

# ADULT DENTAL PLAN

April 1, 2016

## General Dentist DIAGNOSTIC SECTION

### EXAMINATIONS

85501 - Limited oral (new patient)	40.83	8.17	12.25	16.33	20.42
85503 - Emergency (Remarks Code required)	49.45	9.89	14.84	19.78	24.73

### RADIOGRAPHS

#### Bitewing

85507 - One (see Preamble)	19.64	3.93	5.89	7.86	9.82
85509 - Two (see Preamble)	25.74	5.15	7.72	10.30	12.87

#### Periapical

85511 - One (Remarks Code required)	19.64	3.93	5.89	7.86	9.82
85512 - Two (Remarks Code required)	25.74	5.15	7.72	10.30	12.87

#### Panoramic

85513 - One (Restricted to Oral Surgeon) (Remarks Code required)					
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### RESTORATIVE SECTION

85514 - Removal of carious lesion or existing restoration and the placement of sedative/protective dressing when not done the same day or within 42 days of the subsequent final restoration	91.19	18.24	27.36	36.48	45.60
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### DENTAL RESTORATIONS

#### Primary Canine and Molar Teeth

85515 - One surface	86.34	17.27	25.90	34.54	43.17
85517 - Two surface	126.44	25.29	37.93	50.58	63.22
85519 - Three surface	147.11	29.42	44.13	58.84	73.56
85521 - Four surface	178.32	35.66	53.50	71.33	89.16

#### Permanent Anteriors and Premolars

85523 - One surface	113.64	22.73	34.09	45.46	56.82
85525 - Two surface	152.12	30.42	45.64	60.85	76.06
85527 - Three surface	175.68	35.14	52.70	70.27	87.84
85529 - Four surface or more	227.58	45.52	68.27	91.03	113.79

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### Permanent Molars - Amalgam Fillings

85531 - One surface	94.24	18.85	28.27	37.70	47.12
85533 - Two surface	129.46	25.89	38.84	51.78	64.73
85535 - Three surface	172.72	34.54	51.82	69.09	86.36
85537 - Four surface	204.73	40.95	61.42	81.89	102.37
85539 - Five surface	240.33	48.07	72.10	96.13	120.17

### Permanent Molars - Tooth Colored Bonded Fillings

85541 - One surface	130.96	26.19	39.29	52.38	65.48
85543 - Two surface	184.83	36.97	55.45	73.93	92.42
85545 - Three surface	230.45	46.09	69.14	92.18	115.23
85547 - Four surface	278.93	55.79	83.68	111.57	139.47
85549 - Five surface	321.49	64.30	96.45	128.60	160.75

### Retentive Pins

85551 - One pin	23.92	4.78	7.18	9.57	11.96
85553 - Two or more pins	37.78	7.56	11.33	15.11	18.89

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### ORAL SURGERY SECTION

#### REMOVALS

85555 - Single tooth removal, uncomplicated	103.35	20.67	31.01	41.34	51.68
85557 - Each additional tooth removed in the same quadrant	73.83	14.77	22.15	29.53	36.92
85559 - Odontectomy, surgical approach, requiring surgical flap and/or sectioning of tooth (Except for third molar impactions, in which case the Surgical Dental Schedule should be used, noting the applicable restrictions)	201.54	40.31	60.46	80.62	100.77

#### PROSTHODONTICS REMOVABLE

##### DENTIST:

##### Complete Dentures, Standard

85561 - Denture: complete, upper Including laboratory fees	750.00	150.00	225.00	300.00	375.00
85562 - Denture: complete, lower Including laboratory fees	750.00	150.00	225.00	300.00	375.00
85564 - Denture complete reline, upper Including laboratory fees	211.00	42.20	63.30	84.40	105.50
85565 - Denture complete reline, lower Including laboratory fees	211.00	42.20	63.30	84.40	105.50
85566 - Denture immediate post extraction Insertion including laboratory fees	532.00	106.40	159.60	212.80	266.00
85567 - Repairs - \$42/15 minutes to maximum of \$128 including laboratory fees – per denture					

#### PARTIAL DENTURES

85568 - Denture: partial – upper Including laboratory fees	503.00	100.60	150.90	201.20	251.50
85569 - Denture: partial – lower Including laboratory fees	503.00	100.60	150.90	201.20	251.50
85570 - Denture: partial reline – upper Including laboratory fees	211.00	42.20	63.30	84.40	105.50

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85571 - Denture: partial reline— lower Including laboratory fees	211.00	42.20	63.30	84.40	105.50
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85572 - Repairs - \$42/15 minutes to maximum of  
\$128 including laboratory fees – per denture

### DENTURIST:

#### Complete Dentures, Standard

85573 - Denture: complete, upper Including laboratory fees	750.00	150.00	225.00	300.00	375.00
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85574 - Denture: complete, lower Including laboratory fees	750.00	150.00	225.00	300.00	375.00
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85576 – Denture: complete, reline, upper Including laboratory fees	211.00	42.20	63.30	84.40	105.50
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85577 - Denture complete, reline- lower Including laboratory fees	211.00	42.20	63.30	84.40	105.50
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85578 - Repairs - \$42/15 minutes to maximum of  
\$98 including laboratory fees

### PARTIAL DENTURES

85579 - Denture: partial – upper Including laboratory fees	503.00	100.60	150.90	201.20	251.50
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85580 - Denture: partial – lower Including laboratory fees	503.00	100.60	150.90	201.20	251.50
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85581 - Denture: partial reline – upper Including laboratory fees	211.00	42.20	63.30	84.40	105.50
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85582 - Denture: partial reline— lower Including laboratory fees	211.00	42.20	63.30	84.40	105.50
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85583 - Repairs - \$42/15 minutes to maximum of  
\$98 including laboratory fees