SAMPLE	218	40	50	60	70
D0419	ASSESSMENT OF SALIVARY FLOW BY MEASUREMENT	157	40	50	60	70
D0425	CARIES SUSCEPTIBILITY TESTS	115				
D0431	ADJUNCTIVE PRE-DIAGNOSTIC TEST THAT AIDS IN DETECTION OF MUCOSAL ABNORMALITIES INCLUDING PREMALIGNANT AND MALIGNA	85				
D0460	PULP VITALITY TESTS	78	10	15	20	25
D0470	DIAGNOSTIC CASTS	193	20	30	40	50
D0601	CARIES RISK ASSESSMENT AND DOCUMENTATION, WITH A FINDING OF LOW RISK	0	0	0	0	0
D0602	CARIES RISK ASSESSMENT AND DOCUMENTATION, WITH A FINDING OF MODERATE RISK	0	0	0	0	0
D0603	CARIES RISK ASSESSMENT AND DOCUMENTATION, WITH A FINDING OF HIGH RISK	0	0	0	0	0
D0701	PANORAMIC RADIOGRAPHIC IMAGE-IMAGE CAPTURE ONLY	159				
D0702	2D CEPHALOMETRIC RADIOGRAPHIC IMAGE IMAGE CAPTURE ONLY	226				
D0703	2D ORAL/FACIAL PHOTOGRAPHIC IMAGE OBTAINED INTRAORALLY OR EXTRAORALLY-IMAGE CAPTURE ONLY	109				
D0705	EXTRAORAL POSTERIOR DENTAL RADIOGRAPHIC IMAGE-IMAGE CAPTURE ONLY	86				
D0706	INTRAORAL-OCCLUSAL RADIOGRAPHIC IMAGE-IMAGE CAPTURE ONLY	62				
D0707	INTRAORAL-PERIAPICAL RADIOGRAPHIC IMAGE-IMAGE CAPTURE ONLY	58				
D0708	INTRAORAL-BITEWING RADIOGRAPHIC IMAGE-IMAGE CAPTURE ONLY	66				
D0709	INTRAORAL-COMPREHENSIVE SERIES OF RADIOGRAPHIC IMAGES-IMAGE CAPTURE ONLY	170				
D0999	UNSPECIFIED DIAGNOSTIC PROCEDURE, BY REPORT	256				
D1110	PROPHYLAXIS - ADULT	130	20	25	30	35
D1120	PROPHYLAXIS - CHILD	97	10	15	20	25
D1206	TOPICAL APPLICATION OF FLUORIDE VARNISH	56	5	10	15	20
D1208	TOPICAL APPLICATION OF FLUORIDE - EXCLUDING VARNISH	55	5	10	15	20
D1310	NUTRITIONAL COUNSELING FOR CONTROL OF DENTAL DISEASE	30	5	10	15	20
D1320	TOBACCO COUNSELING FOR THE CONTROL AND PREVENTION OF ORAL DISEASE	30	5	10	15	20
D1321	COUNSELING FOR THE CONTROL AND PREVENTION OF ADVERSE ORAL, BEHAVIORAL, AND SYSTEMIC HEALTH EFFECTS ASSOCIATED W	30	5	10	15	20
D1330	ORAL HYGIENE INSTRUCTIONS	30	5	10	15	20
D1351	SEALANT - PER TOOTH	76	10	15	20	25
D1352	PREVENTIVE RESIN RESTORATION IN A MODERATE TO HIGH CARIES RISK PATIENT - PERMANENT TOOTH	144	15	20	25	30
D1353	SEALANT REPAIR - PER TOOTH	80	5	10	15	20
D1354	INTERIM CARIES ARRESTING MEDICAMENT APPLICATION - PER TOOTH	35	10	15	20	25
D1355	CARIES PREVENTATIVE MEDICAMENT APPLICATION-PER TOOTH	98	10	15	20	25
D1510	SPACE MAINTAINER - FIXED, UNILATERAL - PER QUADRANT	421	100	125	150	175
D1516	SPACE MAINTAINER - FIXED - BILATERAL, MAXILLARY	556	100	125	150	175
D1517	SPACE MAINTAINER - FIXED - BILATERAL, MANDIBULAR	558	100	125	150	175

D1520	SPACE MAINTAINER - REMOVABLE, UNILATERAL - PER QUADRANT	487	100	125	150	175
D1526	SPACE MAINTAINER - REMOVABLE - BILATERAL, MAXILLARY	590	100	125	150	175
D1527	SPACE MAINTAINER - REMOVABLE - BILATERAL, MANDIBULAR	591	100	125	150	175
D1551	RE-CEMENT OR RE-BOND BILATERAL SPACE MAINTAINER - MAXILLARY	140	20	25	30	35
D1552	RE-CEMENT OR RE-BOND BILATERAL SPACE MAINTAINER - MANDIBULAR	142	20	25	30	35
D1553	RE-CEMENT OR RE-BOND UNILATERAL SPACE MAINTAINER - PER QUADRANT	154	20	25	30	35
D1556	REMOVAL OF FIXED UNILATERAL SPACE MAINTAINER - PER QUADRANT	133	20	25	30	35
D1557	REMOVAL OF FIXED BILATERAL SPACE MAINTAINER - MAXILLARY	164	20	25	30	35
D1558	REMOVAL OF FIXED BILATERAL SPACE MAINTAINER - MANDIBULAR	170	20	25	30	35
D1575	DISTAL SHOE SPACE MAINTAINER - FIXED, UNILATERAL - PER QUADRANT	482	100	125	150	175
D1999	UNSPECIFIED PREVENTIVE PROCEDURE, BY REPORT	158				
D2330	RESIN-BASED COMPOSITE - 1 SURFACE, ANTERIOR	238	45	50	55	60
D2331	RESIN-BASED COMPOSITE - 2 SURFACES, ANTERIOR	280	45	50	55	60
D2332	RESIN-BASED COMPOSITE - 3 SURFACES, ANTERIOR	350	45	50	55	60
D2335	RESIN-BASED COMPOSITE - 4 OR MORE SURFACES OR INVOLVING INCISAL ANGLE (ANTERIOR)	435	45	50	55	60
D2390	RESIN-BASED COMPOSITE CROWN, ANTERIOR	661	45	50	55	60
D2391	RESIN-BASED COMPOSITE - 1 SURFACE, POSTERIOR	256	45	50	55	60
D2392	RESIN-BASED COMPOSITE - 2 SURFACES, POSTERIOR	325	45	50	55	60
D2393	RESIN-BASED COMPOSITE - 3 SURFACES, POSTERIOR	294	45	50	55	60
D2394	RESIN-BASED COMPOSITE - 4 OR MORE SURFACES, POSTERIOR	470	45	50	55	60
D2510	INLAY - METALLIC - 1 SURFACE	1224	575	625	675	725
D2520	INLAY - METALLIC - 2 SURFACES	1251	575	625	675	725
D2530	INLAY - METALLIC - 3 OR MORE SURFACES	1284	575	625	675	725
D2542	ONLAY - METALLIC - 2 SURFACES	1315	575	625	675	725
D2543	ONLAY - METALLIC - 3 SURFACES	1353	575	625	675	725
D2544	ONLAY - METALLIC - 4 OR MORE SURFACES	1409	575	625	675	725
D2610	INLAY - PORCELAIN/CERAMIC - 1 SURFACE	1247	575	625	675	725
D2620	INLAY - PORCELAIN/CERAMIC - 2 SURFACES	1262	575	625	675	725
D2630	INLAY - PORCELAIN/CERAMIC - 3 OR MORE SURFACES	1300	575	625	675	725
D2642	ONLAY - PORCELAIN/CERAMIC - 2 SURFACES	1311	575	625	675	725
D2643	ONLAY - PORCELAIN/CERAMIC - 3 SURFACES	1343	575	625	675	725
D2644	ONLAY - PORCELAIN/CERAMIC - 4 OR MORE SURFACES	1393	575	625	675	725
D2650	INLAY - RESIN-BASED COMPOSITE - 1 SURFACE	1180	575	625	675	725
D2651	INLAY - RESIN-BASED COMPOSITE - 2 SURFACES	1195	575	625	675	725
D2652	INLAY - RESIN-BASED COMPOSITE - 3 OR MORE SURFACES	1233	575	625	675	725
D2662	ONLAY - RESIN-BASED COMPOSITE - 2 SURFACES	1242	575	625	675	725
D2663	ONLAY - RESIN-BASED COMPOSITE - 3 SURFACES	1252	575	625	675	725
D2664	ONLAY - RESIN-BASED COMPOSITE - 4 OR MORE SURFACES	1270	575	625	675	725
D2710	CROWN - RESIN-BASED COMPOSITE (INDIRECT)	1233	575	625	675	725
D2712	CROWN - 3/4 RESIN-BASED COMPOSITE (INDIRECT)	1256	575	625	675	725
D2720	CROWN - RESIN WITH HIGH NOBLE METAL	1330	575	625	675	725
D2721	CROWN - RESIN WITH PREDOMINANTLY BASE METAL	1279	575	625	675	725

D2722	CROWN - RESIN WITH NOBLE METAL	1307	575	625	675	725
D2740	CROWN - PORCELAIN/CERAMIC	1433	575	625	675	725
D2750	CROWN - PORCELAIN FUSED TO HIGH NOBLE METAL	1457	575	625	675	725
D2751	CROWN - PORCELAIN FUSED TO PREDOMINANTLY BASE METAL	1362	575	625	675	725
D2752	CROWN - PORCELAIN FUSED TO NOBLE METAL	1385	575	625	675	725
D2753	CROWN - PORCELAIN FUSED TO TITANIUM AND TITANIUM ALLOYS	1446	575	625	675	725
D2780	CROWN - 3/4 CAST HIGH NOBLE METAL	1410	575	625	675	725
D2781	CROWN - 3/4 CAST PREDOMINANTLY BASE METAL	1340	575	625	675	725
D2782	CROWN - 3/4 CAST NOBLE METAL	1353	575	625	675	725
D2783	CROWN - 3/4 PORCELAIN/CERAMIC	1407	575	625	675	725
D2790	CROWN - FULL CAST HIGH NOBLE METAL	1533	575	625	675	725
D2791	CROWN - FULL CAST PREDOMINANTLY BASE METAL	1347	575	625	675	725
D2792	CROWN - FULL CAST NOBLE METAL	1414	575	625	675	725
D2794	CROWN - TITANIUM AND TITANIUM ALLOYS	1408	575	625	675	725
D2799	PROVISIONAL CROWN - FURTHER TREATMENT OR COMPLETION OF DIAGNOSIS NECESSARY PRIOR TO FINAL IMPRESSION	563	80	100	120	140
D2910	RE-CEMENT OR RE-BOND INLAY, ONLAY, VENEER OR PARTIAL COVERAGE RESTORATION	158	20	25	30	35
D2915	RE-CEMENT OR RE-BOND INDIRECTLY FABRICATED OR PREFABRICATED POST AND CORE	153	20	25	30	35
D2920	RE-CEMENT OR RE-BOND CROWN	156	20	25	30	35
D2921	REATTACHMENT OF TOOTH FRAGMENT, INCISAL EDGE OR CUSP	345	60	70	80	90
D2928	PREFABRICATED PORCELAIN/CERAMIC CROWN-PERMANENT TOOTH	638	100	200	300	400
D2929	PREFABRICATED PORCELAIN/CERAMIC CROWN - PRIMARY TOOTH	492	100	200	300	400
D2930	PREFABRICATED STAINLESS STEEL CROWN - PRIMARY TOOTH	343	60	70	80	90
D2931	PREFABRICATED STAINLESS STEEL CROWN - PERMANENT TOOTH	418	60	70	80	90
D2932	PREFABRICATED RESIN CROWN	444	60	70	80	90
D2933	PREFABRICATED STAINLESS STEEL CROWN WITH RESIN WINDOW	451	60	70	80	90
D2934	PREFABRICATED ESTHETIC COATED STAINLESS STEEL CROWN - PRIMARY TOOTH	457	60	70	80	90
D2940	PROTECTIVE RESTORATION	173	25	35	40	45
D2941	INTERIM THERAPEUTIC RESTORATION - PRIMARY DENTITION	242	35	40	45	50
D2949	RESTORATIVE FOUNDATION FOR AN INDIRECT RESTORATION	272	40	50	60	70
D2950	CORE BUILDUP, INCLUDING ANY PINS WHEN REQUIRED	353	50	70	90	110
D2951	PIN RETENTION - PER TOOTH, IN ADDITION TO RESTORATION	99	15	20	25	30
D2952	POST AND CORE IN ADDITION TO CROWN, INDIRECTLY FABRICATED	525	80	90	100	110
D2953	EACH ADDITIONAL INDIRECTLY FABRICATED POST - SAME TOOTH	392	60	70	80	90
D2954	PREFABRICATED POST AND CORE IN ADDITION TO CROWN	436	70	80	90	100
D2955	POST REMOVAL	359	60	70	80	90
D2960	LABIAL VENEER (RESIN LAMINATE) - CHAIRSIDE	885	90	95	100	105
D2961	LABIAL VENEER (RESIN LAMINATE) - LABORATORY	1270	575	625	675	725
D2962	LABIAL VENEER (PORCELAIN LAMINATE) - LABORATORY	1503	700	710	715	720
D2971	ADDITIONAL PROCEDURES TO CONSTRUCT NEW CROWN UNDER EXISTING PARTIAL DENTURE FRAMEWORK	348	10	15	20	25
D2975	COPING	764	100	110	120	130
D2980	CROWN REPAIR NECESSITATED BY RESTORATIVE MATERIAL FAILURE	366				
D2981	INLAY REPAIR NECESSITATED BY RESTORATIVE MATERIAL FAILURE	368	60	70	80	90

D2982	ONLAY REPAIR NECESSITATED BY RESTORATIVE MATERIAL FAILURE	371	60	70	80	90
D2983	VENEER REPAIR NECESSITATED BY RESTORATIVE MATERIAL FAILURE	390	60	70	80	90
D2990	RESIN INFILTRATION OF INCIPIENT SMOOTH SURFACE LESIONS	235	45	55	65	75
D2999	UNSPECIFIED RESTORATIVE PROCEDURE, BY REPORT	346				
D3110	PULP CAP - DIRECT (EXCLUDING FINAL RESTORATION)	112	15	20	25	30
D3120	PULP CAP - INDIRECT (EXCLUDING FINAL RESTORATION)	112	15	20	25	30
D3220	THERAPEUTIC PULPOTOMY (EXCLUDING FINAL RESTORATION) - REMOVAL OF PULP CORONAL TO THE DENTINOCEMENTAL JUNCTION AI	274	50	60	70	80
D3221	PULPAL DEBRIDEMENT, PRIMARY AND PERMANENT TEETH	298	50	60	70	80
D3222	PARTIAL PULPOTOMY FOR APEXOGENESIS - PERMANENT TOOTH WITH INCOMPLETE ROOT DEVELOPMENT	372	50	60	70	80
D3230	PULPAL THERAPY (RESORBABLE FILLING) - ANTERIOR, PRIMARY TOOTH (EXCLUDING FINAL RESTORATION)	350	50	60	70	80
D3240	PULPAL THERAPY (RESORBABLE FILLING) - POSTERIOR, PRIMARY TOOTH (EXCLUDING FINAL RESTORATION)	383	50	60	70	80
D3310	ENDODONTIC THERAPY, ANTERIOR TOOTH (EXCLUDING FINAL RESTORATION)	984	200	250	300	350
D3320	ENDODONTIC THERAPY, PREMOLAR TOOTH (EXCLUDING FINAL RESTORATION)	1122	200	250	300	350
D3330	ENDODONTIC THERAPY, MOLAR TOOTH (EXCLUDING FINAL RESTORATION)	1353	200	250	300	350
D3331	TREATMENT OF ROOT CANAL OBSTRUCTION; NON-SURGICAL ACCESS	782				
D3332	INCOMPLETE ENDODONTIC THERAPY; INOPERABLE, UNRESTORABLE OR FRACTURED TOOTH	561	90	100	110	120
D3333	INTERNAL ROOT REPAIR OF PERFORATION DEFECTS	451				
D3346	RETREATMENT OF PREVIOUS ROOT CANAL THERAPY - ANTERIOR	1139				
D3347	RETREATMENT OF PREVIOUS ROOT CANAL THERAPY - PREMOLAR	1265				
D3348	RETREATMENT OF PREVIOUS ROOT CANAL THERAPY - MOLAR	1500				
D3351	APEXIFICATION/RECALCIFICATION - INITIAL VISIT (APICAL CLOSURE/CALCIFIC REPAIR OF PERFORATIONS, ROOT RESORPTION, ETC.)	464				
D3352	APEXIFICATION/RECALCIFICATION - INTERIM MEDICATION REPLACEMENT	343				
D3353	APEXIFICATION/RECALCIFICATION - FINAL VISIT (INCLUDES COMPLETED ROOT CANAL THERAPY - APICAL CLOSURE/CALCIFIC REPAIR OF	667				
D3355	PULPAL REGENERATION - INITIAL VISIT	533				
D3356	PULPAL REGENERATION - INTERIM MEDICATION REPLACEMENT	425				
D3357	PULPAL REGENERATION - COMPLETION OF TREATMENT	732				
D3410	APICOECTOMY - ANTERIOR	938				
D3421	APICOECTOMY - PREMOLAR (FIRST ROOT)	1046				
D3425	APICOECTOMY - MOLAR (FIRST ROOT)	1172				
D3426	APICOECTOMY (EACH ADDITIONAL ROOT)	549				
D3428	BONE GRAFT IN CONJUNCTION WITH PERIRADICULAR SURGERY - PER TOOTH, SINGLE SITE	836				
D3429	BONE GRAFT IN CONJUNCTION WITH PERIRADICULAR SURGERY - EACH ADDITIONAL CONTIGUOUS TOOTH IN THE SAME SURGICAL SITE	823				
D3430	RETROGRADE FILLING - PER ROOT	374				
D3431	BIOLOGIC MATERIALS TO AID IN SOFT AND OSSEOUS TISSUE REGENERATION IN CONJUNCTION WITH PERIRADICULAR SURGERY	701				
D3432	GUIDED TISSUE REGENERATION, RESORBABLE BARRIER, PER SITE, IN CONJUNCTION WITH PERIRADICULAR SURGERY	775				
D3450	ROOT AMPUTATION - PER ROOT	658				
D3460	ENDODONTIC ENDOSSEOUS IMPLANT	1882				
D3470	INTENTIONAL REIMPLANTATION (INCLUDING NECESSARY SPLINTING)	995				
D3471	SURGICAL REPAIR OF ROOT RESORPTION-ANTERIOR	894				
D3472	SURGICAL REPAIR OF ROOT RESORPTION-PREMOLAR	936				
D3473	SURGICAL REPAIR OF ROOT RESORPTION-MOLAR	958				
D3501	SURGICAL EXPOSURE OF ROOT SURFACE WITHOUT APICOECTOMY OR REPAIR OF ROOT RESORPTION-ANTERIOR	900				

D3502	SURGICAL EXPOSURE OF ROOT SURFACE WITHOUT APICOECTOMY OR REPAIR OF ROOT RESORPTION-PREMOLAR	909				
D3503	SURGICAL EXPOSURE OF ROOT SURFACE WITHOUT APICOECTOMY OR REPAIR OF ROOT RESORPTION-MOLAR	899				
D3910	SURGICAL PROCEDURE FOR ISOLATION OF TOOTH WITH RUBBER DAM	293				
D3911	INTRAORIFICE BARRIER	253				
D3920	HEMISECTION (INCLUDING ANY ROOT REMOVAL), NOT INCLUDING ROOT CANAL THERAPY	601				
D3921	DECORONATION OR SUBMERGENCE OF AN ERUPTED TOOTH	454				
D3950	CANAL PREPARATION AND FITTING OF PREFORMED DOWEL OR POST	329				
D3999	UNSPECIFIED ENDODONTIC PROCEDURE, BY REPORT	433				
D4210	GINGIVECTOMY OR GINGIVOPLASTY - 4 OR MORE CONTIGUOUS TEETH OR TOOTH BOUNDED SPACES PER QUADRANT	802				
D4211	GINGIVECTOMY OR GINGIVOPLASTY - 1 TO 3 CONTIGUOUS TEETH OR TOOTH BOUNDED SPACES PER QUADRANT	445				
D4212	GINGIVECTOMY OR GINGIVOPLASTY TO ALLOW ACCESS FOR RESTORATIVE PROCEDURE, PER TOOTH	373	50	55	60	65
D4230	ANATOMICAL CROWN EXPOSURE - 4 OR MORE CONTIGUOUS TEETH OR TOOTH BOUNDED SPACES PER QUADRANT	1154				
D4231	ANATOMICAL CROWN EXPOSURE - 1 TO 3 TEETH OR TOOTH BOUNDED SPACES PER QUADRANT	812				
D4240	GINGIVAL FLAP PROCEDURE, INCLUDING ROOT PLANING - 4 OR MORE CONTIGUOUS TEETH OR TOOTH BOUNDED SPACES PER QUADRA	954				
D4241	GINGIVAL FLAP PROCEDURE, INCLUDING ROOT PLANING - 1 TO 3 CONTIGUOUS TEETH OR TOOTH BOUNDED SPACES PER QUADRANT	806				
D4245	APICALLY POSITIONED FLAP	1039				
D4249	CLINICAL CROWN LENGTHENING - HARD TISSUE	1004	150	250	350	450
D4260	OSSEOUS SURGERY (INCLUDING ELEVATION OF A FULL THICKNESS FLAP AND CLOSURE) - 4 OR MORE CONTIGUOUS TEETH OR TOOTH	1432				
D4261	OSSEOUS SURGERY (INCLUDING ELEVATION OF A FULL THICKNESS FLAP AND CLOSURE) - 1 TO 3 CONTIGUOUS TEETH OR TOOTH BOUN	1162				
D4263	BONE REPLACEMENT GRAFT - RETAINED NATURAL TOOTH - FIRST SITE IN QUADRANT	811	150	250	350	450
D4264	BONE REPLACEMENT GRAFT - RETAINED NATURAL TOOTH - EACH ADDITIONAL SITE IN QUADRANT	681	100	150	200	250
D4265	BIOLOGIC MATERIALS TO AID IN SOFT AND OSSEOUS TISSUE REGENERATION	687				
D4266	GUIDED TISSUE REGENERATION - RESORBABLE BARRIER, PER SITE	885				
D4267	GUIDED TISSUE REGENERATION - NON-RESORBABLE BARRIER, PER SITE (INCLUDES MEMBRANE REMOVAL)	1065				
D4268	SURGICAL REVISION PROCEDURE, PER TOOTH	988				
D4270	PEDICLE SOFT TISSUE GRAFT PROCEDURE	1135				
D4273	AUTOGENOUS CONNECTIVE TISSUE GRAFT PROCEDURE (INCLUDING DONOR AND RECIPIENT SURGICAL SITES) FIRST TOOTH, IMPLANT,	1404				
D4274	MESIAL/DISTAL WEDGE PROCEDURE, SINGLE TOOTH (WHEN NOT PERFORMED IN CONJUNCTION WITH SURGICAL PROCEDURES IN THE	843				
D4275	NON-AUTOGENOUS CONNECTIVE TISSUE GRAFT (INCLUDING RECIPIENT SITE AND DONOR MATERIAL) FIRST TOOTH, IMPLANT, OR EDEN	1368				
D4276	COMBINED CONNECTIVE TISSUE AND DOUBLE PEDICLE GRAFT, PER TOOTH	1463				
D4277	FREE SOFT TISSUE GRAFT PROCEDURE (INCLUDING RECIPIENT AND DONOR SURGICAL SITES) FIRST TOOTH, IMPLANT OR EDENTULOUS	1327				
D4278	FREE SOFT TISSUE GRAFT PROCEDURE (INCLUDING RECIPIENT AND DONOR SURGICAL SITES) EACH ADDITIONAL CONTIGUOUS TOOTH,	1014				
D4283	AUTOGENOUS CONNECTIVE TISSUE GRAFT PROCEDURE (INCLUDING DONOR AND RECIPIENT SURGICAL SITES) - EACH ADDITIONAL CON	1197				
D4285	NON-AUTOGENOUS CONNECTIVE TISSUE GRAFT PROCEDURE (INCLUDING RECIPIENT SURGICAL SITE AND DONOR MATERIAL)	1172				
D4286	REMOVAL OF NON-RESORBABLE BARRIER	530				
D4322	SPLINT-INTRA-CORONAL; NATURAL TEETH OR PROSTHETIC CROWNS	642	90	110	130	150
D4323	SPLINT-EXTRA-CORONAL; NATURAL TEETH OR PROSTHETIC CROWNS	608	90	110	130	150
D4341	PERIODONTAL SCALING AND ROOT PLANING - 4 OR MORE TEETH PER QUADRANT	332	50	60	70	80
D4342	PERIODONTAL SCALING AND ROOT PLANING - 1 TO 3 TEETH PER QUADRANT	251	50	60	70	80
D4346	SCALING IN PRESENCE OF GENERALIZED MODERATE OR SEVERE GINGIVAL INFLAMMATION - FULL MOUTH, AFTER ORAL EVALUATION	220	40	45	50	55
D4355	FULL MOUTH DEBRIDEMENT TO ENABLE A COMPREHENSIVE ORAL EVALUATION AND DIAGNOSIS ON A SUBSEQUENT VISIT	239	40	50	60	70
D4381	LOCALIZED DELIVERY OF ANTIMICROBIAL AGENTS VIA A CONTROLLED RELEASE VEHICLE INTO DISEASED CREVICULAR TISSUE, PER TO	142	10	15	20	25

D4910	PERIODONTAL MAINTENANCE	176	40	45	50	55
D4921	GINGIVAL IRRIGATION - PER QUADRANT	108	10	15	20	25
D4999	UNSPECIFIED PERIODONTAL PROCEDURE, BY REPORT	249				
D5110	COMPLETE DENTURE - MAXILLARY	2359	850	900	950	1000
D5120	COMPLETE DENTURE - MANDIBULAR	2364	850	900	950	1000
D5130	IMMEDIATE DENTURE - MAXILLARY	2492	750	800	850	900
D5140	IMMEDIATE DENTURE - MANDIBULAR	2494	750	800	850	900
D5211	MAXILLARY PARTIAL DENTURE - RESIN BASE (INCLUDING, RETENTIVE/CLASPING MATERIALS, RESTS, AND TEETH)	1814	800	850	900	950
D5212	MANDIBULAR PARTIAL DENTURE - RESIN BASE (INCLUDING, RETENTIVE/CLASPING MATERIALS, RESTS, AND TEETH)	1831	800	850	900	950
D5213	MAXILLARY PARTIAL DENTURE - CAST METAL FRAMEWORK WITH RESIN DENTURE BASES (INCLUDING RETENTIVE/CLASPING MATERIALS	2405	950	1000	1050	1100
D5214	MANDIBULAR PARTIAL DENTURE - CAST METAL FRAMEWORK WITH RESIN DENTURE BASES (INCLUDING RETENTIVE/CLASPING MATERIA	2404	950	1000	1050	1100
D5221	IMMEDIATE MAXILLARY PARTIAL DENTURE - RESIN BASE (INCLUDING RETENTIVE/CLASPING MATERIALS, RESTS AND TEETH)	1967	600	650	700	750
D5222	IMMEDIATE MANDIBULAR PARTIAL DENTURE - RESIN BASE (INCLUDING RETENTIVE/CLASPING MATERIALS, RESTS AND TEETH)	1978	600	650	700	750
D5223	IMMEDIATE MAXILLARY PARTIAL DENTURE - CAST METAL FRAMEWORK WITH RESIN DENTURE BASES (INCLUDING RETENTIVE/CLASPING	2272	850	900	950	1000
D5224	IMMEDIATE MANDIBULAR PARTIAL DENTURE - CAST METAL FRAMEWORK WITH RESIN DENTURE BASES (INCLUDING RETENTIVE/CLASPIN	2287	850	900	950	1000
D5225	MAXILLARY PARTIAL DENTURE - FLEXIBLE BASE (INCLUDING ANY CLASPS, RESTS AND TEETH)	1988	800	850	900	950
D5226	MANDIBULAR PARTIAL DENTURE - FLEXIBLE BASE (INCLUDING ANY CLASPS, RESTS AND TEETH)	1990	800	850	900	950
D5227	IMMEDIATE MAXILLARY PARTIAL DENTURE-FLEXIBLE BASE (INCLUDING ANY CLASPS, RESTS, AND TEETH)	2068	700	750	800	850
D5228	IMMEDIATE MADIBULAR PARTIAL DENTURE-FLEXIBLE BASE (INCLUDING ANY CLASPS, RESTS, AND TEETH)	2091	700	750	800	850
D5282	REMOVABLE UNILATERAL PARTIAL DENTURE - 1 PIECE CAST METAL (INCLUDING CLASPS AND TEETH), MAXILLARY	1391				
D5283	REMOVABLE UNILATERAL PARTIAL DENTURE - 1 PIECE CAST METAL (INCLUDING CLASPS AND TEETH), MANDIBULAR	1391				
D5284	REMOVABLE UNILATERAL PARTIAL DENTURE - 1 PIECE FLEXIBLE BASE (INCLUDING CLASPS AND TEETH) - PER QUADRANT	1430				
D5286	REMOVABLE UNILATERAL PARTIAL DENTURE - 1 PIECE RESIN (INCLUDING CLASPS AND TEETH) - PER QUADRANT	1455				
D5410	ADJUST COMPLETE DENTURE - MAXILLARY	119	20	30	40	50
D5411	ADJUST COMPLETE DENTURE - MANDIBULAR	119	20	30	40	50
D5421	ADJUST PARTIAL DENTURE - MAXILLARY	118	20	30	40	50
D5422	ADJUST PARTIAL DENTURE - MANDIBULAR	119	20	30	40	50
D5511	REPAIR BROKEN COMPLETE DENTURE BASE, MANDIBULAR	309	120	125	135	140
D5512	REPAIR BROKEN COMPLETE DENTURE BASE, MAXILLARY	307	120	125	135	140
D5520	REPLACE MISSING OR BROKEN TEETH - COMPLETE DENTURE (EACH TOOTH)	261	100	105	110	115
D5611	REPAIR RESIN PARTIAL DENTURE BASE, MANDIBULAR	291	120	125	135	140
D5612	REPAIR RESIN PARTIAL DENTURE BASE, MAXILLARY	292	120	125	135	140
D5621	REPAIR CAST PARTIAL FRAMEWORK, MANDIBULAR	371	100	120	140	160
D5622	REPAIR CAST PARTIAL FRAMEWORK, MAXILLARY	371	100	120	140	160
D5630	REPAIR OR REPLACE BROKEN RETENTIVE CLASPING MATERIALS - PER TOOTH	347	90	100	110	120
D5640	REPLACE BROKEN TEETH - PER TOOTH	261	100	105	110	115
D5650	ADD TOOTH TO EXISTING PARTIAL DENTURE	310	100	105	110	115
D5660	ADD CLASP TO EXISTING PARTIAL DENTURE - PER TOOTH	347	90	100	110	120
D5670	REPLACE ALL TEETH AND ACRYLIC ON CAST METAL FRAMEWORK (MAXILLARY)	937	400	450	500	550
D5671	REPLACE ALL TEETH AND ACRYLIC ON CAST METAL FRAMEWORK (MANDIBULAR)	945	400	450	500	550
D5710	REBASE COMPLETE MAXILLARY DENTURE	756	350	375	400	425
D5711	REBASE COMPLETE MANDIBULAR DENTURE	751	350	375	400	425

D5720	REBASE MAXILLARY PARTIAL DENTURE	720	350	375	400	425
D5721	REBASE MANDIBULAR PARTIAL DENTURE	719	350	375	400	425
D5725	REBASE HYBRID PROSTHESIS	764	350	375	400	425
D5730	RELINE COMPLETE MAXILLARY DENTURE (CHAIRSIDE)	491	70	80	90	100
D5731	RELINE COMPLETE MANDIBULAR DENTURE (CHAIRSIDE)	491	70	80	90	100
D5740	RELINE MAXILLARY PARTIAL DENTURE (CHAIRSIDE)	475	70	80	90	100
D5741	RELINE MANDIBULAR PARTIAL DENTURE (CHAIRSIDE)	475	70	80	90	100
D5750	RELINE COMPLETE MAXILLARY DENTURE (LABORATORY)	601	250	275	300	325
D5751	RELINE COMPLETE MANDIBULAR DENTURE (LABORATORY)	602	250	275	300	325
D5760	RELINE MAXILLARY PARTIAL DENTURE (LABORATORY)	592	250	275	300	325
D5761	RELINE MANDIBULAR PARTIAL DENTURE (LABORATORY)	592	250	275	300	325
D5765	SOFT LINER FOR COMPLETE OR PARTIAL REMOVABLE DENTURE – INDIRECT	683	250	275	300	325
D5810	INTERIM COMPLETE DENTURE (MAXILLARY)	1166	500	550	600	650
D5811	INTERIM COMPLETE DENTURE (MANDIBULAR)	1169	500	550	600	650
D5820	INTERIM PARTIAL DENTURE (MAXILLARY)	878	400	450	500	550
D5821	INTERIM PARTIAL DENTURE (MANDIBULAR)	891	400	450	500	550
D5850	TISSUE CONDITIONING, MAXILLARY	274	50	60	70	80
D5851	TISSUE CONDITIONING, MANDIBULAR	276	50	60	70	80
D5862	PRECISION ATTACHMENT, BY REPORT	874				
D5863	OVERDENTURE - COMPLETE MAXILLARY	2872	850	900	950	1000
D5864	OVERDENTURE - PARTIAL MAXILLARY	2837	750	800	850	900
D5865	OVERDENTURE - COMPLETE MANDIBULAR	2880	850	900	950	1000
D5866	OVERDENTURE - PARTIAL MANDIBULAR	2847	750	800	850	900
D5867	REPLACEMENT OF REPLACEABLE PART OF SEMI-PRECISION OR PRECISION ATTACHMENT (MALE OR FEMALE COMPONENT)	483	100	150	200	250
D5875	MODIFICATION OF REMOVABLE PROSTHESIS FOLLOWING IMPLANT SURGERY	590	200	250	300	350
D5876	ADD METAL SUBSTRUCTURE TO ACRYLIC FULL DENTURE (PER ARCH)	638	300	325	350	375
D6010	SURGICAL PLACEMENT OF IMPLANT BODY - ENDOSTEAL IMPLANT	2342				
D6011	SECOND STAGE IMPLANT SURGERY	877				
D6012	SURGICAL PLACEMENT OF INTERIM IMPLANT BODY FOR TRANSITIONAL PROSTHESIS - ENDOSTEAL IMPLANT	2091				
D6013	SURGICAL PLACEMENT OF MINI IMPLANT	1577				
D6040	SURGICAL PLACEMENT - EPOSTEAL IMPLANT	8750				
D6050	SURGICAL PLACEMENT - TRANSOSTEAL IMPLANT	6459				
D6051	INTERIM ABUTMENT	687				
D6055	CONNECTING BAR - IMPLANT SUPPORTED OR ABUTMENT SUPPORTED	3755				
D6056	PREFABRICATED ABUTMENT - INCLUDES MODIFICATION AND PLACEMENT	924	400	450	500	550
D6057	CUSTOM FABRICATED ABUTMENT - INCLUDES PLACEMENT	1093	500	550	600	650
D6058	ABUTMENT SUPPORTED PORCELAIN/CERAMIC CROWN	1683	675	725	775	825
D6059	ABUTMENT SUPPORTED PORCELAIN FUSED TO METAL CROWN (HIGH NOBLE METAL)	1724	675	725	775	825
D6060	ABUTMENT SUPPORTED PORCELAIN FUSED TO METAL CROWN (PREDOMINANTLY BASE METAL)	1626	675	725	775	825
D6061	ABUTMENT SUPPORTED PORCELAIN FUSED TO METAL CROWN (NOBLE METAL)	1651	675	725	775	825
D6062	ABUTMENT SUPPORTED CAST METAL CROWN (HIGH NOBLE METAL)	1735	675	725	775	825
D6063	ABUTMENT SUPPORTED CAST METAL CROWN (PREDOMINANTLY BASE METAL)	1642	675	725	775	825

D6064	ABUTMENT SUPPORTED CAST METAL CROWN (NOBLE METAL)	1640	675	725	775	825
D6065	IMPLANT SUPPORTED PORCELAIN/CERAMIC CROWN	1840	675	725	775	825
D6066	IMPLANT SUPPORTED CROWN - PORCELAIN FUSED TO HIGH NOBLE ALLOYS	1877	675	725	775	825
D6067	IMPLANT SUPPORTED CROWN - HIGH NOBLE ALLOYS	1905	675	725	775	825
D6068	ABUTMENT SUPPORTED RETAINER FOR PORCELAIN/CERAMIC FPD	1705	675	725	775	825
D6069	ABUTMENT SUPPORTED RETAINER FOR PORCELAIN FUSED TO METAL FPD (HIGH NOBLE METAL)	1702	675	725	775	825
D6070	ABUTMENT SUPPORTED RETAINER FOR PORCELAIN FUSED TO METAL FPD (PREDOMINANTLY BASE METAL)	1683	675	725	775	825
D6071	ABUTMENT SUPPORTED RETAINER FOR PORCELAIN FUSED TO METAL FPD (NOBLE METAL)	1683	675	725	775	825
D6072	ABUTMENT SUPPORTED RETAINER FOR CAST METAL FPD (HIGH NOBLE METAL)	1750	675	725	775	825
D6073	ABUTMENT SUPPORTED RETAINER FOR CAST METAL FPD (PREDOMINANTLY BASE METAL)	1688	675	725	775	825
D6074	ABUTMENT SUPPORTED RETAINER FOR CAST METAL FPD (NOBLE METAL)	1695	675	725	775	825
D6075	IMPLANT SUPPORTED RETAINER FOR CERAMIC FPD	1826	675	725	775	825
D6076	IMPLANT SUPPORTED RETAINER FOR FPD - PORCELAIN FUSED TO HIGH NOBLE ALLOYS	1854	675	725	775	825
D6077	IMPLANT SUPPORTED RETAINER FOR METAL FPD - HIGH NOBLE ALLOYS	1939	675	725	775	825
D6080	IMPLANT MAINTENANCE PROCEDURES WHEN PROSTHESES ARE REMOVED AND REINSERTED, INCLUDING CLEANSING OF PROSTHESES	382	40	45	50	55
D6081	SCALING AND DEBRIDEMENT IN THE PRESENCE OF INFLAMMATION OR MUCOSITIS OF A SINGLE IMPLANT, INCLUDING CLEANING OF THE	328	50	55	60	65
D6082	IMPLANT SUPPORTED CROWN - PORCELAIN FUSED TO PREDOMINANTLY BASE ALLOYS	1894	675	725	775	825
D6083	IMPLANT SUPPORTED CROWN - PORCELAIN FUSED TO NOBLE ALLOYS	1961	675	725	775	825
D6084	IMPLANT SUPPORTED CROWN - PORCELAIN FUSED TO TITANIUM AND TITANIUM ALLOYS	1944	675	725	775	825
D6085	PROVISIONAL IMPLANT CROWN	682	80	100	120	140
D6086	IMPLANT SUPPORTED CROWN - PREDOMINANTLY BASE ALLOYS	1883	675	725	775	825
D6087	IMPLANT SUPPORTED CROWN - NOBLE ALLOYS	1939	675	725	775	825
D6088	IMPLANT SUPPORTED CROWN - TITANIUM AND TITANIUM ALLOYS	1942	675	725	775	825
D6090	REPAIR IMPLANT SUPPORTED PROSTHESIS, BY REPORT	889				
D6091	REPLACEMENT OF SEMI-PRECISION OR PRECISION ATTACHMENT (MALE OR FEMALE COMPONENT) OF IMPLANT/ABUTMENT SUPPORTED	676	500	550	600	650
D6092	RE-CEMENT OR RE-BOND IMPLANT/ABUTMENT SUPPORTED CROWN	200	20	25	30	35
D6093	RE-CEMENT OR RE-BOND IMPLANT/ABUTMENT SUPPORTED FIXED PARTIAL DENTURE	247	20	25	30	35
D6094	ABUTMENT SUPPORTED CROWN - TITANIUM AND TITANIUM ALLOYS	1679	675	725	775	825
D6095	REPAIR IMPLANT ABUTMENT, BY REPORT	855				
D6096	REMOVE BROKEN IMPLANT RETAINING SCREW	657				
D6097	ABUTMENT SUPPORTED CROWN - PORCELAIN FUSED TO TITANIUM AND TITANIUM ALLOYS	1711	675	725	775	825
D6098	IMPLANT SUPPORTED RETAINER - PORCELAIN FUSED TO PREDOMINANTLY BASE ALLOYS	1870	675	725	775	825
D6099	IMPLANT SUPPORTED RETAINER FOR FPD - PORCELAIN FUSED TO NOBLE ALLOYS	1915	675	725	775	825
D6100	IMPLANT REMOVAL, BY REPORT	893				
D6101	DEBRIDEMENT OF A PERI-IMPLANT DEFECT OR DEFECTS SURROUNDING A SINGLE IMPLANT, AND SURFACE CLEANING OF THE EXPOSED	1004				
D6102	DEBRIDEMENT AND OSSEOUS CONTOURING OF A PERI-IMPLANT	1131				
D6103	BONE GRAFT FOR REPAIR OF PERI-IMPLANT DEFECT - DOES NOT INCLUDE FLAP ENTRY AND CLOSURE	894				
D6104	BONE GRAFT AT TIME OF IMPLANT PLACEMENT	862				
D6105	REMOVAL OF IMPLANT BODY NOT REQUIRING BONE REMOVAL OR FLAP ELEVATION	405				
D6106	GUIDED TISSUE REGENERATION-RESORBABLE BARRIER, PER IMPLANT	884				
D6107	GUIDED TISSUE REGENERATION- NON-RESORBABLE BARRIER, PER IMPLANT	1093				
D6110	IMPLANT/ABUTMENT SUPPORTED REMOVABLE DENTURE FOR EDENTULOUS ARCH - MAXILLARY	4003				

D6111	IMPLANT/ABUTMENT SUPPORTED REMOVABLE DENTURE FOR EDENTULOUS ARCH - MANDIBULAR	3968				
D6112	IMPLANT/ABUTMENT SUPPORTED REMOVABLE DENTURE FOR PARTIALLY EDENTULOUS ARCH - MAXILLARY	3550				
D6113	IMPLANT/ABUTMENT SUPPORTED REMOVABLE DENTURE FOR PARTIALLY EDENTULOUS ARCH - MANDIBULAR	3612				
D6114	IMPLANT/ABUTMENT SUPPORTED FIXED DENTURE FOR EDENTULOUS ARCH - MAXILLARY	13468				
D6115	IMPLANT/ABUTMENT SUPPORTED FIXED DENTURE FOR EDENTULOUS ARCH - MANDIBULAR	13419				
D6116	IMPLANT/ABUTMENT SUPPORTED FIXED DENTURE FOR PARTIALLY EDENTULOUS ARCH - MAXILLARY	8090				
D6117	IMPLANT/ABUTMENT SUPPORTED FIXED DENTURE FOR PARTIALLY EDENTULOUS ARCH - MANDIBULAR	8288				
D6118	IMPLANT/ABUTMENT SUPPORTED INTERIM FIXED DENTURE FOR EDENTULOUS ARCH - MANDIBULAR	4495				
D6119	IMPLANT/ABUTMENT SUPPORTED INTERIM FIXED DENTURE FOR EDENTULOUS ARCH - MAXILLARY	4508				
D6120	IMPLANT SUPPORTED RETAINER - PORCELAIN FUSED TO TITANIUM AND TITANIUM ALLOYS	1939				
D6121	IMPLANT SUPPORTED RETAINER FOR METAL FPD - PREDOMINANTLY BASE ALLOYS	1904				
D6122	IMPLANT SUPPORTED RETAINER FOR METAL FPD - NOBLE ALLOYS	1944				
D6123	IMPLANT SUPPORTED RETAINER FOR METAL FPD - TITANIUM AND TITANIUM ALLOYS	1996				
D6190	RADIOGRAPHIC/SURGICAL IMPLANT INDEX, BY REPORT	549				
D6191	SEMI-PRECISION ABUTMENT-PLACEMENT	824	400	450	500	550
D6192	SEMI-PRECISION ATTACHMENT-PLACEMENT	765	400	450	500	550
D6194	ABUTMENT SUPPORTED RETAINER CROWN FOR FPD - TITANIUM AND TITANIUM ALLOYS	1736				
D6195	ABUTMENT SUPPORTED RETAINER - PORCELAIN FUSED TO TITANIUM AND TITANIUM ALLOYS	1813				
D6197	REPLACMENT OF RESTORATIVE MATERIAL USED TO CLOSE AN ACCESS OPENING OF A SCREW-RETAINED IMPLANT SUPPORTED PROST	253				
D6198	REMOVE INTERIM IMPLANT COMPONENT	359				
D6199	UNSPECIFIED IMPLANT PROCEDURE, BY REPORT	992				
D6205	PONTIC - INDIRECT RESIN BASED COMPOSITE	1248	575	625	675	725
D6210	PONTIC - CAST HIGH NOBLE METAL	1427	575	625	675	725
D6211	PONTIC - CAST PREDOMINANTLY BASE METAL	1340	575	625	675	725
D6212	PONTIC - CAST NOBLE METAL	1362	575	625	675	725
D6214	PONTIC - TITANIUM AND TITANIUM ALLOYS	1402	575	625	675	725
D6240	PONTIC - PORCELAIN FUSED TO HIGH NOBLE METAL	1444	575	625	675	725
D6241	PONTIC - PORCELAIN FUSED TO PREDOMINANTLY BASE METAL	1353	575	625	675	725
D6242	PONTIC - PORCELAIN FUSED TO NOBLE METAL	1386	575	625	675	725
D6243	PONTIC - PORCELAIN FUSED TO TITANIUM AND TITANIUM ALLOYS	1508	575	625	675	725
D6245	PONTIC - PORCELAIN/CERAMIC	1427	575	625	675	725
D6250	PONTIC - RESIN WITH HIGH NOBLE METAL	1369	575	625	675	725
D6251	PONTIC - RESIN WITH PREDOMINANTLY BASE METAL	1316	575	625	675	725
D6252	PONTIC - RESIN WITH NOBLE METAL	1335	575	625	675	725
D6253	PROVISIONAL PONTIC - FURTHER TREATMENT OR COMPLETION OF DIAGNOSIS NECESSARY PRIOR TO FINAL IMPRESSION	867	80	100	120	140
D6545	RETAINER - CAST METAL FOR RESIN BONDED FIXED PROSTHESIS	1170	575	625	675	725
D6548	RETAINER - PORCELAIN/CERAMIC FOR RESIN BONDED FIXED PROSTHESIS	1235	575	625	675	725
D6549	RETAINER - FOR RESIN BONDED FIXED PROSTHESIS	1216	575	625	675	725
D6600	RETAINER INLAY - PORCELAIN/CERAMIC, 2 SURFACES	1267	575	625	675	725
D6601	RETAINER INLAY - PORCELAIN/CERAMIC, 3 OR MORE SURFACES	1335	575	625	675	725
D6602	RETAINER INLAY - CAST HIGH NOBLE METAL, 2 SURFACES	1269	575	625	675	725
D6603	RETAINER INLAY - CAST HIGH NOBLE METAL, 3 OR MORE SURFACES	1297	575	625	675	725

D6604	RETAINER INLAY - CAST PREDOMINANTLY BASE METAL, 2 SURFACES	1254	575	625	675	725
D6605	RETAINER INLAY - CAST PREDOMINANTLY BASE METAL, 3 OR MORE SURFACES	1284	575	625	675	725
D6606	RETAINER INLAY - CAST NOBLE METAL, 2 SURFACES	1276	575	625	675	725
D6607	RETAINER INLAY - CAST NOBLE METAL, 3 OR MORE SURFACES	1328	575	625	675	725
D6608	RETAINER ONLAY - PORCELAIN/CERAMIC, 2 SURFACES	1312	575	625	675	725
D6609	RETAINER ONLAY - PORCELAIN/CERAMIC, 3 OR MORE SURFACES	1377	575	625	675	725
D6610	RETAINER ONLAY - CAST HIGH NOBLE METAL, 2 SURFACES	1319	575	625	675	725
D6611	RETAINER ONLAY - CAST HIGH NOBLE METAL, 3 OR MORE SURFACES	1388	575	625	675	725
D6612	RETAINER ONLAY - CAST PREDOMINANTLY BASE METAL, 2 SURFACES	1302	575	625	675	725
D6613	RETAINER ONLAY - CAST PREDOMINANTLY BASE METAL, 3 OR MORE SURFACES	1342	575	625	675	725
D6614	RETAINER ONLAY - CAST NOBLE METAL, 2 SURFACES	1325	575	625	675	725
D6615	RETAINER ONLAY - CAST NOBLE METAL, 3 OR MORE SURFACES	1374	575	625	675	725
D6624	RETAINER INLAY - TITANIUM	1308	575	625	675	725
D6634	RETAINER ONLAY - TITANIUM	1362	575	625	675	725
D6710	RETAINER CROWN - INDIRECT RESIN BASED COMPOSITE	1278	575	625	675	725
D6720	RETAINER CROWN - RESIN WITH HIGH NOBLE METAL	1351	575	625	675	725
D6721	RETAINER CROWN - RESIN WITH PREDOMINANTLY BASE METAL	1307	575	625	675	725
D6722	RETAINER CROWN - RESIN WITH NOBLE METAL	1320	575	625	675	725
D6740	RETAINER CROWN - PORCELAIN/CERAMIC	1445	575	625	675	725
D6750	RETAINER CROWN - PORCELAIN FUSED TO HIGH NOBLE METAL	1453	575	625	675	725
D6751	RETAINER CROWN - PORCELAIN FUSED TO PREDOMINANTLY BASE METAL	1351	575	625	675	725
D6752	RETAINER CROWN - PORCELAIN FUSED TO NOBLE METAL	1375	575	625	675	725
D6753	RETAINER CROWN - PORCELAIN FUSED TO TITANIUM AND TITANIUM ALLOYS	1475	575	625	675	725
D6780	RETAINER CROWN - 3/4 CAST HIGH NOBLE METAL	1401	575	625	675	725
D6781	RETAINER CROWN - 3/4 CAST PREDOMINANTLY BASE METAL	1341	575	625	675	725
D6782	RETAINER CROWN - 3/4 CAST NOBLE METAL	1369	575	625	675	725
D6783	RETAINER CROWN - 3/4 PORCELAIN/CERAMIC	1408	575	625	675	725
D6784	RETAINER CROWN 3/4 - TITANIUM AND TITANIUM ALLOYS	1484	575	625	675	725
D6790	RETAINER CROWN - FULL CAST HIGH NOBLE METAL	1444	575	625	675	725
D6791	RETAINER CROWN - FULL CAST PREDOMINANTLY BASE METAL	1324	575	625	675	725
D6792	RETAINER CROWN - FULL CAST NOBLE METAL	1355	575	625	675	725
D6793	PROVISIONAL RETAINER CROWN - FURTHER TREATMENT OR COMPLETION OF DIAGNOSIS NECESSARY PRIOR TO FINAL IMPRESSION	698	80	100	120	140
D6794	RETAINER CROWN - TITANIUM AND TITANIUM ALLOYS	1371	575	625	675	725
D6920	CONNECTOR BAR	1325	500	550	600	650
D6930	RE-CEMENT OR RE-BOND FIXED PARTIAL DENTURE	230	20	25	30	35
D6940	STRESS BREAKER	526	200	225	250000	275
D6950	PRECISION ATTACHMENT	814	300	325	350	400
D6980	FIXED PARTIAL DENTURE REPAIR NECESSITATED BY RESTORATIVE MATERIAL FAILURE	486				
D6985	PEDIATRIC PARTIAL DENTURE, FIXED	1036				
D6999	UNSPECIFIED FIXED PROSTHODONTIC PROCEDURE, BY REPORT	787				
D7111	EXTRACTION, CORONAL REMNANTS - PRIMARY TOOTH	178	45	50	55	60
D7140	EXTRACTION, ERUPTED TOOTH OR EXPOSED ROOT (ELEVATION AND/OR FORCEPS REMOVAL)	260	45	50	55	60

D7210	EXTRACTION, ERUPTED TOOTH REQUIRING REMOVAL OF BONE AND/OR SECTIONING OF TOOTH, AND INCLUDING ELEVATION OF MUCOP	375	45	50	55	60
D7220	REMOVAL OF IMPACTED TOOTH - SOFT TISSUE	415	45	50	55	60
D7230	REMOVAL OF IMPACTED TOOTH - PARTIALLY BONY	510				
D7240	REMOVAL OF IMPACTED TOOTH - COMPLETELY BONY	623				
D7241	REMOVAL OF IMPACTED TOOTH - COMPLETELY BONY, WITH UNUSUAL SURGICAL COMPLICATIONS	716				
D7250	REMOVAL OF RESIDUAL TOOTH ROOTS (CUTTING PROCEDURE)	401	45	50	55	60
D7251	CORONECTOMY - INTENTIONAL PARTIAL TOOTH REMOVAL	582	45	50	55	60
D7260	OROANTRAL FISTULA CLOSURE	1573				
D7261	PRIMARY CLOSURE OF A SINUS PERFORATION	962				
D7270	TOOTH REIMPLANTATION AND/OR STABILIZATION OF ACCIDENTALLY EVULSED OR DISPLACED TOOTH	703				
D7272	TOOTH TRANSPLANTATION (INCLUDES REIMPLANTATION FROM ONE SITE TO ANOTHER AND SPLINTING AND/OR STABILIZATION)	903				
D7280	EXPOSURE OF AN UNERUPTED TOOTH	634				
D7282	MOBILIZATION OF ERUPTED OR MALPOSITIONED TOOTH TO AID ERUPTION	609				
D7283	PLACEMENT OF DEVICE TO FACILITATE ERUPTION OF IMPACTED TOOTH	591				
D7285	INCISIONAL BIOPSY OF ORAL TISSUE-HARD (BONE, TOOTH)	674				
D7286	INCISIONAL BIOPSY OF ORAL TISSUE-SOFT	456				
D7287	EXFOLIATIVE CYTOLOGICAL SAMPLE COLLECTION	273				
D7288	BRUSH BIOPSY - TRANSEPITHELIAL SAMPLE COLLECTION	264				
D7291	TRANSSEPTAL FIBEROTOMY/SUPRA CRESTAL FIBEROTOMY, BY REPORT	389				
D7295	HARVEST OF BONE FOR USE IN AUTOGENOUS GRAFTING PROCEDURE	1264				
D7296	CORTICOTOMY - 1 TO 3 TEETH OR TOOTH SPACES, PER QUADRANT	1259				
D7297	CORTICOTOMY - 4 OR MORE TEETH OR TOOTH SPACES, PER QUADRANT	1600				
D7310	ALVEOLOPLASTY IN CONJUNCTION WITH EXTRACTIONS - 4 OR MORE TEETH OR TOOTH SPACES, PER QUADRANT	403	60	70	80	90
D7311	ALVEOLOPLASTY IN CONJUNCTION WITH EXTRACTIONS - 1 TO 3 TEETH OR TOOTH SPACES, PER QUADRANT	397	60	70	80	90
D7320	ALVEOLOPLASTY NOT IN CONJUNCTION WITH EXTRACTIONS - 4 OR MORE TEETH OR TOOTH SPACES, PER QUADRANT	572	90	100	110	120
D7321	ALVEOLOPLASTY NOT IN CONJUNCTION WITH EXTRACTIONS - 1 TO 3 TEETH OR TOOTH SPACES, PER QUADRANT	523	90	100	110	120
D7410	EXCISION OF BENIGN LESION UP TO 1.25 CM	555				
D7411	EXCISION OF BENIGN LESION GREATER THAN 1.25 CM	848				
D7450	REMOVAL OF BENIGN ODONTOGENIC CYST OR TUMOR - LESION DIAMETER UP TO 1.25 CM	793				
D7451	REMOVAL OF BENIGN ODONTOGENIC CYST OR TUMOR - LESION DIAMETER GREATER THAN 1.25 CM	1152				
D7460	REMOVAL OF BENIGN NON-ODONTOGENIC CYST OR TUMOR - LESION DIAMETER UP TO 1.25 CM	766				
D7461	REMOVAL OF BENIGN NON-ODONTOGENIC CYST OR TUMOR - LESION DIAMETER GREATER THAN 1.25 CM	1197				
D7465	DESTRUCTION OF LESION(S) BY PHYSICAL OR CHEMICAL METHOD, BY REPORT	504				
D7471	REMOVAL OF LATERAL EXOSTOSIS (MAXILLA OR MANDIBLE)	962				
D7472	REMOVAL OF TORUS PALATINUS	1127	250	300	350	400
D7473	REMOVAL OF TORUS MANDIBULARIS	1096	250	300	350	400
D7485	REDUCTION OF OSSEOUS TUBEROSITY	1050				
D7490	RADICAL RESECTION OF MAXILLA OR MANDIBLE	9201				
D7509	MARSUPIALIZATION OF ODONTOGENIC CYST	-				
D7510	INCISION AND DRAINAGE OF ABSCESS - INTRAORAL SOFT TISSUE	323	70	80	90	100
D7511	INCISION AND DRAINAGE OF ABSCESS - INTRAORAL SOFT TISSUE - COMPLICATED (INCLUDES DRAINAGE OF MULTIPLE FASCIAL SPACES	466	70	80	90	100
D7520	INCISION AND DRAINAGE OF ABSCESS - EXTRAORAL SOFT TISSUE	644	70	80	90	100

D7521	INCISION AND DRAINAGE OF ABSCESS - EXTRAORAL SOFT TISSUE - COMPLICATED (INCLUDES DRAINAGE OF MULTIPLE FASCIAL SPACES	819	70	80	90	100
D7530	REMOVAL OF FOREIGN BODY FROM MUCOSA, SKIN, OR SUBCUTANEOUS ALVEOLAR TISSUE	449				
D7880	OCCLUSAL ORTHOTIC DEVICE, BY REPORT	1252				
D7881	OCCLUSAL ORTHOTIC DEVICE ADJUSTMENT	239				
D7899	UNSPECIFIED TMD THERAPY, BY REPORT	628				
D7910	SUTURE OF RECENT SMALL WOUNDS UP TO 5 CM	373				
D7922	PLACEMENT OF INTRA-SOCKET BIOLOGICAL DRESSING TO AID IN HEMOSTASIS OR CLOT STABILIZATION, PER SITE	152				
D7940	OSTEOPLASTY - FOR ORTHOGNATHIC DEFORMITIES	4810				
D7941	OSTEOTOMY - MANDIBULAR RAMI	10390				
D7943	OSTEOTOMY - MANDIBULAR RAMI WITH BONE GRAFT; INCLUDES OBTAINING THE GRAFT	9886				
D7944	OSTEOTOMY - SEGMENTED OR SUBAPICAL	8269				
D7945	OSTEOTOMY - BODY OF MANDIBLE	8615				
D7951	SINUS AUGMENTATION WITH BONE OR BONE SUBSTITUTES VIA A LATERAL OPEN APPROACH	3395				
D7952	SINUS AUGMENTATION VIA A VERTICAL APPROACH	2141				
D7953	BONE REPLACEMENT GRAFT FOR RIDGE PRESERVATION - PER SITE	804				
D7955	REPAIR OF MAXILLOFACIAL SOFT AND/OR HARD TISSUE DEFECT	3867				
D7956	GUIDED TISSUE REGENERATION, EDENTULOUS AREA-RESORBABLE BARRIER, PER SITE	812				
D7957	GUIDED TISSUE REGENERATION, EDENTULOUS AREA-NON-RESORBABLE BARRIER, PER SITE	900				
D7961	BUCCAL/LABIAL FRENECTOMY (FRENULECTOMY)	585	115	165	215	265
D7962	LINGUAL FRENECTOMY (FRENULECTOMY)	586	115	165	215	265
D7963	FRENULOPLASTY	646				
D7970	EXCISION OF HYPERPLASTIC TISSUE - PER ARCH	624				
D7971	EXCISION OF PERICORONAL GINGIVA	346				
D7972	SURGICAL REDUCTION OF FIBROUS TUBEROSITY	902				
D7979	NON-SURGICAL SIALOLITHOTOMY	763				
D7980	SURGICAL SIALOLITHOTOMY	1035				
D7997	APPLIANCE REMOVAL (NOT BY DENTIST WHO PLACED APPLIANCE), INCLUDES REMOVAL OF ARCHBAR	420				
D8010	LIMITED ORTHODONTIC TREATMENT OF THE PRIMARY DENTITION	2975				
D8020	LIMITED ORTHODONTIC TREATMENT OF THE TRANSITIONAL DENTITION	3264				
D8030	LIMITED ORTHODONTIC TREATMENT OF THE ADOLESCENT DENTITION	3780				
D8040	LIMITED ORTHODONTIC TREATMENT OF THE ADULT DENTITION	4061				
D8070	COMPREHENSIVE ORTHODONTIC TREATMENT OF THE TRANSITIONAL DENTITION	5700				
D8080	COMPREHENSIVE ORTHODONTIC TREATMENT OF THE ADOLESCENT DENTITION	5700				
D8090	COMPREHENSIVE ORTHODONTIC TREATMENT OF THE ADULT DENTITION	5700				
D8210	REMOVABLE APPLIANCE THERAPY	1169				
D8220	FIXED APPLIANCE THERAPY	490				
D8660	PRE-ORTHODONTIC TREATMENT EXAMINATION TO MONITOR GROWTH AND DEVELOPMENT	348				
D8670	PERIODIC ORTHODONTIC TREATMENT VISIT	-				
D8680	ORTHODONTIC RETENTION (REMOVAL OF APPLIANCES, CONSTRUCTION AND PLACEMENT OF RETAINER(S))	572	15	20	25	30
D8681	REMOVABLE ORTHODONTIC RETAINER ADJUSTMENT	254	5	10	15	20
D8695	REMOVAL OF FIXED ORTHODONTIC APPLIANCES FOR REASONS OTHER THAN COMPLETION OF TREATMENT	344	50	60	70	80
D8696	REPAIR OF ORTHODONTIC APPLIANCE - MAXILLARY	297				

D8697	REPAIR OF ORTHODONTIC APPLIANCE - MANDIBULAR	292				
D8698	RE-CEMENT OR RE-BOND FIXED RETAINER - MAXILLARY	320	20	25	30	35
D8699	RE-CEMENT OR RE-BOND FIXED RETAINER - MANDIBULAR	318	20	25	30	35
D8701	REPAIR OF FIXED RETAINER, INCLUDES REATTACHMENT - MAXILLARY	355				
D8702	REPAIR OF FIXED RETAINER, INCLUDES REATTACHMENT - MANDIBULAR	356				
D8703	REPLACEMENT OF LOST OR BROKEN RETAINER - MAXILLARY	361				
D8704	REPLACEMENT OF LOST OR BROKEN RETAINER - MANDIBULAR	361				
D8999	UNSPECIFIED ORTHODONTIC PROCEDURE, BY REPORT	518				
D9110	PALLIATIVE (EMERGENCY) TREATMENT OF DENTAL PAIN - MINOR PROCEDURE	175	35	50	65	80
D9120	FIXED PARTIAL DENTURE SECTIONING	282	50	55	60	65
D9130	TEMPOROMANDIBULAR JOINT DYSFUNCTION - NON-INVASIVE PHYSICAL THERAPIES	322				
D9210	LOCAL ANESTHESIA NOT IN CONJUNCTION WITH OPERATIVE OR SURGICAL PROCEDURES	93	10	20	30	40
D9211	REGIONAL BLOCK ANESTHESIA	109	10	20	30	40
D9212	TRIGEMINAL DIVISION BLOCK ANESTHESIA	297				
D9215	LOCAL ANESTHESIA IN CONJUNCTION WITH OPERATIVE OR SURGICAL PROCEDURES	79	10	20	30	40
D9219	EVALUATION FOR MODERATE SEDATION, DEEP SEDATION OR GENERAL ANESTHESIA	130				
D9222	DEEP SEDATION/GENERAL ANESTHESIA - FIRST 15 MINUTES	312				
D9223	DEEP SEDATION/GENERAL ANESTHESIA - EACH SUBSEQUENT 15 MINUTE INCREMENT	296				
D9230	INHALATION OF NITROUS OXIDE/ANALGESIA, ANXIOLYSIS	111	20	30	40	50
D9239	INTRAVENOUS MODERATE (CONSCIOUS) SEDATION/ANALGESIA - FIRST 15 MINUTES	317				
D9243	INTRAVENOUS MODERATE (CONSCIOUS) SEDATION/ANALGESIA - EACH SUBSEQUENT 15 MINUTE INCREMENT	300				
D9248	NON-INTRAVENOUS CONSCIOUS SEDATION	378				
D9310	CONSULTATION - DIAGNOSTIC SERVICE PROVIDED BY DENTIST OR PHYSICIAN OTHER THAN REQUESTING DENTIST OR PHYSICIAN	171				
D9311	CONSULTATION WITH A MEDICAL HEALTH CARE PROFESSIONAL	223				
D9410	HOUSE/EXTENDED CARE FACILITY CALL	298				
D9420	HOSPITAL OR AMBULATORY SURGICAL CENTER CALL	395				
D9430	OFFICE VISIT FOR OBSERVATION (DURING REGULARLY SCHEDULED HOURS) - NO OTHER SERVICES PERFORMED	103				
D9440	OFFICE VISIT - AFTER REGULARLY SCHEDULED HOURS	234				
D9450	CASE PRESENTATION, DETAILED AND EXTENSIVE TREATMENT PLANNING	207				
D9610	THERAPEUTIC PARENTERAL DRUG, SINGLE ADMINISTRATION	132				
D9612	THERAPEUTIC PARENTERAL DRUGS, 2 OR MORE ADMINISTRATIONS, DIFFERENT MEDICATIONS	225				
D9613	INFILTRATION OF SUSTAINED RELEASE THERAPEUTIC DRUG - SINGLE OR MULTIPLE SITES	234				
D9630	DRUGS OR MEDICAMENTS DISPENSED IN THE OFFICE FOR HOME USE	50				
D9910	APPLICATION OF DESENSITIZING MEDICAMENT	78	10	15	20	25
D9911	APPLICATION OF DESENSITIZING RESIN FOR CERVICAL AND/OR ROOT SURFACE, PER TOOTH	95				
D9912	PRE-VISIT PATIENT SCREENING	152				
D9920	BEHAVIOR MANAGEMENT, BY REPORT	189	5	10	15	20
D9930	TREATMENT OF COMPLICATIONS (POST-SURGICAL) - UNUSUAL CIRCUMSTANCES, BY REPORT	157	10	15	20	25
D9932	CLEANING AND INSPECTION OF REMOVABLE COMPLETE DENTURE, MAXILLARY	111	5	10	15	20
D9933	CLEANING AND INSPECTION OF REMOVABLE COMPLETE DENTURE, MANDIBULAR	111	5	10	15	20
D9934	CLEANING AND INSPECTION OF REMOVABLE PARTIAL DENTURE, MAXILLARY	105	5	10	15	20
D9935	CLEANING AND INSPECTION OF REMOVABLE PARTIAL DENTURE, MANDIBULAR	104	5	10	15	20

D9941	FABRICATION OF ATHLETIC MOUTHGUARD	332	50	60	70	80
D9942	REPAIR AND/OR RELINE OF OCCLUSAL GUARD	308				
D9943	OCCLUSAL GUARD ADJUSTMENT	159	10	15	20	25
D9944	OCCLUSAL GUARD - HARD APPLIANCE, FULL ARCH	713	350	375	400	425
D9945	OCCLUSAL GUARD - SOFT APPLIANCE, FULL ARCH	624	350	375	400	425
D9946	OCCLUSAL GUARD - HARD APPLIANCE, PARTIAL ARCH	656	350	375	400	425
D9950	OCCLUSION ANALYSIS - MOUNTED CASE	459				
D9951	OCCLUSAL ADJUSTMENT - LIMITED	239	10	15	20	25
D9952	OCCLUSAL ADJUSTMENT - COMPLETE	807				
D9953	RELINE CUSTOM SLEEP APNEA APPLIANCE (INDIRECT)	463				
D9961	DUPLICATE/COPY PATIENT'S RECORDS	134				
D9970	ENAMEL MICROABRASION	255				
D9971	ODONTOPLASTY 1 TO 2 TEETH; INCLUDES REMOVAL OF ENAMEL PROJECTIONS	215				
D9972	EXTERNAL BLEACHING - PER ARCH - PERFORMED IN OFFICE	404				
D9973	EXTERNAL BLEACHING - PER TOOTH	286				
D9974	INTERNAL BLEACHING - PER TOOTH	353				
D9975	EXTERNAL BLEACHING FOR HOME APPLICATION, PER ARCH; INCLUDES MATERIALS AND FABRICATION OF CUSTOM TRAYS W 2 SYRINGE	350	100	125	150	175
D9985	SALES TAX	0				
D9986	MISSED APPOINTMENT	68				
D9987	CANCELLED APPOINTMENT	75				
D9990	CERTIFIED TRANSLATION OR SIGN-LANGUAGE SERVICES - PER VISIT	0				
D9991	DENTAL CASE MANAGEMENT - ADDRESSING APPOINTMENT COMPLIANCE BARRIERS	100	0	0	0	0
D9992	DENTAL CASE MANAGEMENT - CARE COORDINATION	100	0	0	0	0
D9993	DENTAL CASE MANAGEMENT - MOTIVATIONAL INTERVIEWING	100	0	0	0	0
D9994	DENTAL CASE MANAGEMENT - PATIENT EDUCATION TO IMPROVE ORAL HEALTH LITERACY	100	0	0	0	0
D9995	TELEDENTISTRY - SYNCHRONOUS; REAL-TIME ENCOUNTER	290	30	35	40	45
D9996	TELEDENTISTRY - ASYNCHRONOUS; INFORMATION STORED AND FORWARDED TO DENTIST FOR SUBSEQUENT REVIEW	160	30	35	40	45
D9997	DENTAL CASE MANAGEMENT - PATIENTS WITH SPECIAL HEALTH CARE NEEDS	165	20	25	30	35
D9998	DENTURE IN-PROCESS	0				
D9999	UNSPECIFIED ADJUNCTIVE PROCEDURE, BY REPORT	250	0	0	0	0
D0396	3D printing of a dental model	400				
D0704	3D photography image large occlusal view	240				
D0801	3D dental surface scan - direct	240	30	40	50	60
D0802	3D dental surface scan - indirect	135	20	30	40	50
D2956	Removal of indirect restoration on a natural tooth	85				
D2957	Each + prefab post - same tooth	257	40	50	60	70
D2976	Band Stabilization - per tooth	364	65	75	85	95
D2989	Excavation of tooth- determination of nonrestorability	277	45	55	65	75
D2991	Application of hydroxyapatite medicine/ Curodont code - tooth	111	10	15	20	25
D3450	Root Amputation - per root	350	100	150	200	250
D5899	**Unspecified removable prosthodontic procedure, by report**	1334				
D6089	**Accessing and retorquing of a loose implant screw**	271				

D6180	**Implant maintenance procedures when a full-arch fixed hybrid prosthesis is not removed**	251				
D6193	Replacement of Implant Screw- price for each implant	300	100	110	120	130
D6280	Removable Implant maintenance procedure	300	40	45	50	55
D7300	**Removal of Temporary Anchorage Device Without Surgical Flap**	800				
D8210	**Removable Appliance Therapy**	1022				
D9938	Fab Custom Removable Clear Temp Aesthetic Appl- fabrication with a false tooth	382	100	125	150	175
D9939	Placement Custom Removable Clear Temp Aesthetic Appl	309	50	75	100	125
D9947	Custom sleep apnea appliance fab and place- OAT	2254	700	750	800	850
D9948	**Adjust sleep apnea appliance**	187				
D9949	**Repair of a custom sleep apnea appliance**	392				
D9954	Delivery of an Oral Appliance Therapy (OAT) morning repositioning device	120				
D9955	OAT titration visit, where the patient returns post-delivery	120				
D9957	Assessment for sleep-related breathing disorders	80				
D9959	**Unspec sleep ap procedure**	120				