

**CHILDREN'S DENTAL HEALTH PLAN**

**GENERAL PRACTITIONERS**

High Freq. Code	Code	Description	100%	20%	30%	40%	50%
86050		Laboratory Fee (see Preamble)					
<b><u>BASIC SERVICES</u></b>							
<b>DIAGNOSTIC SECTION</b>							
<b>CONSULTATIONS</b> (See definition in Preamble)							
86100		Consultation (Prior Approval Required) Examination and Diagnosis, Surgical, General (a) History, Medical and Dental (b) Clinical Examination as below, may include in-depth analysis of medical status, medication, anaesthetic and surgical risk, initial consultation with referring dentist or physician, parent or guardian, evaluation or source of chief complaint, evaluation of pulpal vitality, mobility of teeth, occlusal factors, TMJ, or where the patient is to be admitted to hospital for dental procedures					
86101		Surgical, Specific (Prior Approval required)					
<b>EXAMINATIONS</b>							
01	86110	Limited oral (recall patient) .....	39.37	7.87	11.81	15.75	19.69
02	86111	Limited oral (new patient) .....	42.05	8.41	12.62	16.82	21.03
	86114	Specific oral (Remarks Code required) ....	50.93	10.19	15.28	20.37	25.47
03	86115	Emergency (Remarks Code required) .....	50.93	10.19	15.28	20.37	25.47
<b>RADIOGRAPHS</b>							
<b>Bitewing</b>							
	86200	- one (see Preamble) .....	20.23	4.05	6.07	8.09	10.12
04	86210	- two (see Preamble) .....	26.51	5.30	7.95	10.60	13.26
<b>Periapical</b>							
05	86240	- one (Remarks Code required) .....	20.23	4.05	6.07	8.09	10.12
	86250	- two (remarks Code required) .....	26.51	5.30	7.95	10.60	13.26
<b>Panoramic</b>							
	86280	- one (Restricted to Oral Surgeon) (Remarks Code required)					

CHILDREN'S DENTAL HEALTH PLAN

GENERAL PRACTITIONERS

High Freq. Code	Code	Description	100%	20%	30%	40%	50%
<b>RESTORATIVE SECTION</b>							
<b>REMOVALS</b>							
10	86400	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 .....	93.93	18.79	28.18	37.57	46.97
<b>DENTAL RESTORATIONS</b>							
<b>Primary Canine and Molar Teeth</b>							
11	86420	- one surface .....	88.93	17.79	26.68	35.57	44.47
12	86430	- two surfaces .....	130.23	26.05	39.07	52.09	65.12
13	86440	- three surfaces .....	151.52	30.30	45.46	60.61	75.76
	86450	- four surfaces .....	183.67	36.73	55.10	73.47	91.84
<b>Permanent Anteriors and Premolars</b>							
14	86460	- one surface .....	117.05	23.41	35.12	46.82	58.53
	86470	- two surfaces .....	156.68	31.34	47.00	62.67	78.34
	86480	- three surfaces .....	180.95	36.19	54.29	72.38	90.48
	86490	- four surfaces or more .....	234.41	46.88	70.32	93.76	117.21
<b>Permanent Molars – Amalgam Fillings</b>							
15	86500	- one surface .....	97.07	19.41	29.12	38.83	48.54
16	86510	- two surfaces .....	133.34	26.67	40.00	53.34	66.67
	86520	- three surfaces .....	177.90	35.58	53.37	71.16	88.95
	86530	- four surfaces .....	210.87	42.17	63.26	84.35	105.44
	86540	- five surfaces .....	247.54	49.51	74.26	99.02	123.77
<b>Permanent Molars – Tooth Colored Bonded Fillings</b>							
	86501	- one surface .....	134.89	26.98	40.47	53.96	67.45
	86502	- two surfaces .....	190.37	38.07	57.11	76.15	95.19
	86503	- three surfaces .....	237.36	47.47	71.21	94.94	118.68
	86504	- four surfaces .....	287.30	57.46	86.19	114.92	143.65
	86505	- five surfaces .....	331.13	66.23	99.34	132.45	165.57
<b>Retentive Pins</b>							
	86550	- one pin .....	24.64	4.93	7.39	9.86	12.32
	86551	- two pins .....	38.91	7.78	11.67	15.56	19.46

CHILDREN'S DENTAL HEALTH PLAN

GENERAL PRACTITIONERS

High Freq. Code	Code Description	100%	20%	30%	40%	50%
<b>ORAL SURGERY SECTION</b>						
<b>REMOVALS</b>						
18	86600 Single tooth removal, uncomplicated, birth to age 12 .....	106.45	21.29	31.94	42.58	53.23
19	86610 Each additional tooth removed, same quadrant, birth to age 12 .....	76.04	15.21	22.81	30.42	38.02
	86615 Single tooth removal, Income Support recipients aged 13 years and over ONLY	106.45	21.29	31.94	42.58	53.23
	86615 Each additional tooth removed in the same quadrant, Income Support recipients aged 13 years and over ONLY	76.04	15.21	22.81	30.42	38.02
	86620 Odontectomy, surgical approach, requiring surgical flap, removal of bone and/or sectioning of tooth (Except for third molar impactions, in which case the Surgical Dental Schedule should be used, noting the applicable restrictions) .....	207.59	41.52	62.28	83.04	103.80
<b>TRAUMA &amp; REPAIRS</b>						
<b>Replantation, repositioning avulsed tooth or teeth (including splinting per unit of time), permanent teeth only:</b>						
86671	- one unit .....	89.59 +L	17.92 +L	26.88 +L	35.84 +L	44.80 +L
86672	- each additional unit .....	89.59	17.92	26.88	35.84	44.80
<b>Splinting Removal</b>						
86673	- one unit .....	146.92	29.38	44.08	58.77	73.46
86674	- each additional unit .....	146.92	29.38	44.08	58.77	73.46
<b>PROSTHODONTICS REMOVABLE</b>						
<b>Complete Dentures, Standard</b>						
87600	- maxillary (Prior Approval required) .....	739.15 +L	147.83 +L	221.75 +L	295.66 +L	352.20 +L
87601	- mandibular (Prior Approval required) .....	825.59 +L	165.12 +L	247.68 +L	330.24 +L	363.21 +L
87602	- maxillary and mandibular, combined (Prior Approval required) .....	1,427.03 +L	285.41 +L	428.11 +L	570.81 +L	627.85 +L

CHILDREN'S DENTAL HEALTH PLAN

GENERAL PRACTITIONERS

High Freq. Code	Description	100%	20%	30%	40%	50%
<b>ADDITIONAL SERVICES</b>						
<b>PREVENTIVE SECTION</b>						
6	86350 Dental Cleaning .....	35.44	7.09	10.63	14.18	17.72
9	86355 Fluoride topical (not self-administered) insured for patient 6 to 12 years of age only .....	21.24	4.25	6.37	8.50	10.62
<b>Sealants</b>						
87180	- first tooth .....	32.56	6.51	9.77	13.02	16.28
87181	- each additional tooth, same quadrant ....	24.44	4.89	7.33	9.78	12.22
<b>RESTORATIVE SECTION</b>						
<b>Metal Prefabricated Restorations</b>						
17	86560 Primary molars only .....	193.75	38.75	58.13	77.50	96.88
<b>Posts, Cast Metal (Including Core) as a Separate Procedure</b>						
87290	Single section (Prior Approval required) ...	339.32 +L	67.86 +L	101.80 +L	135.73 +L	135.73 +L
<b>Posts, Cast Metal (Including Core) Concurrent with Impression for Crown</b>						
87295	Single Section (Prior Approval required)	188.81 +L	37.76 +L	56.64 +L	75.52 +L	75.52 +L
<b>Crowns, Porcelain/Ceramic</b>						
87310	Porcelain/Ceramic jacket (Prior Approval required) .....	790.28 +L	158.06 +L	237.08 +L	316.11 +L	316.11 +L
<b>Crowns, Porcelain/Ceramic, Fused to Metal</b>						
87311	Porcelain, fused to metal (Prior Approval required) .....	786.53 +L	157.31 +L	235.96 +L	314.61 +L	314.61 +L
<b>ENDODONTIA</b>						
<b>Pulpectomy</b>						
86760	Deciduous molars and canines .....	137.82	27.56	41.35	55.13	68.91
<b>Pulpotomy, Devitalized, Primary Dentition</b>						
20	86770 Pulpotomy + final filling the same day .....	72.25	14.45	21.68	28.90	36.13
<b>Pulpotomy</b>						
86772	Permanent, anterior .....	114.35	22.87	34.31	45.74	57.18
<b>Root Canal Treatment</b>						
87339	One canal (Prior Approval required) .....	465.07	93.01	139.52	186.03	232.54