



GOLD

GRANITE SCHOOL DISTRICT - MEDIUM PLAN
 SCHEDULE OF CO-PAY/PLAN PAYMENTS FOR NETWORK GENERAL DENTISTS
 AND NETWORK PEDIATRIC SPECIALISTS
 EFFECTIVE JANUARY 1, 2017

PROCEDURE CODE	PROCEDURE DESCRIPTION	MEDIUM GENERAL DENTIST IN-NETWORK MEMBER CO-PAY	MEDIUM GENERAL DENTIST IN & OUT-OF-NETWORK PLAN PAYMENT	PEDIATRIC SPECIALIST IN-NETWORK MEMBER CO-PAY OR DISCOUNT	PEDIATRIC SPECIALIST IN & OUT-OF-NETWORK PLAN PAYMENT
D0120	Periodic oral examination	\$0	\$17	\$0	\$17
D0140	Limited oral examination	\$0	\$19	20% Discount	\$0
D0150	Comprehensive oral examination	\$0	\$21	\$0	\$21
D0160	Detailed and extensive oral evaluation	\$0	\$54	20% Discount	\$0
D0170	Re-evaluation	\$0	\$19	20% Discount	\$0
D0180	Periodontal evaluation	\$0	\$25	20% Discount	\$0
D0210	Intraoral - compl ser incl bitewings	\$0	\$38	\$0	\$38
D0220	Intraoral - periapical - first image	\$0	\$8	\$0	\$8
D0230	Intraoral - periapical - each add image	\$0	\$6	\$0	\$6
D0240	Intraoral - occlusal image	\$0	\$15	\$0	\$15
D0250	Extra-oral - 2D projection radiographic image	\$0	\$18	\$0	\$18
D0251	Extra-oral posterior dental radiographic image	\$0	\$16	\$0	\$16
D0270	Bitewing - single image	\$0	\$10	\$0	\$10
D0272	Bitewings - two images	\$0	\$14	\$0	\$14
D0273	Bitewing-three images	\$0	\$19	\$0	\$19
D0274	Bitewings - four images	\$0	\$20	\$0	\$20
D0277	Vertical bitewings - 7 to 8 images	\$0	\$29	\$0	\$29
D0330	Panoramic Image	\$0	\$40	\$0	\$40
D0340	2D cephalometric radiographic image	20% Discount	\$0	20% Discount	\$0
D0470	Diagnostic casts	20% Discount	\$0	20% Discount	\$0
D1110	Prophylaxis - adults	\$0	\$37	\$0	\$37
D1120	Prophylaxis - child	\$0	\$25	\$0	\$25
D1208	Top appl fluor excl prophy (age 14 & under)	\$0	\$11	\$0	\$11
D1330	Oral hygiene instruction	\$0	\$0	\$0	\$0
D1351	Sealant - per tooth (age 14 & under)	\$13	\$8	20% Discount	\$0
D1353	Sealant repair - per tooth (age 14 & under)	\$14	\$9	20% Discount	\$0
D1510	Space maintainer - fixed unilateral (age 14 & under)	\$114	\$0	20% Discount	\$0
D1515	Space maintainer - fixed bilateral (age 14 & under)	\$159	\$0	20% Discount	\$0
D1520	Space maintainer - rem. unilateral (age 14 & under)	\$125	\$0	20% Discount	\$0
D1525	Space maintainer - rem. bilateral (age 14 & under)	\$193	\$0	20% Discount	\$0
D1550	Recement of space maintainer (age 14 & under)	\$26	\$0	20% Discount	\$0
D2140	Amalgam - 1 surface primary or permanent	\$17	\$32	20% Discount	\$0
D2150	Amalgam - 2 surfaces primary or permanent	\$22	\$34	20% Discount	\$0
D2160	Amalgam - 3 surfaces primary or permanent	\$31	\$38	20% Discount	\$0
D2161	Amalgam - 4 + surfaces primary or permanent	\$37	\$39	20% Discount	\$0
D2330	Resin - 1 surface anterior	\$37	\$32	20% Discount	\$0
D2331	Resin - 2 surfaces anterior	\$41	\$40	20% Discount	\$0
D2332	Resin - 3 surfaces anterior	\$47	\$44	20% Discount	\$0
D2335	Resin - 4 + surf or involving incisal angle anterior	\$52	\$50	20% Discount	\$0
D2390	Resin based comp. crown - ant. prim. or perm.	\$104	\$0	20% Discount	\$0
D2391	Resin - 1 surface posterior prim. or perm.	\$36	\$32	20% Discount	\$0
D2392	Resin - 2 surfaces posterior prim. or perm.	\$53	\$39	20% Discount	\$0
D2393	Resin - 3 surfaces posterior prim. or perm.	\$65	\$45	20% Discount	\$0
D2394	Resin - 4 + surfaces - posterior prim. or perm.	\$115	\$0	20% Discount	\$0
D2610	Inlay - porcelain/ceramic 1 surface	\$332	\$0	20% Discount	\$0
D2620	Inlay - porcelain/ceramic - 2 surfaces	\$357	\$0	20% Discount	\$0
D2630	Inlay - porcelain/ceramic - 3 surfaces	\$381	\$0	20% Discount	\$0
D2642	Onlay - porcelain/ceramic - 2 surfaces	\$360	\$0	20% Discount	\$0
D2643	Onlay - porcelain/ceramic - 3 surfaces	\$400	\$0	20% Discount	\$0
D2644	Onlay - porcelain/ceramic - 4 surfaces	\$429	\$0	20% Discount	\$0
D2650	Composite Inlay One Surface	\$225	\$0	20% Discount	\$0
D2651	Composite Inlay Two Surface	\$271	\$0	20% Discount	\$0
D2652	Composite Inlay Three Surface or more	\$292	\$0	20% Discount	\$0
D2662	Composite Onlay Two Surface	\$255	\$0	20% Discount	\$0
D2663	Composite Onlay Three Surface	\$301	\$0	20% Discount	\$0
D2664	Composite Onlay Four Surface or more	\$320	\$0	20% Discount	\$0
D2710	Crown-Resin (indirect)	\$167	\$0	20% Discount	\$0
D2712	Crown - 3/4 resin-based composite (indirect)	\$167	\$0	20% Discount	\$0
D2720	Crown- Resin High Noble Metal	\$439	\$0	20% Discount	\$0
D2721	Crown Resin Base Metal	\$415	\$0	20% Discount	\$0
D2722	Crown Resin Noble	\$425	\$0	20% Discount	\$0
D2740	Crown - porcelain/ceramic substrate (note 7)	\$500	\$0	20% Discount	\$0
D2750	Crown - porcelain fused to high noble metal (note 6)	\$489	\$0	20% Discount	\$0
D2751	Crown - porcelain fused to predom. base metal	\$460	\$0	20% Discount	\$0
D2752	Crown - porcelain fused to noble metal	\$467	\$0	20% Discount	\$0
D2780	Crown - 3/4 cast high noble metal (note 6)	\$469	\$0	20% Discount	\$0
D2781	Crown - 3/4 cast predominately base metal	\$401	\$0	20% Discount	\$0
D2782	Crown - 3/4 cast noble metal	\$415	\$0	20% Discount	\$0
D2783	Crown - 3/4 porcelain ceramic (note 7)	\$435	\$0	20% Discount	\$0
D2790	Crown - full cast high noble metal (note 6)	\$426	\$0	20% Discount	\$0

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D2791	Crown - full cast predominately base metal	\$403	\$0	20% Discount	\$0
D2792	Crown - full cast noble metal	\$413	\$0	20% Discount	\$0
D2915	Recement cast or prefabricated post and core	\$35	\$0	20% Discount	\$0
D2920	Recement crown	\$34	\$0	20% Discount	\$0
D2929	Prefab. Porcelain/ceramic crown -primary	\$135	\$0	20% Discount	\$0
D2930	Prefab. stainless steel crown - prime tooth	\$93	\$0	20% Discount	\$0
D2931	Prefab. stainless steel crown - permanent tooth	\$105	\$0	20% Discount	\$0
D2933	Prefab. stainless steel crown w/ resin window	\$128	\$0	20% Discount	\$0
D2934	Prefab. coated stainless steel crown - primary	\$128	\$0	20% Discount	\$0
D2940	Sedative fillings	\$37	\$0	20% Discount	\$0
D2950	Core build-up including any pins	\$87	\$0	20% Discount	\$0
D2951	Pin retention - per tooth in addition to restoration	\$20	\$0	20% Discount	\$0
D2952	Cast post & core in addition to crown	\$141	\$0	20% Discount	\$0
D2953	Each additional cast post - same tooth	\$70	\$0	20% Discount	\$0
D2954	Prefab. post & core in addition to crown	\$112	\$0	20% Discount	\$0
D2957	Each additional prefab post - same tooth	\$56	\$0	20% Discount	\$0
D2960	Anterior bonding per tooth	\$269	\$0	20% Discount	\$0
D2961	Labial veneer resin laminate (lab)	20% Discount	\$0	20% Discount	\$0
D2962	Labial veneer porcelain laminate (lab)	20% Discount	\$0	20% Discount	\$0
D2999	Lab Fee (notes 6 & 7)	See notes 6 & 7	See notes 6 & 7	See notes 6 & 7	See notes 6 & 7
D3110	Pulp cap - direct excluding final restoration	\$29	\$0	20% Discount	\$0
D3220	Therapeutic pulpotomy excluding final restoration	\$57	\$0	20% Discount	\$0
D3221	Pulpal debridement primary & permanent teeth	\$63	\$0	20% Discount	\$0
D3230	Pulpal therapy-anterior-excluding final restoration	\$61	\$0	20% Discount	\$0
D3240	Pulpal therapy-posterior-excluding final restoration	\$75	\$0	20% Discount	\$0
D3310	Root Canal - ant. exclud. final restoration	\$266	\$0	20% Discount	\$0
D3320	Root Canal - bicuspid exclud. final restoration	\$325	\$0	20% Discount	\$0
D3330	Root Canal - molar exclud. final restoration	\$420	\$0	20% Discount	\$0
D3346	Retreatment of previous root canal - anterior	\$316	\$0	20% Discount	\$0
D3347	Retreatment of previous root canal - bicuspid	\$374	\$0	20% Discount	\$0
D3348	Retreatment of previous root canal - molar	\$461	\$0	20% Discount	\$0
D3351	Apexification/Initial Visit	\$135	\$0	20% Discount	\$0
D3352	Apexification/Interim	\$61	\$0	20% Discount	\$0
D3353	Apexification/Final Visit	\$187	\$0	20% Discount	\$0
D3410	Apicoectomy/periradicular surgical - anterior	20% Discount	\$0	20% Discount	\$0
D3421	Apico/perirad surgical - bicuspid first root	20% Discount	\$0	20% Discount	\$0
D3425	Apico/perirad surgical - molar first root	20% Discount	\$0	20% Discount	\$0
D3426	Apico/perirad surgical - each additional root	20% Discount	\$0	20% Discount	\$0
D3430	Retrograde filling - per root	20% Discount	\$0	20% Discount	\$0
D3450	Root Amputation	\$175	\$0	20% Discount	\$0
D3920	Hemisection	\$133	\$0	20% Discount	\$0
D4210	Gingivectomy/gingivoplasty - 4 + teeth per quad	20% Discount	\$0	20% Discount	\$0
D4211	Gingivectomy/gingivoplasty - 1 - 3 teeth per quad	20% Discount	\$0	20% Discount	\$0
D4212	Gingivectomy/gingivoplasty-access for rest. Per tooth	20% Discount	\$0	20% Discount	\$0
D4240	Gingival flap proc. incl. root planing - 4 + teeth	20% Discount	\$0	20% Discount	\$0
D4241	Gingival flap proc. Incl. root planing 1 - 3 teeth	20% Discount	\$0	20% Discount	\$0
D4249	Clinical crown lengthening - hard tissue	20% Discount	\$0	20% Discount	\$0
D4260	Osseous surg. & flap entry/closure - 4 + teeth	20% Discount	\$0	20% Discount	\$0
D4261	Osseous surg. & flap entry/closure - 1 - 3 teeth	20% Discount	\$0	20% Discount	\$0
D4263	Bone replacement graft - retained natural tooth - first site in quad	20% Discount	\$0	20% Discount	\$0
D4264	Bone replacement graft - retained natural tooth - each additional site	20% Discount	\$0	20% Discount	\$0
D4266	Guided tissue regen. - resorbable barrier, per site	20% Discount	\$0	20% Discount	\$0
D4267	Guided tis. regen. - non resorbable barrier, per site	20% Discount	\$0	20% Discount	\$0
D4270	Pedicle soft tissue graft procedure	20% Discount	\$0	20% Discount	\$0
D4273	Autogenous connective tissue graft procedure first tooth	20% Discount	\$0	20% Discount	\$0
D4275	Non-autogenous connective tissue graft first tooth	20% Discount	\$0	20% Discount	\$0
D4276	Comb. connective tissue and double pedicle graft	20% Discount	\$0	20% Discount	\$0
D4277	Free soft tissue graft procedure	20% Discount	\$0	20% Discount	\$0
D4278	Free soft tissue graft procedure each additional contiguous	20% Discount	\$0	20% Discount	\$0
D4283	Autogenous connective tissue graft procedure each additional	20% Discount	\$0	20% Discount	\$0
D4285	Non-autogenous connective tissue graft procedure each additional	20% Discount	\$0	20% Discount	\$0
D4320	Provisional splinting - intracoronal	20% Discount	\$0	20% Discount	\$0
D4321	Provisional splinting - extracoronal	20% Discount	\$0	20% Discount	\$0
D4341	Perio. scaling & root planing - 4 + teeth per quad	\$104	\$0	20% Discount	\$0
D4342	Perio. scaling & root planing - 1 - 3 teeth per quad	\$77	\$0	20% Discount	\$0
D4355	Full mouth debridement	\$80	\$0	20% Discount	\$0
D4381	Antimicrobial agents	20% Discount	\$0	20% Discount	\$0
D4910	Perio maintenance procedures after active therapy	\$76	\$0	20% Discount	\$0
D5110	Complete denture - maxillary (note 4)	\$504	\$0	20% Discount	\$0
D5120	Complete denture - mandibular (note 4)	\$504	\$0	20% Discount	\$0
D5130	Immediate denture - maxillary (note 4)	\$548	\$0	20% Discount	\$0
D5140	Immediate denture - mandibular (note 4)	\$548	\$0	20% Discount	\$0
D5211	Maxillary Partial Denture - Resin Base (note 5)	\$429	\$0	20% Discount	\$0
D5212	Mand. Partial Denture - Resin Base (note 5)	\$495	\$0	20% Discount	\$0
D5213	Max. Partial Denture w/ cast metal base (note 5)	\$555	\$0	20% Discount	\$0
D5214	Mand. Partial Denture w/ cast metal base (note 5)	\$555	\$0	20% Discount	\$0
D5281	Rem. unilateral part. denture	20% Discount	\$0	20% Discount	\$0
D5410	Adjust complete denture - maxillary	\$29	\$0	20% Discount	\$0
D5411	Adjust complete denture - mandibular	\$29	\$0	20% Discount	\$0
D5421	Adjust partial denture - maxillary	\$29	\$0	20% Discount	\$0
D5422	Adjust partial denture - mandibular	\$29	\$0	20% Discount	\$0

PROCEDURE CODE	PROCEDURE DESCRIPTION	MEDIUM	MEDIUM	PEDIATRIC SPECIALIST	PEDIATRIC SPECIALIST
		GENERAL DENTIST IN-NETWORK MEMBER CO-PAY	GENERAL DENTIST IN & OUT-OF-NETWORK PLAN PAYMENT	IN-NETWORK MEMBER CO-PAY OR DISCOUNT	IN & OUT-OF-NETWORK PLAN PAYMENT
D5510	Repair broken complete denture base (note 5)	\$56	\$0	20% Discount	\$0
D5520	Replace missing/broken tooth - ea. tooth (note 5)	\$47	\$0	20% Discount	\$0
D5610	Repair resin saddle or base (note 5)	\$60	\$0	20% Discount	\$0
D5620	Repair cast framework (note 5)	\$65	\$0	20% Discount	\$0
D5630	Repair or replace broken clasp - per tooth (note 5)	\$78	\$0	20% Discount	\$0
D5640	Replace broken teeth - per tooth (note 5)	\$52	\$0	20% Discount	\$0
D5650	Add tooth to existing partial denture (note 5)	\$69	\$0	20% Discount	\$0
D5660	Add clasp to existing partial denture - per tooth (note 5)	20% Discount	\$0	20% Discount	\$0
D5710	Rebase complete maxillary denture (note 5)	20% Discount	\$0	20% Discount	\$0
D5711	Rebase complete mandibular denture (note 5)	20% Discount	\$0	20% Discount	\$0
D5720	Rebase maxillary partial denture (note 5)	20% Discount	\$0	20% Discount	\$0
D5721	Rebase mandibular partial denture (note 5)	20% Discount	\$0	20% Discount	\$0
D5730	Reline complete maxillary denture (chairside)	\$116	\$0	20% Discount	\$0
D5731	Reline complete mandibular denture (chairside)	\$116	\$0	20% Discount	\$0
D5740	Reline maxillary partial denture (chairside)	\$107	\$0	20% Discount	\$0
D5741	Reline mandibular partial denture (chairside)	\$107	\$0	20% Discount	\$0
D5750	Reline complete maxillary denture (lab) (note 5)	\$153	\$0	20% Discount	\$0
D5751	Reline complete mandibular denture (lab) (note 5)	\$153	\$0	20% Discount	\$0
D5760	Reline upper partial denture (lab) (note 5)	\$151	\$0	20% Discount	\$0
D5761	Reline mandibular partial denture (lab) (note 5)	\$151	\$0	20% Discount	\$0
D5810	Interim complete denture (maxillary)	20% Discount	\$0	20% Discount	\$0
D5811	Interim complete denture (mandibular)	20% Discount	\$0	20% Discount	\$0
D5820	Interim partial denture (maxillary)	20% Discount	\$0	20% Discount	\$0
D5821	Interim partial denture (mandibular)	20% Discount	\$0	20% Discount	\$0
D5850	Tissue conditioning, maxillary - per denture unit	\$49	\$0	20% Discount	\$0
D5851	Tissue conditioning, mandibular	\$49	\$0	20% Discount	\$0
D5899	Lab Fee (notes 4 & 5)	See notes 4 & 5	See notes 4 & 5	See notes 4 & 5	See notes 4 & 5
D6010	Surgical Implant	20% Discount	\$0	20% Discount	\$0
D6012	Surg placement of interim implant body; endosteal	20% Discount	\$0	20% Discount	\$0
D6040	Epoosteal Implant	20% Discount	\$0	20% Discount	\$0
D6050	Transosteal Implant	20% Discount	\$0	20% Discount	\$0
D6055	Implant Supported Connecting Bar	20% Discount	\$0	20% Discount	\$0
D6056	Prefabricated Abutment - Implant	20% Discount	\$0	20% Discount	\$0
D6057	Custom Abutment - Implant	20% Discount	\$0	20% Discount	\$0
D6058	Abutment Supported Porcelain/Ceramic Crown	20% Discount	\$0	20% Discount	\$0
D6059	Abutment Supported Porcelain/High Noble Metal	20% Discount	\$0	20% Discount	\$0
D6060	Abutment Supported Porcelain/Base Metal	20% Discount	\$0	20% Discount	\$0
D6061	Abutment Supported Porcelain/Noble Metal	20% Discount	\$0	20% Discount	\$0
D6062	Abutment Supported Cast High Noble Metal	20% Discount	\$0	20% Discount	\$0
D6063	Abutment Supported Cast Base Metal	20% Discount	\$0	20% Discount	\$0
D6064	Abutment Supported Cast Noble Metal	20% Discount	\$0	20% Discount	\$0
D6065	Implant Supported Porcelain/Ceramic Crown	20% Discount	\$0	20% Discount	\$0
D6066	Implant Supported Porcelain/High Noble Metal Crown	20% Discount	\$0	20% Discount	\$0
D6067	Implant Supported High Noble Metal Crown	20% Discount	\$0	20% Discount	\$0
D6068	Abutment Supported Retainer Porc/Ceramic FPD	20% Discount	\$0	20% Discount	\$0
D6069	Abutment Supported Retainer Porc/High Noble FPD	20% Discount	\$0	20% Discount	\$0
D6070	Abutment Supported Retainer Porc/Base Metal FPD	20% Discount	\$0	20% Discount	\$0
D6071	Abutment Supported Retainer Porc/Noble Metal FPD	20% Discount	\$0	20% Discount	\$0
D6072	Abutment Supported Retainer High Noble Metal FPD	20% Discount	\$0	20% Discount	\$0
D6073	Abutment Supported Retainer Base Metal FPD	20% Discount	\$0	20% Discount	\$0
D6074	Abutment Supported Retainer Noble Metal FPD	20% Discount	\$0	20% Discount	\$0
D6075	Implant Supported Retainer for Ceramic FPD	20% Discount	\$0	20% Discount	\$0
D6076	Implant Supported Retainer for Porc/High Noble FPD	20% Discount	\$0	20% Discount	\$0
D6077	Implant Supported Retainer for Porc/Base Metal FPD	20% Discount	\$0	20% Discount	\$0
D6080	Implant Maintenance	20% Discount	\$0	20% Discount	\$0
D6091	Repl Attachmnt Impl/Abut Supp Pros Per Attachmnt	20% Discount	\$0	20% Discount	\$0
D6092	Recement Implant/Abutment Supported Crown	20% Discount	\$0	20% Discount	\$0
D6093	Recement Impl/Abutmnt Supported Fix Part Denture	20% Discount	\$0	20% Discount	\$0
D6094	Abutment supported crown - (Titanium)	20% Discount	\$0	20% Discount	\$0
D6100	Implant Removal, By Report	20% Discount	\$0	20% Discount	\$0
D6110	Implnt/abut supp rem denture-comp edentulous arch	20% Discount	\$0	20% Discount	\$0
D6111	Implnt/abut supp rem denture-part edentulous arch	20% Discount	\$0	20% Discount	\$0
D6114	Implant/Abutment Supported Fixed Complete Denture	20% Discount	\$0	20% Discount	\$0
D6115	Implant/Abutment Supported Fixed Partial Denture	20% Discount	\$0	20% Discount	\$0
D6194	Abutment supported retainer crown for FPD - (titanium)	20% Discount	\$0	20% Discount	\$0
D6205	Pontic - indirect resin based composite	\$238	\$0	20% Discount	\$0
D6210	Pontic - High Noble	\$423	\$0	20% Discount	\$0
D6211	Pontic - Base Metal	\$395	\$0	20% Discount	\$0
D6212	Pontic - Cast Noble Metal	\$412	\$0	20% Discount	\$0
D6240	Pontic - Porcelain to High Noble	\$417	\$0	20% Discount	\$0
D6241	Pontic - Porcelain to Base Metal	\$384	\$0	20% Discount	\$0
D6242	Pontic - Porcelain to Noble Metal	\$406	\$0	20% Discount	\$0
D6245	Pontic - Porcelain/Ceramic	\$433	\$0	20% Discount	\$0
D6250	Pontic - Resin with High Noble	\$412	\$0	20% Discount	\$0
D6251	Pontic - Resin with Base Metal	\$379	\$0	20% Discount	\$0
D6252	Pontic - Resin with Noble Metal	\$392	\$0	20% Discount	\$0
D6608	Retainer onlay -porcelain/ceramic, two surfaces	\$325	\$0	20% Discount	\$0
D6609	Retainer onlay - porcelain/ceramic, three or more surfaces	\$338	\$0	20% Discount	\$0
D6610	Retainer onlay - cast high noble metal, two surfaces	\$344	\$0	20% Discount	\$0
D6611	Retainer onlay - cast high noble metal, 3 or more surfaces	\$375	\$0	20% Discount	\$0
D6612	Retainer onlay-cast predom. base metal, 2 surfaces	\$342	\$0	20% Discount	\$0

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D6613	Retainer onlay-cast predom.base metal, 3 or more surfaces	\$357	\$0	20% Discount	\$0
D6614	Retainer onlay - cast noble metal, two surfaces	\$335	\$0	20% Discount	\$0
D6615	Retainer onlay - cast noble metal, three or more surfaces	\$348	\$0	20% Discount	\$0
D6720	Retainer crown-Resin with High Noble Abutment	\$429	\$0	20% Discount	\$0
D6721	Retainer crown-Resin with Base Metal Abutment	\$407	\$0	20% Discount	\$0
D6722	Retainer crown-Resin with Noble Metal Abutment	\$414	\$0	20% Discount	\$0
D6740	Retainer porcelain/Ceramic Abutment Crown	\$456	\$0	20% Discount	\$0
D6750	Retainer crown-Porcelain to High Noble Abutment	\$444	\$0	20% Discount	\$0
D6751	Retainer crown-Porcelain to Base Metal Abutment	\$413	\$0	20% Discount	\$0
D6752	Retainer crown-Porcelain to Noble Metal Abutment	\$424	\$0	20% Discount	\$0
D6780	Retainer crown-3/4 Cast High Noble Abutment	\$414	\$0	20% Discount	\$0
D6781	Retainer crown-3/4 Cast Base Metal Abutment	\$414	\$0	20% Discount	\$0
D6782	Retainer crown-3/4 Cast Noble Metal Abutment	\$385	\$0	20% Discount	\$0
D6783	Retainer crown-3/4 Porcelain/Ceramic Abutment	\$426	\$0	20% Discount	\$0
D6790	Retainer crown-Full Cast High Noble Abutment	\$424	\$0	20% Discount	\$0
D6791	Retainer crown-Full Cast Base Metal Abutment	\$402	\$0	20% Discount	\$0
D6792	Retainer crown-Full Cast Noble Metal Abutment	\$417	\$0	20% Discount	\$0
D6930	Recement Bridge	\$49	\$0	20% Discount	\$0
D6999	Lab Fee (notes 6 & 7)	See notes 6 & 7	See notes 6 & 7	See notes 6 & 7	See notes 6 & 7
D7111	Extraction of primary tooth	\$25	\$15	20% Discount	\$0
D7140	Extraction, erupted tooth or exposed root	\$33	\$17	20% Discount	\$0
D7210	Extraction, erupted tooth	\$63	\$24	20% Discount	\$0
D7220	Removal impacted tooth - soft tissue	\$84	\$27	20% Discount	\$0
D7230	Removal impacted tooth - partial bony	\$111	\$35	20% Discount	\$0
D7240	Removal impacted tooth - completely bony	\$137	\$36	20% Discount	\$0
D7241	Removal impacted tooth	\$171	\$48	20% Discount	\$0
D7250	Removal of residual tooth roots	\$96	\$0	20% Discount	\$0
D7270	Tooth reimplantation/stabilization	\$171	\$0	20% Discount	\$0
D7280	Exposure of an unerupted tooth	20% Discount	\$0	20% Discount	\$0
D7285	Biopsy of oral tissue-hard (bone, tooth)	20% Discount	\$0	20% Discount	\$0
D7286	Biopsy of oral tissue-soft (all others)	20% Discount	\$0	20% Discount	\$0
D7287	Cytology sample	20% Discount	\$0	20% Discount	\$0
D7288	Brush biopsy - transepithelial sample collection	20% Discount	\$0	20% Discount	\$0
D7290	Surgical repositioning of teeth	20% Discount	\$0	20% Discount	\$0
D7310	Alveoloplasty in conj. w/ extraction - per quad	20% Discount	\$0	20% Discount	\$0
D7311	Alveoloplasty in conj. w/ extractions - 1 - 3 teeth	20% Discount	\$0	20% Discount	\$0
D7320	Alveoloplasty, no extraction - per quad	20% Discount	\$0	20% Discount	\$0
D7321	Alveoloplasty not in conj. w/ exts. - 1 - 3 teeth	20% Discount	\$0	20% Discount	\$0
D7471	Excision of exostosis	\$338	\$0	20% Discount	\$0
D7510	I&D abscess - intraoral soft tissue	\$101	\$0	20% Discount	\$0
D7511	I&D abscess - intraoral soft tissue, complicated	\$153	\$0	20% Discount	\$0
D7810-7899	TMJ Treatment	20% Discount	\$0	20% Discount	\$0
D7960	Frenulectomy - separate procedure	\$130	\$0	20% Discount	\$0
D7971	Excision of pericoronal gingiva	20% Discount	\$0	20% Discount	\$0
D9110	Palliative - emerg. treatment of pain - minor proc.	\$36	\$0	20% Discount	\$0
D9210	Local anesthetic	\$0	\$0	\$0	\$0
D9223	Deep sedation/general anesthesia - each 15 minute increment	N/C	N/C	N/C	N/C
D9243	Intravenous moderate (conscious) sedation - 15 minute increment	N/C	N/C	N/C	N/C
D9248	Non-intravenous conscious sedation	N/C	N/C	N/C	N/C
D9430	Office visit obs. - scheduled hrs - no other servs.	\$25	\$0	20% Discount	\$0
D9440	Office visit - after regular scheduled hours	\$46	\$0	20% Discount	\$0
D9940	Occlusal guards by report (note 3)	\$135	\$0	20% Discount	\$0
D9951	Occlusal adjustment - limited	\$40	\$0	20% Discount	\$0
D9972	External Bleaching per Arch	20% Discount	\$0	20% Discount	\$0
D9973	External Bleaching per Tooth	20% Discount	\$0	20% Discount	\$0
D8010-8680	Orthodontics	20% Discount	\$0	20% Discount	\$0

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NOTE 1: Any procedure not listed is available on a fee-for service basis.

NOTE 2: Maximum coverage is \$150 per calendar year for anesthesia service. (Anesthesia benefits for co-insurance plans only)

NOTE 3: Occlusal Guards covered for Bruxism only.

NOTE 4: Patient will be charged co-pay plus lab fees, not to exceed \$250. Code 5899.

NOTE 5: Patient will be charged co-pay plus lab fees, not to exceed \$150. Code 5899.

NOTE 6: For a precious metal (high-noble) or gold, patient may be charged the difference between the lab fee for a base metal and the lab fee for the precious metal (high-noble). Code 2999 for crown restoration. Code 6999 for fixed prosthodontics.

NOTE 7: For a full porcelain, patient may be charge the difference between the lab fee for a porcelain base metal crown and the lab fee for the full porcelain crown. Code 2999 for crown restoration. Code 6999 for fixed prosthodontics.

N/C = Not Covered

INVISALIGN - Discount does not apply to Invisalign.

The appropriate fee schedule and maximum allowable applies regardless of the plan type as well as whether a waiting period or annual maximum has been met.

SELF-FUNDED GROUPS - Groups that are self-funded govern their own unique fee schedules and benefits, which may vary from Dental Select's standard plan designs and can include fees not listed. Please contact Customer Care for any questions regarding self-funded groups or their fee

FREQUENCY & PLAN LIMITATIONS MAY APPLY. A member's ID card is not a guarantee of benefits; plans and eligibility are subject to change. We recommend contacting Customer Care at (800) 999-9789 for eligibility and benefit details for all patients.



Claims Submission:

PO Box 851917 Richardson, TX 75085

Benefit & Claims Questions:

Phone (800) 999-9789 Fax (888) 673-5328

www.dentalselect.com

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