

HMO - H4007-016 (Platinum HMO D-SNP)

In Network Copay: GD 50 - SP 50

*Maximum benefit \$2,000 per year (only apply for implant services and implant supported prosthetics)

| CPT Code | Description | Fee Schedule | | Guidelines |
|--------------------------------------|---|----------------------|-----------------|--|
| | | General Dentist (GD) | Specialist (SP) | |
| Diagnostic and Preventive | | | | |
| D9310 | Professional Consultation | - | \$60 | one per contract year |
| D0120 | Periodical Oral Evaluation - established patient | \$14.28 | \$14.28 | every 6 months |
| D0140 | Limited Oral Evaluation - problem focused | \$20.91 | \$25 | every 6 months |
| D0150 | Comprehensive Oral Exam - new or established patient | \$22.58 | - | every 36 months |
| D0210 | Intraoral complete series of radiographic images | \$47.47 | \$47.47 | one every 36 months |
| D0220 | Intraoral film - periapical first radiographic image | \$8.36 | \$8.36 | one per year |
| D0230 | Intraoral film - periapical each additional radiographic image | \$7.60 | \$7.60 | up to 5 per year |
| D0270 | Bitewing - single radiographic image | \$8.36 | \$8.36 | every 12 months |
| D0272 | Bitewing - two radiographic images | \$15.69 | \$15.69 | every 12 months |
| D0330 | Panoramic radiographic image | \$36.59 | \$55 | every 36 months |
| D1110 | Prophylaxis - adult | \$40.40 | \$40.40 | every 6 months |
| D1120 | Prophylaxis - child | \$25.25 | \$25.25 | every 6 months |
| D1208 | Topical application of fluoride | \$17.78 | \$17.78 | one every 6 months; up to 13 years of age |
| D1351 | Sealant per tooth | \$18.18 | \$18.18 | Unrestored tooth. One per tooth per life, up to 14 years (inclusive). Deciduous molars up to 8 years old |
| Restorative | | | | |
| D2140 | Amalgam - one surface, primary or permanent | \$34.67 | \$34.67 | one per tooth every 36 months |
| D2150 | Amalgam - two surfaces, primary or permanent | \$42.68 | \$42.68 | one per tooth every 36 months |
| D2160 | Amalgam - three surfaces, primary or permanent | \$50.92 | \$50.92 | one per tooth every 36 months |
| D2161 | Amalgam - four or more surfaces, primary or permanent | \$60.10 | \$60.10 | one per tooth every 36 months |
| D2330 | Resin based composite - one surface, anterior | \$39.93 | \$39.93 | one per tooth every 36 months |
| D2331 | Resin based composite - two surfaces, anterior | \$49.07 | \$49.07 | one per tooth every 36 months |
| D2332 | Resin based composite - three surfaces, anterior | \$58.81 | \$58.81 | one per tooth every 36 months |
| D2335 | Resin based composite - four or more surfaces | \$70.38 | \$70.38 | one per tooth every 36 months |
| D2391 | Resin based composite - one surface posterior | \$43.74 | \$43.74 | one per tooth every 36 months |
| D2392 | Resin based composite - two surface posterior | \$56.62 | \$56.62 | one per tooth every 36 months |
| D2393 | Resin based composite - three surface posterior | \$68 | \$68 | one per tooth every 36 months |
| D2394 | Resin based composite - four or more surface posterior | \$78.61 | \$78.61 | one per tooth every 36 months |
| D2930 | Prefabricated stainless steel crown - primary tooth (after a Pediatric pulpotomy) | \$60 | \$60 | one per tooth every 36 months |
| D2940 | Protective restoration | \$31.25 | \$31.25 | one per tooth per life |
| Other Restorative | | | | |
| D2950 | Core buildup, including any pins, when required | \$70 | \$70 | one per tooth per life |
| D2954 | Prefabricated post and core in addition to crown | \$100 | \$100 | one per tooth per life |
| Crown | | | | |
| D2740 | Crown porcelain/ceramic substrate | \$490 | \$490 | Pre-determination required one per tooth every 5 years |
| D2750 | Crown porcelain fused to high noble metal | \$490 | \$490 | one per tooth every 5 years |
| D2751 | Crown porcelain fused to predominantly base metal | \$525 | \$525 | one per tooth every 5 years |
| D2752 | Crown porcelain fused to noble metal | \$435 | \$435 | one per tooth every 5 years |
| D2790 | Crown full cast high noble metal | \$300 | \$300 | one per tooth every 5 years |
| Endodontics | | | | |
| D3220 | Therapeutic Pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of medicament | \$40 | \$50 | one per tooth per life |
| D3310 | Anterior (excluding final restoration) | \$250 | \$310 | unlimited per year |
| D3320 | Premolar (excluding final restoration) | \$310 | \$395 | unlimited per year |
| D3330 | Molar (excluding final restoration) | \$450 | \$560 | unlimited per year |
| D3346 | Retreatment of previous root canal therapy - anterior | - | \$310 | one per tooth per life after 5 year of initial treatment |
| D3347 | Retreatment of previous root canal therapy - premolar | - | \$395 | one per tooth per life after 5 year of initial treatment |
| D3348 | Retreatment of previous root canal therapy - molar | - | \$560 | one per tooth per life after 5 year of initial treatment |
| Periodontics | | | | |
| D4341 | Periodontal scaling and root planning - per quadrant* | \$68.25 | \$90 | one every 12 months |
| D4355 | Full mouth debridement to enable a comprehensive oral evaluation and diagnosis on a subsequent visit | - | \$35 | one every 12 months |
| Prosthodontics | | | | |
| *Pre-determination required | | | | |
| D5110 | Complete denture - maxillary* | \$468 | \$468 | every 5 years |
| D5120 | Complete denture - mandibular* | \$468 | \$468 | every 5 years |
| D5130 | Immediate denture maxillary* | \$400 | \$400 | every 5 years |
| D5140 | Immediate denture mandibular* | \$400 | \$400 | every 5 years |
| D5211 | Maxillary partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5212 | Mandibular partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5213 | Maxillary partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5214 | Mandibular partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5225 | Maxillary partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5226 | Mandibular partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5282 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), maxillary* | \$245 | \$245 | every 5 years |
| D5283 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), mandibular* | \$245 | \$245 | every 5 years |
| D5410 | Adjust complete denture - maxillary | \$25 | \$25 | unlimited per year |
| D5411 | Adjust complete denture - mandibular | \$25 | \$25 | unlimited per year |
| D5421 | Adjust partial denture - maxillary | \$25 | \$25 | unlimited per year |
| D5422 | Adjust partial denture - mandibular | \$25 | \$25 | unlimited per year |
| Prosthodontics - Fixed | | | | |
| *Pre-determination required | | | | |
| D6240 | Pontic - porcelain fused to high noble metal | \$400 | \$400 | every 5 years |
| D6242 | Pontic - porcelain fused to noble metal | \$365 | \$365 | every 5 years |
| D6750 | Retainer crown - porcelain fused to high noble metal | \$490 | \$490 | every 5 years |
| D6752 | Retainer crown - porcelain fused to noble metal | \$435 | \$435 | every 5 years |
| Implant | | | | |
| *Pre-determination required | | | | |
| D6010 | Surgical placement of implant body endosteal implant | \$835 | \$835 | one per tooth area per life |
| D6011 | Second stage implant surgery | \$250 | \$250 | one per tooth area per life |
| Implant Supported Prosthetics | | | | |
| *Pre-determination required | | | | |
| D6056 | Prefabricated abutment | \$300 | \$300 | one per tooth every 5 years |
| D6057 | Custom fabricated abutment | \$450 | \$450 | one per tooth every 5 years |
| D6058 | Abutment supported porcelain - ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6059 | Abutment supported porcelain fused to metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6060 | Abutment supported porcelain fused to metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6061 | Abutment supported porcelain fused to metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6062 | Abutment supported cast metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6063 | Abutment supported cast metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6064 | Abutment supported cast metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6065 | Implant supported porcelain/ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6066 | Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6067 | Implant supported crown - high noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6068 | Abutment supported retainer for porcelain/ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6069 | Abutment supported retainer for porcelain fused to metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6070 | Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6071 | Abutment supported retainer for porcelain fused to metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6072 | Abutment supported retainer for cast metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6073 | Abutment supported retainer for cast metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6074 | Abutment supported retainer for cast metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6075 | Implant supported retainer for ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6076 | Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6077 | Implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6086 | Implant supported crown-predominantly base alloys | \$525 | \$525 | one per tooth every 5 years |
| D6087 | Implant supported crown - noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6088 | Implant supported crown - titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| D6094 | Abutment supported crown titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| Oral Surgery | | | | |
| D7140 | Extraction, erupted tooth or exposed root (elevation and/or forceps removal) | \$27.30 | \$40 | unlimited per year |
| D7210 | Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated | \$52.50 | \$110 | unlimited per year |
| D7220 | Removal of impacted tooth - soft tissue | \$94.50 | \$180 | unlimited per year |
| D7230 | Removal of impacted tooth - partially bony | \$131.25 | \$200 | unlimited per year |
| D7240 | Removal of impacted tooth - completely bony | \$131.25 | \$230 | unlimited per year |
| D7250 | Surgical removal of residual tooth roots (cutting procedure) | \$59 | \$120 | unlimited per year |
| Unclassified Treatment | | | | |
| D9110 | Palliative (emergency) treatment of dental pain - minor procedure | \$22 | \$22 | one per visit |

Services not included in this Dental Benefit Grid are not covered.
 Services received from an out-of-network dentist (except emergency care) is not a covered benefit.
For internal use: D19 / DEN538

HMO - H4007-018 (Platino HMO D-SNP)
 In Network Copay: GD \$0 - SP \$0

*Maximum benefit \$6,000 per year (only apply for dentures, crown, adjustments to dentures, other restorative services, prosthodontics - fixed (bridges), implant services, and implant supported prosthetics)

| CDT Code | Description | Fee Schedule | | Guidelines |
|--------------------------------------|---|----------------------|-----------------|--|
| | | General Dentist (GD) | Specialist (SP) | |
| Diagnostic and Preventive | | | | |
| D9310 | Professional Consultation | | \$60 | one per contract year |
| D0120 | Periodical Oral Evaluation - established patient | \$14.28 | \$14.28 | every 6 months |
| D0140 | Limited Oral Evaluation - problem focused | \$20.91 | \$25 | every 6 months |
| D0150 | Comprehensive Oral Exam - new or established patient | \$22.58 | - | every 36 months |
| D0210 | Intraoral complete series of radiographic images | \$47.47 | \$47.47 | one every 36 months |
| D0220 | Intraoral film - periapical first radiographic image | \$8.36 | \$8.36 | one per year |
| D0230 | Intraoral film - periapical each additional radiographic image | \$7.60 | \$7.60 | up to 5 per year |
| D0270 | Bitewing - single radiographic image | \$8.36 | \$8.36 | every 12 months |
| D0272 | Bitewing - two radiographic images | \$15.69 | \$15.69 | every 12 months |
| D0330 | Panoramic radiographic image | \$36.59 | \$55 | every 36 months |
| D1110 | Prophylaxis - adult | \$40.40 | \$40.40 | every 6 months |
| D1120 | Prophylaxis - child | \$25.25 | \$25.25 | every 6 months |
| D1208 | Topical application of fluoride | \$17.78 | \$17.78 | one every 6 months; up to 19 years of age |
| D1351 | Sealant per tooth | \$18.18 | \$18.18 | Unrestored tooth. One per tooth per life, up to 14 years (inclusive). Deciduous molars up to 8 years old |
| Restorative | | | | |
| D2140 | Amalgam - one surface, primary or permanent | \$34.67 | \$34.67 | one per tooth every 36 months |
| D2150 | Amalgam - two surfaces, primary or permanent | \$42.68 | \$42.68 | one per tooth every 36 months |
| D2160 | Amalgam - three surfaces, primary or permanent | \$50.92 | \$50.92 | one per tooth every 36 months |
| D2161 | Amalgam - four or more surfaces, primary or permanent | \$60.10 | \$60.10 | one per tooth every 36 months |
| D2330 | Resin based composite - one surface, anterior | \$39.93 | \$39.93 | one per tooth every 36 months |
| D2331 | Resin based composite - two surfaces, anterior | \$49.07 | \$49.07 | one per tooth every 36 months |
| D2332 | Resin based composite - three surfaces, anterior | \$58.81 | \$58.81 | one per tooth every 36 months |
| D2335 | Resin based composite - four or more surfaces | \$70.38 | \$70.38 | one per tooth every 36 months |
| D2391 | Resin based composite - one surface posterior | \$43.74 | \$43.74 | one per tooth every 36 months |
| D2392 | Resin based composite - two surface posterior | \$56.62 | \$56.62 | one per tooth every 36 months |
| D2393 | Resin based composite - three surface posterior | \$68 | \$68 | one per tooth every 36 months |
| D2394 | Resin based composite - four or more surface posterior | \$78.61 | \$78.61 | one per tooth every 36 months |
| D2930 | Prefabricated stainless steel crown - primary tooth (after a Pediatric pulpotomy) | \$60 | \$60 | one per tooth every 36 months |
| D2940 | Protective restoration | \$31.25 | \$31.25 | one per tooth per life |
| Other Restorative Services | | | | |
| D2950 | Core buildup, including any pins, when required | \$70 | \$70 | one per tooth per life |
| D2954 | Prefabricated post and core in addition to crown | \$100 | \$100 | one per tooth per life |
| Crown | | | | |
| D2740 | Crown porcelain/ceramic substrate | \$490 | - | Pre-determination required one per tooth every 5 years |
| D2750 | Crown porcelain fused to high noble metal | \$490 | \$490 | one per tooth every 5 years |
| D2751 | Crown porcelain fused to predominantly base metal | \$525 | \$525 | one per tooth every 5 years |
| D2752 | Crown porcelain fused to noble metal | \$435 | \$435 | one per tooth every 5 years |
| D2790 | Crown full cast high noble metal | \$300 | - | one per tooth every 5 years |
| Endodontics | | | | |
| D3220 | Therapeutic Pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of medicament | \$40 | \$50 | one per tooth per life |
| D3310 | Anterior (excluding final restoration) | \$250 | \$310 | unlimited per year |
| D3320 | Premolar (excluding final restoration) | \$310 | \$395 | unlimited per year |
| D3330 | Molar (excluding final restoration) | \$450 | \$560 | unlimited per year |
| D3346 | Retreatment of previous root canal therapy - anterior | - | \$310 | one per tooth per life after 5 year of initial treatment |
| D3347 | Retreatment of previous root canal therapy - premolar | - | \$395 | one per tooth per life after 5 year of initial treatment |
| D3348 | Retreatment of previous root canal therapy - molar | - | \$560 | one per tooth per life after 5 year of initial treatment |
| Periodontics | | | | |
| D4341 | Periodontal scaling and root planning - per quadrant* | \$68.25 | \$90 | Pre-determination required one every 12 months |
| D4355 | Full mouth debridement to enable a comprehensive oral evaluation and diagnosis on a subsequent visit | - | \$35 | one every 12 months |
| Prosthodontics | | | | |
| D5110 | Complete denture - maxillary* | \$468 | \$468 | Pre-determination required every 5 years |
| D5120 | Complete denture - mandibular* | \$468 | \$468 | every 5 years |
| D5130 | Immediate denture maxillary* | \$400 | \$400 | every 5 years |
| D5140 | Immediate denture mandibular* | \$400 | \$400 | every 5 years |
| D5211 | Maxillary partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5212 | Mandibular partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5213 | Maxillary partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5214 | Mandibular partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5225 | Maxillary partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5226 | Mandibular partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5282 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), maxillary* | \$245 | \$245 | every 5 years |
| D5283 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), mandibular* | \$245 | \$245 | every 5 years |
| D5410 | Adjust complete denture - maxillary | \$25 | \$25 | unlimited per year |
| D5411 | Adjust complete denture - mandibular | \$25 | \$25 | unlimited per year |
| D5421 | Adjust partial denture - maxillary | \$25 | \$25 | unlimited per year |
| D5422 | Adjust partial denture - mandibular | \$25 | \$25 | unlimited per year |
| Prosthodontics - Fixed | | | | |
| D6240 | Pontic - porcelain fused to high noble metal | \$400 | \$400 | Pre-determination required every 5 years |
| D6242 | Pontic - porcelain fused to noble metal | \$365 | \$365 | every 5 years |
| D6750 | Retainer crown - porcelain fused to high noble metal | \$490 | \$490 | every 5 years |
| D6752 | Retainer crown - porcelain fused to noble metal | \$435 | \$435 | every 5 years |
| Implant | | | | |
| D6010 | Surgical placement of implant body endosteal implant | \$835 | \$835 | Pre-determination required one per tooth area per life |
| D6011 | Second stage implant surgery | \$250 | \$250 | one per tooth area per life |
| Implant Supported Prosthetics | | | | |
| D6056 | Prefabricated abutment | \$300 | \$300 | Pre-determination required one per tooth every 5 years |
| D6057 | Custom fabricated abutment | \$450 | \$450 | one per tooth every 5 years |
| D6058 | Abutment supported porcelain - ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6059 | Abutment supported porcelain fused to metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6060 | Abutment supported porcelain fused to metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6061 | Abutment supported porcelain fused to metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6062 | Abutment supported cast metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6063 | Abutment supported cast metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6064 | Abutment supported cast metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6065 | Implant supported porcelain/ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6066 | Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6067 | Implant supported crown - high noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6068 | Abutment supported retainer for porcelain/ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6069 | Abutment supported retainer for porcelain fused to metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6070 | Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6071 | Abutment supported retainer for porcelain fused to metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6072 | Abutment supported retainer for cast metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6073 | Abutment supported retainer for cast metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6074 | Abutment supported retainer for cast metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6075 | Implant supported retainer for ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6076 | Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6077 | Implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6086 | Implant supported crown-predominantly base alloys | \$525 | \$525 | one per tooth every 5 years |
| D6087 | Implant supported crown - noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6088 | Implant supported crown - titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| D6094 | Abutment supported crown titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| Oral Surgery | | | | |
| D7140 | Extraction, erupted tooth or exposed root (elevation and/or forceps removal) | \$27.30 | \$40 | unlimited per year |
| D7210 | Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated | \$52.50 | \$110 | unlimited per year |
| D7220 | Removal of impacted tooth - soft tissue | \$94.50 | \$180 | unlimited per year |
| D7230 | Removal of impacted tooth - partially bony | \$131.25 | \$200 | unlimited per year |
| D7240 | Removal of impacted tooth - completely bony | \$131.25 | \$230 | unlimited per year |
| D7250 | Surgical removal of residual tooth roots (cutting procedure) | \$59 | \$120 | unlimited per year |
| Unclassified Treatment | | | | |
| D9110 | Palliative (emergency) treatment of dental pain - minor procedure | \$22 | \$22 | one per visit |

Services not included in this Dental Benefit Grid are not covered.

Services received from an out-of-network dentist (except emergency care) is not a covered benefit.
For internal use: DL0 / DEN532

HMO - H4007-019, H4007-022, H4007-026 (Platino HMO D-SNP)
 In Network Copay: GD \$0 - SP \$0

*Maximum benefit \$2,500 per year (only apply for dentures, crown, adjustments to dentures, other restorative services, prosthodontics - fixed (bridges), implant services, and implant supported prosthetics)

| CDT Code | Description | Fee Schedule | | Guidelines |
|--------------------------------------|---|----------------------|-----------------|--|
| | | General Dentist (GD) | Specialist (SP) | |
| Diagnostic and Preventive | | | | |
| D9310 | Professional Consultation | - | \$60 | one per contract year |
| D0120 | Periodical Oral Evaluation - established patient | \$14.28 | \$14.28 | every 6 months |
| D0140 | Limited Oral Evaluation - problem focused | \$20.91 | \$25 | every 6 months |
| D0150 | Comprehensive Oral Exam - new or established patient | \$22.58 | - | every 36 months |
| D0210 | Intraoral complete series of radiographic images | \$47.47 | \$47.47 | one every 36 months |
| D0220 | Intraoral film - periapical first radiographic image | \$8.36 | \$8.36 | one per year |
| D0230 | Intraoral film - periapical each additional radiographic image | \$7.60 | \$7.60 | up to 5 per year |
| D0270 | Bitewing - single radiographic image | \$8.36 | \$8.36 | every 12 months |
| D0272 | Bitewing - two radiographic images | \$15.69 | \$15.69 | every 12 months |
| D0330 | Panoramic radiographic image | \$36.59 | \$55 | every 36 months |
| D1110 | Prophylaxis - adult | \$40.40 | \$40.40 | every 6 months |
| D1120 | Prophylaxis - child | \$25.25 | \$25.25 | every 6 months |
| D1208 | Topical application of fluoride | \$17.78 | \$17.78 | one every 6 months; up to 19 years of age |
| D1351 | Sealant per tooth | \$18.18 | \$18.18 | Unrestored tooth. One per tooth per life, up to 14 years (inclusive). Deciduous molars up to 8 years old |
| Restorative | | | | |
| D2140 | Amalgam - one surface, primary or permanent | \$34.67 | \$34.67 | one per tooth every 36 months |
| D2150 | Amalgam - two surfaces, primary or permanent | \$42.68 | \$42.68 | one per tooth every 36 months |
| D2160 | Amalgam - three surfaces, primary or permanent | \$50.92 | \$50.92 | one per tooth every 36 months |
| D2161 | Amalgam - four or more surfaces, primary or permanent | \$60.10 | \$60.10 | one per tooth every 36 months |
| D2330 | Resin based composite - one surface, anterior | \$39.93 | \$39.93 | one per tooth every 36 months |
| D2331 | Resin based composite - two surfaces, anterior | \$49.07 | \$49.07 | one per tooth every 36 months |
| D2332 | Resin based composite - three surfaces, anterior | \$58.81 | \$58.81 | one per tooth every 36 months |
| D2335 | Resin based composite - four or more surfaces | \$70.38 | \$70.38 | one per tooth every 36 months |
| D2391 | Resin based composite - one surface posterior | \$43.74 | \$43.74 | one per tooth every 36 months |
| D2392 | Resin based composite - two surface posterior | \$56.62 | \$56.62 | one per tooth every 36 months |
| D2393 | Resin based composite - three surface posterior | \$68 | \$68 | one per tooth every 36 months |
| D2394 | Resin based composite - four or more surface posterior | \$78.61 | \$78.61 | one per tooth every 36 months |
| D2930 | Prefabricated stainless steel crown - primary tooth (after a Pediatric pulpotomy) | \$60 | \$60 | one per tooth every 36 months |
| D2940 | Protective restoration | \$31.25 | \$31.25 | one per tooth per life |
| Other Restorative Services | | | | |
| D2950 | Core buildup, including any pins, when required | \$70 | \$70 | one per tooth per life |
| D2954 | Prefabricated post and core in addition to crown | \$100 | \$100 | one per tooth per life |
| Crown | | | | |
| D2740 | Crown porcelain/ceramic substrate | \$490 | - | Pre-determination required one per tooth every 5 years |
| D2750 | Crown porcelain fused to high noble metal | \$490 | \$490 | one per tooth every 5 years |
| D2751 | Crown porcelain fused to predominantly base metal | \$525 | \$525 | one per tooth every 5 years |
| D2752 | Crown porcelain fused to noble metal | \$435 | \$435 | one per tooth every 5 years |
| D2790 | Crown full cast high noble metal | \$300 | - | one per tooth every 5 years |
| Endodontics | | | | |
| D3220 | Therapeutic Pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of medicament | \$40 | \$50 | one per tooth per life |
| D3310 | Anterior (excluding final restoration) | \$250 | \$310 | unlimited per year |
| D3320 | Premolar (excluding final restoration) | \$310 | \$395 | unlimited per year |
| D3330 | Molar (excluding final restoration) | \$450 | \$560 | unlimited per year |
| D3346 | Retreatment of previous root canal therapy - anterior | - | \$310 | one per tooth per life after 5 year of initial treatment |
| D3347 | Retreatment of previous root canal therapy - premolar | - | \$395 | one per tooth per life after 5 year of initial treatment |
| D3348 | Retreatment of previous root canal therapy - molar | - | \$560 | one per tooth per life after 5 year of initial treatment |
| Periodontics | | | | |
| D4341 | Periodontal scaling and root planning - per quadrant* | \$68.25 | \$90 | Pre-determination required one every 12 months |
| D4355 | Full mouth debridement to enable a comprehensive oral evaluation and diagnosis on a subsequent visit | - | \$35 | one every 12 months |
| Prosthodontics | | | | |
| D5110 | Complete denture - maxillary* | \$468 | \$468 | Pre-determination required every 5 years |
| D5120 | Complete denture - mandibular* | \$468 | \$468 | every 5 years |
| D5130 | Immediate denture maxillary* | \$400 | \$400 | every 5 years |
| D5140 | Immediate denture mandibular* | \$400 | \$400 | every 5 years |
| D5211 | Maxillary partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5212 | Mandibular partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5213 | Maxillary partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5214 | Mandibular partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5225 | Maxillary partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5226 | Mandibular partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5282 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), maxillary* | \$245 | \$245 | every 5 years |
| D5283 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), mandibular* | \$245 | \$245 | every 5 years |
| D5410 | Adjust complete denture - maxillary | \$25 | \$25 | unlimited per year |
| D5411 | Adjust complete denture - mandibular | \$25 | \$25 | unlimited per year |
| D5421 | Adjust partial denture - maxillary | \$25 | \$25 | unlimited per year |
| D5422 | Adjust partial denture - mandibular | \$25 | \$25 | unlimited per year |
| Prosthodontics - Fixed | | | | |
| D6240 | Pontic - porcelain fused to high noble metal | \$400 | \$400 | Pre-determination required every 5 years |
| D6242 | Pontic - porcelain fused to noble metal | \$365 | \$365 | every 5 years |
| D6750 | Retainer crown - porcelain fused to high noble metal | \$490 | \$490 | every 5 years |
| D6752 | Retainer crown - porcelain fused to noble metal | \$435 | \$435 | every 5 years |
| Implant | | | | |
| D6010 | Surgical placement of implant body endosteal implant | \$835 | \$835 | Pre-determination required one per tooth area per life |
| D6011 | Second stage implant surgery | \$250 | \$250 | one per tooth area per life |
| Implant Supported Prosthetics | | | | |
| D6056 | Prefabricated abutment | \$300 | \$300 | Pre-determination required one per tooth every 5 years |
| D6057 | Custom fabricated abutment | \$450 | \$450 | one per tooth every 5 years |
| D6058 | Abutment supported porcelain - ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6059 | Abutment supported porcelain fused to metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6060 | Abutment supported porcelain fused to metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6061 | Abutment supported porcelain fused to metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6062 | Abutment supported cast metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6063 | Abutment supported cast metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6064 | Abutment supported cast metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6065 | Implant supported porcelain/ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6066 | Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6067 | Implant supported crown - high noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6068 | Abutment supported retainer for porcelain/ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6069 | Abutment supported retainer for porcelain fused to metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6070 | Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6071 | Abutment supported retainer for porcelain fused to metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6072 | Abutment supported retainer for cast metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6073 | Abutment supported retainer for cast metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6074 | Abutment supported retainer for cast metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6075 | Implant supported retainer for ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6076 | Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6077 | Implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6086 | Implant supported crown-predominantly base alloys | \$525 | \$525 | one per tooth every 5 years |
| D6087 | Implant supported crown - noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6088 | Implant supported crown - titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| D6094 | Abutment supported crown titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| Oral Surgery | | | | |
| D7140 | Extraction, erupted tooth or exposed root (elevation and/or forceps removal) | \$27.30 | \$40 | unlimited per year |
| D7210 | Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated | \$52.50 | \$110 | unlimited per year |
| D7220 | Removal of impacted tooth - soft tissue | \$94.50 | \$180 | unlimited per year |
| D7230 | Removal of impacted tooth - partially bony | \$131.25 | \$200 | unlimited per year |
| D7240 | Removal of impacted tooth - completely bony | \$131.25 | \$230 | unlimited per year |
| D7250 | Surgical removal of residual tooth roots (cutting procedure) | \$59 | \$120 | unlimited per year |
| Unclassified Treatment | | | | |
| D9110 | Palliative (emergency) treatment of dental pain - minor procedure | \$22 | \$22 | one per visit |

Services received from an out-of-network dentist (except emergency care) is not a covered benefit.
For internal use: DL3, DL7, DM3 / DEN522

HMO - H4007-027 (Platino HMO D-SNP)

In Network Copay: GD \$0 - SP \$0

*Maximum benefit \$3,000 per year (only apply for dentures, crown, adjustments to dentures, other restorative services, prosthodontics - fixed (bridges), implant services, and implant supported prosthetics)

| CDT Code | Description | Fee Schedule | | Guidelines |
|--------------------------------------|---|----------------------|-----------------|--|
| | | General Dentist (GD) | Specialist (SP) | |
| Diagnostic and Preventive | | | | |
| D9310 | Professional Consultation | | \$60 | one per contract year |
| D0120 | Periodical Oral Evaluation - established patient | \$14.28 | \$14.28 | every 6 months |
| D0140 | Limited Oral Evaluation - problem focused | \$20.91 | \$25 | every 6 months |
| D0150 | Comprehensive Oral Exam - new or established patient | \$22.58 | - | every 36 months |
| D0210 | Intraoral complete series of radiographic images | \$47.47 | \$47.47 | one every 36 months |
| D0220 | Intraoral film - periapical first radiographic image | \$8.36 | \$8.36 | one per year |
| D0230 | Intraoral film - periapical each additional radiographic image | \$7.60 | \$7.60 | up to 5 per year |
| D0270 | Bitewing - single radiographic image | \$8.36 | \$8.36 | every 12 months |
| D0272 | Bitewing - two radiographic images | \$15.69 | \$15.69 | every 12 months |
| D0330 | Panoramic radiographic image | \$36.59 | \$55 | every 36 months |
| D1110 | Prophylaxis - adult | \$40.40 | \$40.40 | every 6 months |
| D1120 | Prophylaxis - child | \$25.25 | \$25.25 | every 6 months |
| D1208 | Topical application of fluoride | \$17.78 | \$17.78 | one every 6 months; up to 19 years of age |
| D1351 | Sealant per tooth | \$18.18 | \$18.18 | Unrestored tooth. One per tooth per life, up to 14 years (inclusive). Deciduous molars up to 8 years old |
| Restorative | | | | |
| D2140 | Amalgam - one surface, primary or permanent | \$34.67 | \$34.67 | one per tooth every 36 months |
| D2150 | Amalgam - two surfaces, primary or permanent | \$42.68 | \$42.68 | one per tooth every 36 months |
| D2160 | Amalgam - three surfaces, primary or permanent | \$50.92 | \$50.92 | one per tooth every 36 months |
| D2161 | Amalgam - four or more surfaces, primary or permanent | \$60.10 | \$60.10 | one per tooth every 36 months |
| D2330 | Resin based composite - one surface, anterior | \$39.93 | \$39.93 | one per tooth every 36 months |
| D2331 | Resin based composite - two surfaces, anterior | \$49.07 | \$49.07 | one per tooth every 36 months |
| D2332 | Resin based composite - three surfaces, anterior | \$58.81 | \$58.81 | one per tooth every 36 months |
| D2335 | Resin based composite - four or more surfaces | \$70.38 | \$70.38 | one per tooth every 36 months |
| D2391 | Resin based composite - one surface posterior | \$43.74 | \$43.74 | one per tooth every 36 months |
| D2392 | Resin based composite - two surface posterior | \$56.62 | \$56.62 | one per tooth every 36 months |
| D2393 | Resin based composite - three surface posterior | \$68 | \$68 | one per tooth every 36 months |
| D2394 | Resin based composite - four or more surface posterior | \$78.61 | \$78.61 | one per tooth every 36 months |
| D2930 | Prefabricated stainless steel crown - primary tooth (after a Pediatric pulpotomy) | \$60 | \$60 | one per tooth every 36 months |
| D2940 | Protective restoration | \$31.25 | \$31.25 | one per tooth per life |
| Other Restorative Services | | | | |
| D2950 | Core buildup, including any pins, when required | \$70 | \$70 | one per tooth per life |
| D2954 | Prefabricated post and core in addition to crown | \$100 | \$100 | one per tooth per life |
| Crown | | | | |
| D2740 | Crown porcelain/ceramic substrate | \$490 | - | Pre-determination required one per tooth every 5 years |
| D2750 | Crown porcelain fused to high noble metal | \$490 | \$490 | one per tooth every 5 years |
| D2751 | Crown porcelain fused to predominantly base metal | \$525 | \$525 | one per tooth every 5 years |
| D2752 | Crown porcelain fused to noble metal | \$435 | \$435 | one per tooth every 5 years |
| D2790 | Crown full cast high noble metal | \$300 | - | one per tooth every 5 years |
| Endodontics | | | | |
| D3220 | Therapeutic Pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of medicament | \$40 | \$50 | one per tooth per life |
| D3310 | Anterior (excluding final restoration) | \$250 | \$310 | unlimited per year |
| D3320 | Premolar (excluding final restoration) | \$310 | \$395 | unlimited per year |
| D3330 | Molar (excluding final restoration) | \$450 | \$560 | unlimited per year |
| D3346 | Retreatment of previous root canal therapy - anterior | - | \$310 | one per tooth per life after 5 year of initial treatment |
| D3347 | Retreatment of previous root canal therapy - premolar | - | \$395 | one per tooth per life after 5 year of initial treatment |
| D3348 | Retreatment of previous root canal therapy - molar | - | \$560 | one per tooth per life after 5 year of initial treatment |
| Periodontics | | | | |
| D4341 | Periodontal scaling and root planning - per quadrant* | \$68.25 | \$90 | *Pre-determination required one every 12 months |
| D4355 | Full mouth debridement to enable a comprehensive oral evaluation and diagnosis on a subsequent visit | - | \$35 | one every 12 months |
| Prosthodontics | | | | |
| D5110 | Complete denture - maxillary* | \$468 | \$468 | *Pre-determination required every 5 years |
| D5120 | Complete denture - mandibular* | \$468 | \$468 | every 5 years |
| D5130 | Immediate denture maxillary* | \$400 | \$400 | every 5 years |
| D5140 | Immediate denture mandibular* | \$400 | \$400 | every 5 years |
| D5211 | Maxillary partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5212 | Mandibular partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5213 | Maxillary partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5214 | Mandibular partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5225 | Maxillary partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5226 | Mandibular partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5282 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), maxillary* | \$245 | \$245 | every 5 years |
| D5283 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), mandibular* | \$245 | \$245 | every 5 years |
| D5410 | Adjust complete denture - maxillary | \$25 | \$25 | unlimited per year |
| D5411 | Adjust complete denture - mandibular | \$25 | \$25 | unlimited per year |
| D5421 | Adjust partial denture - maxillary | \$25 | \$25 | unlimited per year |
| D5422 | Adjust partial denture - mandibular | \$25 | \$25 | unlimited per year |
| Prosthodontics - Fixed | | | | |
| D6240 | Pontic - porcelain fused to high noble metal | \$400 | \$400 | Pre-determination required every 5 years |
| D6242 | Pontic - porcelain fused to noble metal | \$365 | \$365 | every 5 years |
| D6750 | Retainer crown - porcelain fused to high noble metal | \$490 | \$490 | every 5 years |
| D6752 | Retainer crown - porcelain fused to noble metal | \$435 | \$435 | every 5 years |
| Implant | | | | |
| D6010 | Surgical placement of implant body/endosteal implant | \$835 | \$835 | Pre-determination required one per tooth area per life |
| D6011 | Second stage implant surgery | \$250 | \$250 | one per tooth area per life |
| Implant Supported Prosthetics | | | | |
| D6056 | Prefabricated abutment | \$300 | \$300 | Pre-determination required one per tooth every 5 years |
| D6057 | Custom fabricated abutment | \$450 | \$450 | one per tooth every 5 years |
| D6058 | Abutment supported porcelain - ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6059 | Abutment supported porcelain fused to metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6060 | Abutment supported porcelain fused to metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6061 | Abutment supported porcelain fused to metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6062 | Abutment supported cast metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6063 | Abutment supported cast metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6064 | Abutment supported cast metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6065 | Implant supported porcelain/ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6066 | Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6067 | Implant supported crown - high noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6068 | Abutment supported retainer for porcelain/ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6069 | Abutment supported retainer for porcelain fused to metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6070 | Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6071 | Abutment supported retainer for porcelain fused to metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6072 | Abutment supported retainer for cast metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6073 | Abutment supported retainer for cast metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6074 | Abutment supported retainer for cast metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6075 | Implant supported retainer for ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6076 | Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6077 | Implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6086 | Implant supported crown-predominantly base alloys | \$525 | \$525 | one per tooth every 5 years |
| D6087 | Implant supported crown - noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6088 | Implant supported crown - titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| D6094 | Abutment supported crown titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| Oral Surgery | | | | |
| D7140 | Extraction, erupted tooth or exposed root (elevation and/or forceps removal) | \$27.30 | \$40 | unlimited per year |
| D7210 | Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated | \$52.50 | \$110 | unlimited per year |
| D7220 | Removal of impacted tooth - soft tissue | \$94.50 | \$180 | unlimited per year |
| D7230 | Removal of impacted tooth - partially bony | \$131.25 | \$200 | unlimited per year |
| D7240 | Removal of impacted tooth - completely bony | \$131.25 | \$230 | unlimited per year |
| D7250 | Surgical removal of residual tooth roots (cutting procedure) | \$59 | \$120 | unlimited per year |
| Unclassified Treatment | | | | |
| D9110 | Palliative (emergency) treatment of dental pain - minor procedure | \$22 | \$22 | one per visit |

Services not included in this Dental Benefit Grid are not covered.

Services received from an out-of-network dentist (except emergency care) is not a covered benefit.
For internal use: DM4 / DEN523

2023 Humana Gold Plus (HMO)

HMO - H4007-012

In Network Copay: GD \$0 - SP \$0

*Maximum benefit \$2,000 per year (only apply for implant services and implant supported prosthetics)

| CDT Code | Description | Fee Schedule | | Guidelines |
|---|---|----------------------|-----------------|--|
| | | General Dentist (GD) | Specialist (SP) | |
| Diagnostic and Preventive | | | | |
| D9310 | Professional Consultation | - | \$60 | one per contract year |
| D0120 | Periodical Oral Evaluation - established patient | \$14.28 | \$14.28 | every 6 months |
| D0140 | Limited Oral Evaluation - problem focused | \$20.91 | \$25 | every 6 months |
| D0150 | Comprehensive Oral Exam - new or established patient | \$22.58 | - | every 36 months |
| D0220 | Intraoral film - periapical first radiographic image | \$8.36 | \$8.36 | one per year |
| D0230 | Intraoral film - periapical each additional radiographic image | \$7.60 | \$7.60 | up to 5 per year |
| D0272 | Bitewing - two radiographic images | \$15.69 | \$15.69 | every 24 months |
| D0330 | Panoramic radiographic image | \$36.59 | \$55 | every 36 months |
| D1110 | Prophylaxis - adult | \$40.40 | \$40.40 | every 6 months |
| D1120 | Prophylaxis - child | \$25.25 | \$25.25 | every 6 months |
| Restorative | | | | |
| D2140 | Amalgam - one surface, primary or permanent | \$34.67 | \$34.67 | one per tooth every 36 months |
| D2150 | Amalgam - two surfaces, primary or permanent | \$42.68 | \$42.68 | one per tooth every 36 months |
| D2160 | Amalgam - three surfaces, primary or permanent | \$50.92 | \$50.92 | one per tooth every 36 months |
| D2161 | Amalgam - four or more surfaces, primary or permanent | \$60.10 | \$60.10 | one per tooth every 36 months |
| D2330 | Resin based composite - one surface, anterior | \$39.93 | \$39.93 | one per tooth every 36 months |
| D2331 | Resin based composite - two surfaces, anterior | \$49.07 | \$49.07 | one per tooth every 36 months |
| D2332 | Resin based composite - three surfaces, anterior | \$58.81 | \$58.81 | one per tooth every 36 months |
| D2335 | Resin based composite - four or more surfaces | \$70.38 | \$70.38 | one per tooth every 36 months |
| D2391 | Resin based composite - one surface posterior | \$43.74 | \$43.74 | one per tooth every 36 months |
| D2392 | Resin based composite - two surface posterior | \$56.62 | \$56.62 | one per tooth every 36 months |
| D2393 | Resin based composite - three surface posterior | \$68 | \$68 | one per tooth every 36 months |
| D2394 | Resin based composite - four or more surface posterior | \$78.61 | \$78.61 | one per tooth every 36 months |
| Other Restorative Services | | | | |
| D2950 | Core buildup, including any pins, when required | \$70 | \$70 | one per tooth per life |
| D2954 | Prefabricated post and core in addition to crown | \$100 | \$100 | one per tooth per life |
| Crown | | | | |
| D2740 | Crown porcelain/ceramic substrate | \$490 | - | one per tooth every 5 years |
| D2750 | Crown porcelain fused to high noble metal | \$490 | \$490 | one per tooth every 5 years |
| D2751 | Crown porcelain fused to predominantly base metal | \$525 | \$525 | one per tooth every 5 years |
| D2752 | Crown porcelain fused to noble metal | \$435 | \$435 | one per tooth every 5 years |
| D2790 | Crown full cast high noble metal | \$300 | - | one per tooth every 5 years |
| Endodontics | | | | |
| D3310 | Anterior (excluding final restoration) | \$250 | \$310 | unlimited per year |
| D3320 | Premolar (excluding final restoration) | \$310 | \$395 | unlimited per year |
| D3330 | Molar (excluding final restoration) | \$450 | \$560 | unlimited per year |
| D3346 | Retreatment of previous root canal therapy - anterior | - | \$310 | one per tooth per life after 5 year of initial treatment |
| D3347 | Retreatment of previous root canal therapy - premolar | - | \$395 | one per tooth per life after 5 year of initial treatment |
| D3348 | Retreatment of previous root canal therapy - molar | - | \$560 | one per tooth per life after 5 year of initial treatment |
| Periodontics | | | | |
| D4341 | Periodontal scaling and root planning - per quadrant* | \$68.25 | \$90 | one every 12 months |
| D4355 | Full mouth debridement to enable a comprehensive oral evaluation and diagnosis on a subsequent visit | - | \$35 | one every 12 months |
| Prosthodontics | | | | |
| Prosthodontics - Complete Dentures | | | | |
| D5110 | Complete denture - maxillary* | \$468 | \$468 | every 5 years |
| D5120 | Complete denture - mandibular* | \$468 | \$468 | every 5 years |
| D5130 | Immediate denture maxillary* | \$400 | \$400 | every 5 years |
| D5140 | Immediate denture mandibular* | \$400 | \$400 | every 5 years |
| D5211 | Maxillary partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5212 | Mandibular partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5213 | Maxillary partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5214 | Mandibular partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5225 | Maxillary partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5226 | Mandibular partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5282 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), maxillary* | \$245 | \$245 | every 5 years |
| D5283 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), mandibular* | \$245 | \$245 | every 5 years |
| D5410 | Adjust complete denture - maxillary | \$25 | \$25 | unlimited per year |
| D5411 | Adjust complete denture - mandibular | \$25 | \$25 | unlimited per year |
| D5421 | Adjust partial denture - maxillary | \$25 | \$25 | unlimited per year |
| D5422 | Adjust partial denture - mandibular | \$25 | \$25 | unlimited per year |
| Prosthodontics - Fixed | | | | |
| D6240 | Pontic - porcelain fused to high noble metal | \$400 | \$400 | every 5 years |
| D6242 | Pontic - porcelain fused to noble metal | \$365 | \$365 | every 5 years |
| D6750 | Retainer crown - porcelain fused to high noble metal | \$490 | \$490 | every 5 years |
| D6752 | Retainer crown - porcelain fused to noble metal | \$435 | \$435 | every 5 years |
| Implant | | | | |
| D6010 | Surgical placement of implant body endosteal implant | \$835 | \$835 | one per tooth area per life |
| D6011 | Second stage implant surgery | \$250 | \$250 | one per tooth area per life |
| Implant Supported Prosthetics | | | | |
| D6056 | Prefabricated abutment | \$300 | \$300 | one per tooth every 5 years |
| D6057 | Custom fabricated abutment | \$450 | \$450 | one per tooth every 5 years |
| D6058 | Abutment supported porcelain - ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6059 | Abutment supported porcelain fused to metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6060 | Abutment supported porcelain fused to metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6061 | Abutment supported porcelain fused to metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6062 | Abutment supported cast metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6063 | Abutment supported cast metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6064 | Abutment supported cast metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6065 | Implant supported porcelain/ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6066 | Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6067 | Implant supported crown - high noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6068 | Abutment supported retainer for porcelain/ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6069 | Abutment supported retainer for porcelain fused to metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6070 | Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6071 | Abutment supported retainer for porcelain fused to metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6072 | Abutment supported retainer for cast metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6073 | Abutment supported retainer for cast metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6074 | Abutment supported retainer for cast metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6075 | Implant supported retainer for ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6076 | Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6077 | Implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6086 | Implant supported crown-predominantly base alloys | \$525 | \$525 | one per tooth every 5 years |
| D6087 | Implant supported crown - noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6088 | Implant supported crown - titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| D6094 | Abutment supported crown titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| Oral Surgery | | | | |
| D7140 | Extraction, erupted tooth or exposed root (elevation and/or forceps removal) | \$27.30 | \$40 | unlimited per year |
| D7210 | Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated | \$52.50 | \$110 | unlimited per year |
| D7220 | Removal of impacted tooth - soft tissue | \$94.50 | \$180 | unlimited per year |
| D7230 | Removal of impacted tooth - partially bony | \$131.25 | \$200 | unlimited per year |
| D7240 | Removal of impacted tooth - completely bony | \$131.25 | \$230 | unlimited per year |
| D7250 | Surgical removal of residual tooth roots (cutting procedure) | \$59 | \$120 | unlimited per year |
| Unclassified Treatment | | | | |
| D9110 | Palliative (emergency) treatment of dental pain - minor procedure | \$22 | \$22 | one per visit |

Services not included in this Dental Benefit Grid are not covered.
Services received from an out-of-network dentist (except emergency care) is not a covered benefit.
For internal use: D18 / DEN602

HMO - H4007-020
In Network Copay: GD \$0 - SP \$0

*Maximum benefit \$1,500 per year (only apply for dentures, crown, adjustments to dentures, other restorative services, prosthodontics - fixed (bridges), implant services, and implant supported prosthetics)

| CDT Code | Description | Fee Schedule | | Guidelines |
|--------------------------------------|---|----------------------|-----------------|---|
| | | General Dentist (GD) | Specialist (SP) | |
| Diagnostic and Preventive | | | | |
| D9310 | Professional Consultation | - | \$60 | one per contract year |
| D0120 | Periodical Oral Evaluation - established patient | \$14.28 | \$14.28 | every 6 months |
| D0140 | Limited Oral Evaluation - problem focused | \$20.91 | \$25 | every 6 months |
| D0150 | Comprehensive Oral Exam - new or established patient | \$22.58 | - | every 36 months |
| D0220 | Intraoral film - periapical first radiographic image | \$8.36 | \$8.36 | one per year |
| D0230 | Intraoral film - periapical each additional radiographic image | \$7.60 | \$7.60 | up to 5 per year |
| D0272 | Bitewing - two radiographic images | \$15.69 | \$15.69 | every 24 months |
| D0330 | Panoramic radiographic image | \$36.59 | \$55 | every 36 months |
| D1110 | Prophylaxis - adult | \$40.40 | \$40.40 | every 6 months |
| D1120 | Prophylaxis - child | \$25.25 | \$25.25 | every 6 months |
| Restorative | | | | |
| D2140 | Amalgam - one surface, primary or permanent | \$34.67 | \$34.67 | one per tooth every 36 months |
| D2150 | Amalgam - two surfaces, primary or permanent | \$42.68 | \$42.68 | one per tooth every 36 months |
| D2160 | Amalgam - three surfaces, primary or permanent | \$50.92 | \$50.92 | one per tooth every 36 months |
| D2161 | Amalgam - four or more surfaces, primary or permanent | \$60.10 | \$60.10 | one per tooth every 36 months |
| D2330 | Resin based composite - one surface, anterior | \$39.93 | \$39.93 | one per tooth every 36 months |
| D2331 | Resin based composite - two surfaces, anterior | \$49.07 | \$49.07 | one per tooth every 36 months |
| D2332 | Resin based composite - three surfaces, anterior | \$58.81 | \$58.81 | one per tooth every 36 months |
| D2335 | Resin based composite - four or more surfaces | \$70.38 | \$70.38 | one per tooth every 36 months |
| D2391 | Resin based composite - one surface posterior | \$43.74 | \$43.74 | one per tooth every 36 months |
| D2392 | Resin based composite - two surface posterior | \$56.62 | \$56.62 | one per tooth every 36 months |
| D2393 | Resin based composite - three surface posterior | \$68 | \$68 | one per tooth every 36 months |
| D2394 | Resin based composite - four or more surface posterior | \$78.61 | \$78.61 | one per tooth every 36 months |
| Other Restorative Services | | | | |
| D2950 | Core buildup, including any pins, when required | \$70 | \$70 | one per tooth per life |
| D2954 | Prefabricated post and core in addition to crown | \$100 | \$100 | one per tooth per life |
| Crown | | | | |
| D2740 | Crown porcelain/ceramic substrate | \$490 | - | Pre-determination required one per tooth every 5 years |
| D2750 | Crown porcelain fused to high noble metal | \$490 | \$490 | one per tooth every 5 years |
| D2751 | Crown porcelain fused to predominantly base metal | \$525 | \$525 | one per tooth every 5 years |
| D2752 | Crown porcelain fused to noble metal | \$435 | \$435 | one per tooth every 5 years |
| D2790 | Crown full cast high noble metal | \$300 | - | one per tooth every 5 years |
| Endodontics | | | | |
| D3310 | Anterior (excluding final restoration) | \$250 | \$310 | unlimited per year |
| D3320 | Premolar (excluding final restoration) | \$310 | \$395 | unlimited per year |
| D3330 | Molar (excluding final restoration) | \$450 | \$560 | unlimited per year |
| D3346 | Retreatment of previous root canal therapy - anterior | - | \$310 | one per tooth per life after 5 year of initial treatment |
| D3347 | Retreatment of previous root canal therapy - premolar | - | \$395 | one per tooth per life after 5 year of initial treatment |
| D3348 | Retreatment of previous root canal therapy - molar | - | \$560 | one per tooth per life after 5 year of initial treatment |
| Periodontics | | | | |
| D4341 | Periodontal scaling and root planning - per quadrant* | \$68.25 | \$90 | Pre-determination required one every 12 months |
| D4355 | Full mouth debridement to enable a comprehensive oral evaluation and diagnosis on a subsequent visit | - | \$35 | one every 12 months |
| Prosthodontics | | | | |
| *Pre-determination required | | | | |
| D5110 | Complete denture - maxillary* | \$468 | \$468 | every 5 years |
| D5120 | Complete denture - mandibular* | \$468 | \$468 | every 5 years |
| D5130 | Immediate denture maxillary* | \$400 | \$400 | every 5 years |
| D5140 | Immediate denture mandibular* | \$400 | \$400 | every 5 years |
| D5211 | Maxillary partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5212 | Mandibular partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5213 | Maxillary partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5214 | Mandibular partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5225 | Maxillary partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5226 | Mandibular partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5282 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), maxillary* | \$245 | \$245 | every 5 years |
| D5283 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), mandibular* | \$245 | \$245 | every 5 years |
| D5410 | Adjust complete denture - maxillary | \$25 | \$25 | unlimited per year |
| D5411 | Adjust complete denture - mandibular | \$25 | \$25 | unlimited per year |
| D5421 | Adjust partial denture - maxillary | \$25 | \$25 | unlimited per year |
| D5422 | Adjust partial denture - mandibular | \$25 | \$25 | unlimited per year |
| Prosthodontics - Fixed | | | | |
| Pre-determination required | | | | |
| D6240 | Pontic - porcelain fused to high noble metal | \$400 | \$400 | every 5 years |
| D6242 | Pontic - porcelain fused to noble metal | \$365 | \$365 | every 5 years |
| D6750 | Retainer crown - porcelain fused to high noble metal | \$490 | \$490 | every 5 years |
| D6752 | Retainer crown - porcelain fused to noble metal | \$435 | \$435 | every 5 years |
| Implant | | | | |
| Pre-determination required | | | | |
| D6010 | Surgical placement of implant body endosteal implant | \$835 | \$835 | one per tooth area per life |
| D6011 | Second stage implant surgery | \$250 | \$250 | one per tooth area per life |
| Implant Supported Prosthetics | | | | |
| Pre-determination required | | | | |
| D6056 | Prefabricated abutment | \$300 | \$300 | one per tooth every 5 years |
| D6057 | Custom fabricated abutment | \$450 | \$450 | one per tooth every 5 years |
| D6058 | Abutment supported porcelain - ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6059 | Abutment supported porcelain fused to metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6060 | Abutment supported porcelain fused to metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6061 | Abutment supported porcelain fused to metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6062 | Abutment supported cast metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6063 | Abutment supported cast metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6064 | Abutment supported cast metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6065 | Implant supported porcelain/ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6066 | Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6067 | Implant supported crown - high noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6068 | Abutment supported retainer for porcelain/ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6069 | Abutment supported retainer for porcelain fused to metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6070 | Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6071 | Abutment supported retainer for porcelain fused to metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6072 | Abutment supported retainer for cast metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6073 | Abutment supported retainer for cast metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6074 | Abutment supported retainer for cast metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6075 | Implant supported retainer for ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6076 | Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6077 | Implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6086 | Implant supported crown-predominantly base alloys | \$525 | \$525 | one per tooth every 5 years |
| D6087 | Implant supported crown - noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6088 | Implant supported crown - titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| D6094 | Abutment supported crown titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| Oral Surgery | | | | |
| D7140 | Extraction, erupted tooth or exposed root (elevation and/or forceps removal) | \$27.30 | \$40 | unlimited per year |
| D7210 | Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated | \$52.50 | \$110 | unlimited per year |
| D7220 | Removal of impacted tooth - soft tissue | \$94.50 | \$180 | unlimited per year |
| D7230 | Removal of impacted tooth - partially bony | \$131.25 | \$200 | unlimited per year |
| D7240 | Removal of impacted tooth - completely bony | \$131.25 | \$230 | unlimited per year |
| D7250 | Surgical removal of residual tooth roots (cutting procedure) | \$59 | \$120 | unlimited per year |
| Unclassified Treatment | | | | |
| D9110 | Palliative (emergency) treatment of dental pain - minor procedure | \$22 | \$22 | one per visit |

Services not included in this Dental Benefit Grid are not covered.

Services received from an out-of-network dentist (except emergency care) is not a covered benefit.
For internal use: DL5 / DEN693

HMO - H4007-021
In Network Copy: GD \$0 - SP \$0

*Maximum benefit \$2,500 per year (only apply for dentures, crown, adjustments to dentures, other restorative services, prosthodontics - fixed (bridges), implant services, and implant supported prosthetics)

| CDT Code | Description | Fee Schedule | | Guidelines |
|--------------------------------------|---|----------------------|-----------------|---|
| | | General Dentist (GD) | Specialist (SP) | |
| Diagnostic and Preventive | | | | |
| D9310 | Professional Consultation | - | \$60 | one per contract year |
| D0120 | Periodical Oral Evaluation - established patient | \$14.28 | \$14.28 | every 6 months |
| D0140 | Limited Oral Evaluation - problem focused | \$20.91 | \$25 | every 6 months |
| D0150 | Comprehensive Oral Exam - new or established patient | \$22.58 | - | every 36 months |
| D0220 | Intraoral film - periapical first radiographic image | \$8.36 | \$9.36 | one per year |
| D0230 | Intraoral film - periapical each additional radiographic image | \$7.60 | \$7.60 | up to 5 per year |
| D0272 | Bitewing - two radiographic images | \$15.69 | \$15.69 | every 24 months |
| D0330 | Panoramic radiographic image | \$36.59 | \$55 | every 36 months |
| D1110 | Prophylaxis - adult | \$40.40 | \$40.40 | every 6 months |
| D1120 | Prophylaxis - child | \$25.25 | \$25.25 | every 6 months |
| Restorative | | | | |
| D2140 | Amalgam - one surface, primary or permanent | \$34.67 | \$34.67 | one per tooth every 36 months |
| D2150 | Amalgam - two surfaces, primary or permanent | \$42.68 | \$42.68 | one per tooth every 36 months |
| D2160 | Amalgam - three surfaces, primary or permanent | \$50.92 | \$50.92 | one per tooth every 36 months |
| D2161 | Amalgam - four or more surfaces, primary or permanent | \$60.10 | \$60.10 | one per tooth every 36 months |
| D2330 | Resin based composite - one surface, anterior | \$39.93 | \$39.93 | one per tooth every 36 months |
| D2331 | Resin based composite - two surfaces, anterior | \$49.07 | \$49.07 | one per tooth every 36 months |
| D2332 | Resin based composite - three surfaces, anterior | \$58.81 | \$58.81 | one per tooth every 36 months |
| D2335 | Resin based composite - four or more surfaces | \$70.38 | \$70.38 | one per tooth every 36 months |
| D2391 | Resin based composite - one surface posterior | \$43.74 | \$43.74 | one per tooth every 36 months |
| D2392 | Resin based composite - two surface posterior | \$56.62 | \$56.62 | one per tooth every 36 months |
| D2393 | Resin based composite - three surface posterior | \$68 | \$68 | one per tooth every 36 months |
| D2394 | Resin based composite - four or more surface posterior | \$78.61 | \$78.61 | one per tooth every 36 months |
| Other Restorative Services | | | | |
| D2950 | Core buildup, including any pins, when required | \$70 | \$70 | one per tooth per life |
| D2954 | Prefabricated post and core in addition to crown | \$100 | \$100 | one per tooth per life |
| Crown | | | | |
| D2740 | Crown porcelain/ceramic substrate | \$490 | - | Pre-determination required one per tooth every 5 years |
| D2750 | Crown porcelain fused to high noble metal | \$490 | \$490 | one per tooth every 5 years |
| D2751 | Crown porcelain fused to predominantly base metal | \$525 | \$525 | one per tooth every 5 years |
| D2752 | Crown porcelain fused to noble metal | \$435 | \$435 | one per tooth every 5 years |
| D2790 | Crown full cast high noble metal | \$300 | - | one per tooth every 5 years |
| Endodontics | | | | |
| D3310 | Anterior (excluding final restoration) | \$250 | \$310 | unlimited per year |
| D3320 | Premolar (excluding final restoration) | \$310 | \$395 | unlimited per year |
| D3330 | Molar (excluding final restoration) | \$450 | \$560 | unlimited per year |
| D3346 | Retreatment of previous root canal therapy - anterior | - | \$310 | one per tooth per life after 5 year of initial treatment |
| D3347 | Retreatment of previous root canal therapy - premolar | - | \$395 | one per tooth per life after 5 year of initial treatment |
| D3348 | Retreatment of previous root canal therapy - molar | - | \$560 | one per tooth per life after 5 year of initial treatment |
| Periodontics | | | | |
| D4341 | Periodontal scaling and root planning - per quadrant* | \$68.25 | \$90 | one every 12 months |
| D4355 | Full mouth debridement to enable a comprehensive oral evaluation and diagnosis on a subsequent visit | - | \$35 | one every 12 months |
| Prosthodontics | | | | |
| *Pre-determination required | | | | |
| D5110 | Complete denture - maxillary* | \$468 | \$468 | every 5 years |
| D5120 | Complete denture - mandibular* | \$468 | \$468 | every 5 years |
| D5130 | Immediate denture maxillary* | \$400 | \$400 | every 5 years |
| D5140 | Immediate denture mandibular* | \$400 | \$400 | every 5 years |
| D5211 | Maxillary partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5212 | Mandibular partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5213 | Maxillary partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5214 | Mandibular partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5225 | Maxillary partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5226 | Mandibular partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5282 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), maxillary* | \$245 | \$245 | every 5 years |
| D5283 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), mandibular* | \$245 | \$245 | every 5 years |
| D5410 | Adjust complete denture - maxillary | \$25 | \$25 | unlimited per year |
| D5411 | Adjust complete denture - mandibular | \$25 | \$25 | unlimited per year |
| D5421 | Adjust partial denture - maxillary | \$25 | \$25 | unlimited per year |
| D5422 | Adjust partial denture - mandibular | \$25 | \$25 | unlimited per year |
| Prosthodontics - Fixed | | | | |
| Pre-determination required | | | | |
| D6240 | Pontic - porcelain fused to high noble metal | \$400 | \$400 | every 5 years |
| D6242 | Pontic - porcelain fused to noble metal | \$365 | \$365 | every 5 years |
| D6750 | Retainer crown - porcelain fused to high noble metal | \$490 | \$490 | every 5 years |
| D6752 | Retainer crown - porcelain fused to noble metal | \$435 | \$435 | every 5 years |
| Implant | | | | |
| Pre-determination required | | | | |
| D6010 | Surgical placement of implant body endosteal implant | \$835 | \$835 | one per tooth area per life |
| D6011 | Second stage implant surgery | \$250 | \$250 | one per tooth area per life |
| Implant Supported Prosthetics | | | | |
| Pre-determination required | | | | |
| D6056 | Prefabricated abutment | \$300 | \$300 | one per tooth every 5 years |
| D6057 | Custom fabricated abutment | \$450 | \$450 | one per tooth every 5 years |
| D6058 | Abutment supported porcelain - ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6059 | Abutment supported porcelain fused to metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6060 | Abutment supported porcelain fused to metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6061 | Abutment supported porcelain fused to metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6062 | Abutment supported cast metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6063 | Abutment supported cast metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6064 | Abutment supported cast metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6065 | Implant supported porcelain/ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6066 | Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6067 | Implant supported crown - high noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6068 | Abutment supported retainer for porcelain/ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6069 | Abutment supported retainer for porcelain fused to metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6070 | Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6071 | Abutment supported retainer for porcelain fused to metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6072 | Abutment supported retainer for cast metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6073 | Abutment supported retainer for cast metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6074 | Abutment supported retainer for cast metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6075 | Implant supported retainer for ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6076 | Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6077 | Implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6086 | Implant supported crown-predominantly base alloys | \$525 | \$525 | one per tooth every 5 years |
| D6087 | Implant supported crown - noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6088 | Implant supported crown - titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| D6094 | Abutment supported crown titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| Oral Surgery | | | | |
| D7140 | Extraction, erupted tooth or exposed root (elevation and/or forceps removal) | \$27.30 | \$40 | unlimited per year |
| D7210 | Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated | \$52.50 | \$110 | unlimited per year |
| D7220 | Removal of impacted tooth - soft tissue | \$94.50 | \$180 | unlimited per year |
| D7230 | Removal of impacted tooth - partially bony | \$131.25 | \$200 | unlimited per year |
| D7240 | Removal of impacted tooth - completely bony | \$131.25 | \$230 | unlimited per year |
| D7250 | Surgical removal of residual tooth roots (cutting procedure) | \$59 | \$120 | unlimited per year |
| Unclassified Treatment | | | | |
| D9110 | Palliative (emergency) treatment of dental pain - minor procedure | \$22 | \$22 | one per visit |

Services not included in this Dental Benefit Grid are not covered.
Services received from an out-of-network dentist (except emergency care) is not a covered benefit.
For internal use: DL6 / DEN542

HMO - H4007-024, H4007-025
In Network Copy: GD 50 - SP 50

*Maximum benefit \$7,500 per year (only apply for dentures, crown, adjustments to dentures, other restorative services, prosthodontics - fixed (bridges), implant services, and implant supported prosthetics)

| CDT Code | Description | Fee Schedule | | Guidelines |
|--------------------------------------|---|----------------------|-----------------|---|
| | | General Dentist (GD) | Specialist (SP) | |
| Diagnostic and Preventive | | | | |
| D9310 | Professional Consultation | - | \$60 | one per contract year |
| D0120 | Periodical Oral Evaluation - established patient | \$14.28 | \$14.28 | every 6 months |
| D0140 | Limited Oral Evaluation - problem focused | \$20.91 | \$25 | every 6 months |
| D0150 | Comprehensive Oral Exam - new or established patient | \$22.58 | - | every 36 months |
| D0220 | Intraoral film - periapical first radiographic image | \$8.36 | \$9.36 | one per year |
| D0230 | Intraoral film - periapical each additional radiographic image | \$7.60 | \$7.60 | up to 5 per year |
| D0272 | Bitewing - two radiographic images | \$15.69 | \$15.69 | every 24 months |
| D0330 | Panoramic radiographic image | \$36.59 | \$55 | every 36 months |
| D1110 | Prophylaxis - adult | \$40.40 | \$40.40 | every 6 months |
| D1120 | Prophylaxis - child | \$25.25 | \$25.25 | every 6 months |
| Restorative | | | | |
| D2140 | Amalgam - one surface, primary or permanent | \$34.67 | \$34.67 | one per tooth every 36 months |
| D2150 | Amalgam - two surfaces, primary or permanent | \$42.68 | \$42.68 | one per tooth every 36 months |
| D2160 | Amalgam - three surfaces, primary or permanent | \$50.92 | \$50.92 | one per tooth every 36 months |
| D2161 | Amalgam - four or more surfaces, primary or permanent | \$60.10 | \$60.10 | one per tooth every 36 months |
| D2330 | Resin based composite - one surface, anterior | \$39.93 | \$39.93 | one per tooth every 36 months |
| D2331 | Resin based composite - two surfaces, anterior | \$49.07 | \$49.07 | one per tooth every 36 months |
| D2332 | Resin based composite - three surfaces, anterior | \$58.81 | \$58.81 | one per tooth every 36 months |
| D2335 | Resin based composite - four or more surfaces | \$70.38 | \$70.38 | one per tooth every 36 months |
| D2391 | Resin based composite - one surface posterior | \$43.74 | \$43.74 | one per tooth every 36 months |
| D2392 | Resin based composite - two surface posterior | \$56.62 | \$56.62 | one per tooth every 36 months |
| D2393 | Resin based composite - three surface posterior | \$68 | \$68 | one per tooth every 36 months |
| D2394 | Resin based composite - four or more surface posterior | \$78.61 | \$78.61 | one per tooth every 36 months |
| Other Restorative Services | | | | |
| D2950 | Core buildup, including any pins, when required | \$70 | \$70 | one per tooth per life |
| D2954 | Prefabricated post and core in addition to crown | \$100 | \$100 | one per tooth per life |
| Crown | | | | |
| D2740 | Crown porcelain/ceramic substrate | \$490 | - | Pre-determination required one per tooth every 5 years |
| D2750 | Crown porcelain fused to high noble metal | \$490 | \$490 | one per tooth every 5 years |
| D2751 | Crown porcelain fused to predominantly base metal | \$525 | \$525 | one per tooth every 5 years |
| D2752 | Crown porcelain fused to noble metal | \$435 | \$435 | one per tooth every 5 years |
| D2790 | Crown full cast high noble metal | \$300 | - | one per tooth every 5 years |
| Endodontics | | | | |
| D3310 | Anterior (excluding final restoration) | \$250 | \$310 | unlimited per year |
| D3320 | Premolar (excluding final restoration) | \$310 | \$395 | unlimited per year |
| D3330 | Molar (excluding final restoration) | \$450 | \$560 | unlimited per year |
| D3346 | Retreatment of previous root canal therapy - anterior | - | \$310 | one per tooth per life after 5 year of initial treatment |
| D3347 | Retreatment of previous root canal therapy - premolar | - | \$395 | one per tooth per life after 5 year of initial treatment |
| D3348 | Retreatment of previous root canal therapy - molar | - | \$560 | one per tooth per life after 5 year of initial treatment |
| Periodontics | | | | |
| D4341 | Periodontal scaling and root planning - per quadrant* | \$68.25 | \$90 | one every 12 months |
| D4355 | Full mouth debridement to enable a comprehensive oral evaluation and diagnosis on a subsequent visit | - | \$35 | one every 12 months |
| Prosthodontics | | | | |
| D5110 | Complete denture - maxillary* | \$468 | \$468 | Pre-determination required every 5 years |
| D5120 | Complete denture - mandibular* | \$468 | \$468 | every 5 years |
| D5130 | Immediate denture maxillary* | \$400 | \$400 | every 5 years |
| D5140 | Immediate denture mandibular* | \$400 | \$400 | every 5 years |
| D5211 | Maxillary partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5212 | Mandibular partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5213 | Maxillary partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5214 | Mandibular partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5225 | Maxillary partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5226 | Mandibular partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5282 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), maxillary* | \$245 | \$245 | every 5 years |
| D5283 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), mandibular* | \$245 | \$245 | every 5 years |
| D5410 | Adjust complete denture - maxillary | \$25 | \$25 | unlimited per year |
| D5411 | Adjust complete denture - mandibular | \$25 | \$25 | unlimited per year |
| D5421 | Adjust partial denture - maxillary | \$25 | \$25 | unlimited per year |
| D5422 | Adjust partial denture - mandibular | \$25 | \$25 | unlimited per year |
| Prosthodontics - Fixed | | | | |
| D6240 | Pontic - porcelain fused to high noble metal | \$400 | \$400 | Pre-determination required every 5 years |
| D6242 | Pontic - porcelain fused to noble metal | \$365 | \$365 | every 5 years |
| D6750 | Retainer crown - porcelain fused to high noble metal | \$490 | \$490 | every 5 years |
| D6752 | Retainer crown - porcelain fused to noble metal | \$435 | \$435 | every 5 years |
| Implant | | | | |
| D6010 | Surgical placement of implant body endosteal implant | \$835 | \$835 | Pre-determination required one per tooth area per life |
| D6011 | Second stage implant surgery | \$250 | \$250 | one per tooth area per life |
| Implant Supported Prosthetics | | | | |
| D6056 | Prefabricated abutment | \$300 | \$300 | Pre-determination required one per tooth every 5 years |
| D6057 | Custom fabricated abutment | \$450 | \$450 | one per tooth every 5 years |
| D6058 | Abutment supported porcelain - ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6059 | Abutment supported porcelain fused to metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6060 | Abutment supported porcelain fused to metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6061 | Abutment supported porcelain fused to metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6062 | Abutment supported cast metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6063 | Abutment supported cast metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6064 | Abutment supported cast metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6065 | Implant supported porcelain/ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6066 | Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6067 | Implant supported crown - high noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6068 | Abutment supported retainer for porcelain/ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6069 | Abutment supported retainer for porcelain fused to metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6070 | Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6071 | Abutment supported retainer for porcelain fused to metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6072 | Abutment supported retainer for cast metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6073 | Abutment supported retainer for cast metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6074 | Abutment supported retainer for cast metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6075 | Implant supported retainer for ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6076 | Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6077 | Implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6086 | Implant supported crown-predominantly base alloys | \$525 | \$525 | one per tooth every 5 years |
| D6087 | Implant supported crown - noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6088 | Implant supported crown - titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| D6094 | Abutment supported crown titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| Oral Surgery | | | | |
| D7140 | Extraction, erupted tooth or exposed root (elevation and/or forceps removal) | \$27.30 | \$40 | unlimited per year |
| D7210 | Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated | \$52.50 | \$110 | unlimited per year |
| D7220 | Removal of impacted tooth - soft tissue | \$94.50 | \$180 | unlimited per year |
| D7230 | Removal of impacted tooth - partially bony | \$131.25 | \$200 | unlimited per year |
| D7240 | Removal of impacted tooth - completely bony | \$131.25 | \$230 | unlimited per year |
| D7250 | Surgical removal of residual tooth roots (cutting procedure) | \$59 | \$120 | unlimited per year |
| Unclassified Treatment | | | | |
| D9110 | Palliative (emergency) treatment of dental pain - minor procedure | \$22 | \$22 | one per visit |

Services not included in this Dental Benefit Grid are not covered.
Services received from an out-of-network dentist (except emergency care) is not a covered benefit.
For internal use: DM1, DM2 / DEN601

LPPD - H2023-001

In Network Copay: **GD \$0 - SP \$0 / Out-of-Network Coinsurance: GD 50% - SP 50%**

*Maximum benefit \$1,500 per year (only apply for dentures, crown, adjustments to dentures, other restorative services, prosthodontics - fixed (bridges), implant services, and implant supported prosthetics)

| CDT Code | Description | Fee Schedule | | Guidelines |
|--------------------------------------|---|----------------------|-----------------|--|
| | | General Dentist (GD) | Specialist (SP) | |
| Diagnostic and Preventive | | | | |
| D9310 | Professional Consultation | - | \$60 | one per contract year |
| D0120 | Periodical Oral Evaluation - established patient | \$14.28 | \$14.28 | every 6 months |
| D0140 | Limited Oral Evaluation - problem focused | \$20.91 | \$25 | every 6 months |
| D0150 | Comprehensive Oral Exam - new or established patient | \$22.58 | - | every 36 months |
| D0220 | Intraoral film - periapical first radiographic image | \$8.36 | \$8.36 | one per year |
| D0230 | Intraoral film - periapical each additional radiographic image | \$7.60 | \$7.60 | up to 5 per year |
| D0272 | Bitewing - two radiographic images | \$15.69 | \$15.69 | every 24 months |
| D0330 | Panoramic radiographic image | \$36.59 | \$55 | every 36 months |
| D1110 | Prophylaxis - adult | \$40.40 | \$40.40 | every 6 months |
| D1120 | Prophylaxis - child | \$25.25 | \$25.25 | every 6 months |
| Restorative | | | | |
| D2140 | Amalgam - one surface, primary or permanent | \$34.67 | \$34.67 | one per tooth every 36 months |
| D2150 | Amalgam - two surfaces, primary or permanent | \$42.88 | \$42.88 | one per tooth every 36 months |
| D2160 | Amalgam - three surfaces, primary or permanent | \$50.92 | \$50.92 | one per tooth every 36 months |
| D2161 | Amalgam - four or more surfaces, primary or permanent | \$60.10 | \$60.10 | one per tooth every 36 months |
| D2330 | Resin based composite - one surface, anterior | \$39.93 | \$39.93 | one per tooth every 36 months |
| D2331 | Resin based composite - two surfaces, anterior | \$49.07 | \$49.07 | one per tooth every 36 months |
| D2332 | Resin based composite - three surfaces, anterior | \$58.81 | \$58.81 | one per tooth every 36 months |
| D2335 | Resin based composite - four or more surfaces | \$70.38 | \$70.38 | one per tooth every 36 months |
| D2391 | Resin based composite - one surface posterior | \$43.74 | \$43.74 | one per tooth every 36 months |
| D2392 | Resin based composite - two surface posterior | \$56.62 | \$56.62 | one per tooth every 36 months |
| D2393 | Resin based composite - three surface posterior | \$68.56 | \$68.56 | one per tooth every 36 months |
| D2394 | Resin based composite - four or more surface posterior | \$78.61 | \$78.61 | one per tooth every 36 months |
| Other Restorative Services | | | | |
| D2950 | Core buildup, including any pins, when required | \$70 | \$70 | one per tooth per life |
| D2954 | Prefabricated post and core in addition to crown | \$100 | \$100 | one per tooth per life |
| Crown | | | | |
| D2740 | Crown porcelain/ceramic substrate | \$490 | - | one per tooth every 5 years |
| D2750 | Crown porcelain fused to high noble metal | \$490 | \$490 | one per tooth every 5 years |
| D2751 | Crown porcelain fused to predominantly base metal | \$525 | \$525 | one per tooth every 5 years |
| D2752 | Crown porcelain fused to noble metal | \$435 | \$435 | one per tooth every 5 years |
| D2790 | Crown full cast high noble metal | \$300 | - | one per tooth every 5 years |
| Endodontics | | | | |
| D3310 | Anterior (excluding final restoration) | \$250 | \$310 | unlimited per year |
| D3320 | Premolar (excluding final restoration) | \$310 | \$395 | unlimited per year |
| D3330 | Molar (excluding final restoration) | \$450 | \$560 | unlimited per year |
| D3346 | Retreatment of previous root canal therapy - anterior | - | \$310 | one per tooth per life after 5 year of initial treatment |
| D3347 | Retreatment of previous root canal therapy - premolar | - | \$395 | one per tooth per life after 5 year of initial treatment |
| D3348 | Retreatment of previous root canal therapy - molar | - | \$560 | one per tooth per life after 5 year of initial treatment |
| Periodontics | | | | |
| D4341 | Periodontal scaling and root planning - per quadrant* | \$68.25 | \$90 | one every 12 months |
| D4355 | Full mouth debridement to enable a comprehensive oral evaluation and diagnosis on a subsequent visit | - | \$35 | one every 12 months |
| Prosthodontics | | | | |
| D5110 | Complete denture - maxillary* | \$468 | \$468 | every 5 years |
| D5120 | Complete denture - mandibular* | \$468 | \$468 | every 5 years |
| D5130 | Immediate denture maxillary* | \$400 | \$400 | every 5 years |
| D5140 | Immediate denture mandibular* | \$400 | \$400 | every 5 years |
| D5211 | Maxillary partial denture resin base (including any conventional clasps, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5212 | Mandibular partial denture resin base (including any conventional clasps, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5213 | Maxillary partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5214 | Mandibular partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5225 | Maxillary partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5226 | Mandibular partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5282 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), maxillary* | \$245 | \$245 | every 5 years |
| D5283 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), mandibular* | \$245 | \$245 | every 5 years |
| D5410 | Adjust complete denture - maxillary | \$25 | \$25 | unlimited per year |
| D5411 | Adjust complete denture - mandibular | \$25 | \$25 | unlimited per year |
| D5421 | Adjust partial denture - maxillary | \$25 | \$25 | unlimited per year |
| D5422 | Adjust partial denture - mandibular | \$25 | \$25 | unlimited per year |
| Prosthodontics - Fixed | | | | |
| D6240 | Pontic - porcelain fused to high noble metal | \$400 | \$400 | every 5 years |
| D6242 | Pontic - porcelain fused to noble metal | \$365 | \$365 | every 5 years |
| D6750 | Retainer crown - porcelain fused to high noble metal | \$490 | \$490 | every 5 years |
| D6752 | Retainer crown - porcelain fused to noble metal | \$435 | \$435 | every 5 years |
| Implant | | | | |
| D6010 | Surgical placement of implant body endosteal implant | \$835 | \$835 | one per tooth area per life |
| D6011 | Second stage implant surgery | \$250 | \$250 | one per tooth area per life |
| Implant Supported Prosthetics | | | | |
| D6056 | Prefabricated abutment | \$300 | \$300 | one per tooth every 5 years |
| D6057 | Custom fabricated abutment | \$450 | \$450 | one per tooth every 5 years |
| D6058 | Abutment supported porcelain - ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6059 | Abutment supported porcelain fused to metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6060 | Abutment supported porcelain fused to metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6061 | Abutment supported porcelain fused to metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6062 | Abutment supported cast metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6063 | Abutment supported cast metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6064 | Abutment supported cast metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6065 | Implant supported porcelain/ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6066 | Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6067 | Implant supported crown - high noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6068 | Abutment supported retainer for porcelain/ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6069 | Abutment supported retainer for porcelain fused to metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6070 | Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6071 | Abutment supported retainer for porcelain fused to metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6072 | Abutment supported retainer for cast metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6073 | Abutment supported retainer for cast metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6074 | Abutment supported retainer for cast metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6075 | Implant supported retainer for ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6076 | Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6077 | Implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6086 | Implant supported crown-predominantly base alloys | \$525 | \$525 | one per tooth every 5 years |
| D6087 | Implant supported crown - noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6088 | Implant supported crown - titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| D6094 | Abutment supported crown titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| Oral Surgery | | | | |
| D7140 | Extraction, erupted tooth or exposed root (elevation and/or forceps removal) | \$27.30 | \$40 | unlimited per year |
| D7210 | Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated | \$52.50 | \$110 | unlimited per year |
| D7220 | Removal of impacted tooth - soft tissue | \$94.50 | \$180 | unlimited per year |
| D7230 | Removal of impacted tooth - partially bony | \$131.25 | \$200 | unlimited per year |
| D7240 | Removal of impacted tooth - completely bony | \$131.25 | \$230 | unlimited per year |
| D7250 | Surgical removal of residual tooth roots (cutting procedure) | \$59 | \$120 | unlimited per year |
| Unclassified Treatment | | | | |
| D9110 | Palliative (emergency) treatment of dental pain - minor procedure | \$22 | \$22 | one per visit |

Services not included in this Dental Benefit Grid are not covered.
For internal use: **DI4 / DEN548**

HMO - H4007-825

In Network Copay: GD \$0 - SP \$0 RxGRP: 3A414, 3A422

*Maximum benefit \$3,000 per year (only apply for dentures, crown, adjustments to dentures, other restorative services, prosthodontics - fixed (bridges), implant services, and implant supported prosthetics)

| CDT Code | Description | Fee Schedule | | Guidelines |
|--------------------------------------|---|----------------------|-----------------|---|
| | | General Dentist (GD) | Specialist (SP) | |
| Diagnostic and Preventive | | | | |
| D9310 | Professional Consultation | - | \$60 | one per contract year |
| D0120 | Periodical Oral Evaluation - established patient | \$14.28 | \$14.28 | every 6 months |
| D0140 | Limited Oral Evaluation - problem focused | \$20.91 | \$25 | every 6 months |
| D0150 | Comprehensive Oral Exam - new or established patient | \$22.58 | - | every 36 months |
| D0220 | Intraoral film - periapical first radiographic image | \$8.36 | \$8.36 | one per year |
| D0230 | Intraoral film - periapical each additional radiographic image | \$7.60 | \$7.60 | up to 5 per year |
| D0272 | Bitewing - two radiographic images | \$15.69 | \$15.69 | every 24 months |
| D0330 | Panoramic radiographic image | \$36.59 | \$55 | every 36 months |
| D1110 | Prophylaxis - adult | \$40.40 | \$40.40 | every 6 months |
| D1120 | Prophylaxis - child | \$25.25 | \$25.25 | every 6 months |
| Restorative | | | | |
| D2140 | Amalgam - one surface, primary or permanent | \$34.67 | \$34.67 | one per tooth every 36 months |
| D2150 | Amalgam - two surfaces, primary or permanent | \$42.68 | \$42.68 | one per tooth every 36 months |
| D2160 | Amalgam - three surfaces, primary or permanent | \$50.92 | \$50.92 | one per tooth every 36 months |
| D2161 | Amalgam - four or more surfaces, primary or permanent | \$60.10 | \$60.10 | one per tooth every 36 months |
| D2330 | Resin based composite - one surface, anterior | \$39.93 | \$39.93 | one per tooth every 36 months |
| D2331 | Resin based composite - two surfaces, anterior | \$49.07 | \$49.07 | one per tooth every 36 months |
| D2332 | Resin based composite - three surfaces, anterior | \$58.81 | \$58.81 | one per tooth every 36 months |
| D2335 | Resin based composite - four or more surfaces | \$70.38 | \$70.38 | one per tooth every 36 months |
| D2391 | Resin based composite - one surface posterior | \$43.74 | \$43.74 | one per tooth every 36 months |
| D2392 | Resin based composite - two surface posterior | \$56.62 | \$56.62 | one per tooth every 36 months |
| D2393 | Resin based composite - three surface posterior | \$68 | \$68 | one per tooth every 36 months |
| D2394 | Resin based composite - four or more surface posterior | \$78.61 | \$78.61 | one per tooth every 36 months |
| Other Restorative Services | | | | |
| D2950 | Core buildup, including any pins, when required | \$70 | \$70 | one per tooth per life |
| D2954 | Prefabricated post and core in addition to crown | \$100 | \$100 | one per tooth per life |
| Crown | | | | |
| D2740 | Crown porcelain/ceramic substrate | \$490 | - | Pre-determination required one per tooth every 5 years |
| D2750 | Crown porcelain fused to high noble metal | \$490 | \$490 | one per tooth every 5 years |
| D2751 | Crown porcelain fused to predominantly base metal | \$525 | \$525 | one per tooth every 5 years |
| D2752 | Crown porcelain fused to noble metal | \$435 | \$435 | one per tooth every 5 years |
| D2790 | Crown full cast high noble metal | \$300 | - | one per tooth every 5 years |
| Endodontics | | | | |
| D3310 | Anterior (excluding final restoration) | \$250 | \$310 | unlimited per year |
| D3320 | Premolar (excluding final restoration) | \$310 | \$395 | unlimited per year |
| D3330 | Molar (excluding final restoration) | \$450 | \$560 | unlimited per year |
| D3346 | Retreatment of previous root canal therapy - anterior | - | \$310 | one per tooth per life after 5 year of initial treatment |
| D3347 | Retreatment of previous root canal therapy - premolar | - | \$395 | one per tooth per life after 5 year of initial treatment |
| D3348 | Retreatment of previous root canal therapy - molar | - | \$560 | one per tooth per life after 5 year of initial treatment |
| Periodontics | | | | |
| D4341 | Periodontal scaling and root planning - per quadrant* | \$68.25 | \$90 | *Pre-determination required one every 12 months |
| D4355 | Full mouth debridement to enable a comprehensive oral evaluation and diagnosis on a subsequent visit | - | \$35 | one every 12 months |
| Prosthodontics | | | | |
| Prosthodontics - Fixed | | | | |
| D5110 | Complete denture - maxillary* | \$468 | \$468 | Pre-determination required every 5 years |
| D5120 | Complete denture - mandibular* | \$468 | \$468 | every 5 years |
| D5130 | Immediate denture maxillary* | \$400 | \$400 | every 5 years |
| D5140 | Immediate denture mandibular* | \$400 | \$400 | every 5 years |
| D5211 | Maxillary partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5212 | Mandibular partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5213 | Maxillary partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5214 | Mandibular partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5225 | Maxillary partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5226 | Mandibular partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5282 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), maxillary* | \$245 | \$245 | every 5 years |
| D5283 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), mandibular* | \$245 | \$245 | every 5 years |
| D5410 | Adjust complete denture - maxillary | \$25 | \$25 | unlimited per year |
| D5411 | Adjust complete denture - mandibular | \$25 | \$25 | unlimited per year |
| D5421 | Adjust partial denture - maxillary | \$25 | \$25 | unlimited per year |
| D5422 | Adjust partial denture - mandibular | \$25 | \$25 | unlimited per year |
| Prosthodontics - Fixed | | | | |
| D6240 | Pontic - porcelain fused to high noble metal | \$400 | \$400 | Pre-determination required every 5 years |
| D6242 | Pontic - porcelain fused to noble metal | \$365 | \$365 | every 5 years |
| D6750 | Retainer crown - porcelain fused to high noble metal | \$490 | \$490 | every 5 years |
| D6752 | Retainer crown - porcelain fused to noble metal | \$435 | \$435 | every 5 years |
| Implant | | | | |
| D6010 | Surgical placement of implant body endosteal implant | \$835 | \$835 | Pre-determination required one per tooth area per life |
| D6011 | Second stage implant surgery | \$250 | \$250 | one per tooth area per life |
| Implant Supported Prosthetics | | | | |
| D6056 | Prefabricated abutment | \$300 | \$300 | Pre-determination required one per tooth every 5 years |
| D6057 | Custom fabricated abutment | \$450 | \$450 | one per tooth every 5 years |
| D6058 | Abutment supported porcelain - ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6059 | Abutment supported porcelain fused to metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6060 | Abutment supported porcelain fused to metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6061 | Abutment supported porcelain fused to metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6062 | Abutment supported cast metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6063 | Abutment supported cast metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6064 | Abutment supported cast metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6065 | Implant supported porcelain/ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6066 | Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6067 | Implant supported crown - high noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6068 | Abutment supported retainer for porcelain/ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6069 | Abutment supported retainer for porcelain fused to metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6070 | Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6071 | Abutment supported retainer for porcelain fused to metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6072 | Abutment supported retainer for cast metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6073 | Abutment supported retainer for cast metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6074 | Abutment supported retainer for cast metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6075 | Implant supported retainer for ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6076 | Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6077 | Implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6086 | Implant supported crown-predominantly base alloys | \$525 | \$525 | one per tooth every 5 years |
| D6087 | Implant supported crown - noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6088 | Implant supported crown - titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| D6094 | Abutment supported crown titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| Oral Surgery | | | | |
| D7140 | Extraction, erupted tooth or exposed root (elevation and/or forceps removal) | \$27.30 | \$40 | unlimited per year |
| D7210 | Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated | \$52.50 | \$110 | unlimited per year |
| D7220 | Removal of impacted tooth - soft tissue | \$94.50 | \$180 | unlimited per year |
| D7230 | Removal of impacted tooth - partially bony | \$131.25 | \$200 | unlimited per year |
| D7240 | Removal of impacted tooth - completely bony | \$131.25 | \$230 | unlimited per year |
| D7250 | Surgical removal of residual tooth roots (cutting procedure) | \$59 | \$120 | unlimited per year |
| Unclassified Treatment | | | | |

| | | | | |
|-------|---|------|------|---------------|
| D9110 | Palliative (emergency) treatment of dental pain - minor procedure | \$22 | \$22 | one per visit |
|-------|---|------|------|---------------|

Services not included in this Dental Benefit Grid are not covered.
Services received from an out-of-network dentist (except emergency care) is not a covered benefit.
For internal use: DL8 / DEN501

HMO - H4007-819

In Network Copy: GD 50 - SP 50

RxGRP: 7A651, 7A657

*Maximum benefit \$3,000 per year (only apply for implant services and implant supported prosthetics)

| CDT Code | Description | Fee Schedule | | Guidelines |
|--------------------------------------|---|----------------------|-----------------|---|
| | | General Dentist (GD) | Specialist (SP) | |
| Diagnostic and Preventive | | | | |
| D9310 | Professional Consultation | | \$60 | one per contract year |
| D0120 | Periodical Oral Evaluation - established patient | \$14.28 | \$14.28 | every 6 months |
| D0140 | Limited Oral Evaluation - problem focused | \$20.91 | \$25 | every 6 months |
| D0150 | Comprehensive Oral Exam - new or established patient | \$22.58 | - | every 36 months |
| D0272 | Bitewing - two radiographic images | \$15.69 | \$15.69 | every 24 months |
| D0330 | Panoramic radiographic image | \$36.59 | \$55 | every 36 months |
| D1110 | Prophylaxis - adult | \$40.40 | \$40.40 | every 6 months |
| D1120 | Prophylaxis - child | \$25.25 | \$25.25 | every 6 months |
| Restorative | | | | |
| D2140 | Amalgam - one surface, primary or permanent | \$34.67 | \$34.67 | one per tooth every 36 months |
| D2150 | Amalgam - two surfaces, primary or permanent | \$42.68 | \$42.68 | one per tooth every 36 months |
| D2160 | Amalgam - three surfaces, primary or permanent | \$50.92 | \$50.92 | one per tooth every 36 months |
| D2161 | Amalgam - four or more surfaces, primary or permanent | \$60.10 | \$60.10 | one per tooth every 36 months |
| D2330 | Resin based composite - one surface, anterior | \$39.93 | \$39.93 | one per tooth every 36 months |
| D2331 | Resin based composite - two surfaces, anterior | \$49.07 | \$49.07 | one per tooth every 36 months |
| D2332 | Resin based composite - three surfaces, anterior | \$58.81 | \$58.81 | one per tooth every 36 months |
| D2335 | Resin based composite - four or more surfaces | \$70.38 | \$70.38 | one per tooth every 36 months |
| D2391 | Resin based composite - one surface posterior | \$43.74 | \$43.74 | one per tooth every 36 months |
| D2392 | Resin based composite - two surface posterior | \$56.62 | \$56.62 | one per tooth every 36 months |
| D2393 | Resin based composite - three surface posterior | \$68 | \$68 | one per tooth every 36 months |
| D2394 | Resin based composite - four or more surface posterior | \$78.61 | \$78.61 | one per tooth every 36 months |
| Crown | | | | |
| D2740 | Crown porcelain/ceramic substrate | \$490 | - | Pre-determination required one per tooth every 5 years |
| D2750 | Crown porcelain fused to high noble metal | \$490 | \$490 | one per tooth every 5 years |
| D2751 | Crown porcelain fused to predominantly base metal | \$525 | \$525 | one per tooth every 5 years |
| D2752 | Crown porcelain fused to noble metal | \$435 | \$435 | one per tooth every 5 years |
| D2790 | Crown full cast high noble metal | \$300 | - | one per tooth every 5 years |
| Endodontics | | | | |
| D3310 | Anterior (excluding final restoration) | \$250 | \$310 | unlimited per year |
| D3320 | Premolar (excluding final restoration) | \$310 | \$395 | unlimited per year |
| D3330 | Molar (excluding final restoration) | \$450 | \$560 | unlimited per year |
| D3346 | Retreatment of previous root canal therapy - anterior | - | \$310 | one per tooth per life after 5 year of initial treatment |
| D3347 | Retreatment of previous root canal therapy - premolar | - | \$395 | one per tooth per life after 5 year of initial treatment |
| D3348 | Retreatment of previous root canal therapy - molar | - | \$560 | one per tooth per life after 5 year of initial treatment |
| Periodontics | | | | |
| D4341 | Periodontal scaling and root planning - per quadrant | \$68.25 | \$90 | Pre-determination required one every 12 months |
| Prosthodontics | | | | |
| Pre-determination required | | | | |
| D5110 | Complete denture - maxillary | \$468 | \$468 | every 5 years |
| D5120 | Complete denture - mandibular | \$468 | \$468 | every 5 years |
| D5130 | Immediate denture maxillary | \$400 | \$400 | every 5 years |
| D5140 | Immediate denture mandibular | \$400 | \$400 | every 5 years |
| D5211 | Maxillary partial denture resin base (including any conventional clasp, rests and teeth) | \$225 | \$225 | every 5 years |
| D5212 | Mandibular partial denture resin base (including any conventional clasp, rests and teeth) | \$225 | \$225 | every 5 years |
| D5213 | Maxillary partial denture - cast metal framework with resin denture bases | \$520 | \$520 | every 5 years |
| D5214 | Mandibular partial denture - cast metal framework with resin denture bases | \$520 | \$520 | every 5 years |
| D5225 | Maxillary partial denture - flexible base (including any clasps, rests and teeth) | \$690 | \$690 | every 5 years |
| D5226 | Mandibular partial denture - flexible base (including any clasps, rests and teeth) | \$690 | \$690 | every 5 years |
| D5282 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), maxillary | \$245 | \$245 | every 5 years |
| D5283 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), mandibular | \$245 | \$245 | every 5 years |
| Prosthodontics | | | | |
| Pre-determination required | | | | |
| D6240 | Pontic - porcelain fused to high noble metal | \$400 | \$400 | every 5 years |
| D6242 | Pontic - porcelain fused to noble metal | \$365 | \$365 | every 5 years |
| D6750 | Retainer crown - porcelain fused to high noble metal | \$490 | \$490 | every 5 years |
| D6752 | Retainer crown - porcelain fused to noble metal | \$435 | \$435 | every 5 years |
| Implant | | | | |
| Pre-determination required | | | | |
| D6010 | Surgical placement of implant body endosteal implant | \$835 | \$835 | one per tooth area per life |
| D6011 | Second stage implant surgery | \$250 | \$250 | one per tooth area per life |
| Implant Supported Prosthetics | | | | |
| Pre-determination required | | | | |
| D6056 | Prefabricated abutment | \$300 | \$300 | one per tooth every 5 years |
| D6057 | Custom fabricated abutment | \$450 | \$450 | one per tooth every 5 years |
| D6058 | Abutment supported porcelain - ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6059 | Abutment supported porcelain fused to metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6060 | Abutment supported porcelain fused to metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6061 | Abutment supported porcelain fused to metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6062 | Abutment supported cast metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6063 | Abutment supported cast metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6064 | Abutment supported cast metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6065 | Implant supported porcelain/ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6066 | Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6067 | Implant supported crown - high noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6068 | Abutment supported retainer for porcelain/ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6069 | Abutment supported retainer for porcelain fused to metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6070 | Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6071 | Abutment supported retainer for porcelain fused to metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6072 | Abutment supported retainer for cast metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6073 | Abutment supported retainer for cast metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6074 | Abutment supported retainer for cast metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6075 | Implant supported retainer for ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6076 | Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6077 | Implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6088 | Implant supported crown-predominantly base alloys | \$525 | \$525 | one per tooth every 5 years |
| D6087 | Implant supported crown - noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6088 | Implant supported crown - titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| D6094 | Abutment supported crown titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| Oral Surgery | | | | |
| D7140 | Extraction, erupted tooth or exposed root (elevation and/or forceps removal) | \$27.30 | \$40 | unlimited per year |
| D7210 | Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated | \$52.50 | \$110 | unlimited per year |
| D7220 | Removal of impacted tooth - soft tissue | \$94.50 | \$180 | unlimited per year |
| D7230 | Removal of impacted tooth - partially bony | \$131.25 | \$200 | unlimited per year |
| D7240 | Removal of impacted tooth - completely bony | \$131.25 | \$230 | unlimited per year |
| D7250 | Surgical removal of residual tooth roots (cutting procedure) | \$59 | \$120 | unlimited per year |
| Unclassified Treatment | | | | |
| D9110 | Palliative (emergency) treatment of dental pain - minor procedure | \$22 | \$22 | one per visit |

Services not included in this Dental Benefit Grid are not covered.
 Services received from an out-of-network dentist (except emergency care) is not a covered benefit.
For internal use: D14 / DEN499

HMO - H4007-821

In Network Copay: GD \$0 - SP \$0 RxGRP: 7A705, 7A707

*Maximum benefit \$5,000 per year (only apply for dentures, crown, adjustments to dentures, other restorative services, prosthodontics - fixed (bridges), implant services, and implant supported prosthetics)

| CDT Code | Description | Fee Schedule | | Guidelines |
|--------------------------------------|---|----------------------|-----------------|---|
| | | General Dentist (GD) | Specialist (SP) | |
| Diagnostic and Preventive | | | | |
| D9310 | Professional Consultation | - | \$60 | one per contract year |
| D0120 | Periodical Oral Evaluation - established patient | \$14.28 | \$14.28 | every 6 months |
| D0140 | Limited Oral Evaluation - problem focused | \$20.91 | \$25 | every 6 months |
| D0150 | Comprehensive Oral Exam - new or established patient | \$22.58 | - | every 36 months |
| D0220 | Intraoral film - periapical first radiographic image | \$8.36 | \$8.36 | one per year |
| D0230 | Intraoral film - periapical each additional radiographic image | \$7.60 | \$7.60 | up to 5 per year |
| D0272 | Bitewing - two radiographic images | \$15.69 | \$15.69 | every 24 months |
| D0330 | Panoramic radiographic image | \$36.59 | \$55 | every 36 months |
| D1110 | Prophylaxis - adult | \$40.40 | \$40.40 | every 6 months |
| D1120 | Prophylaxis - child | \$25.25 | \$25.25 | every 6 months |
| Restorative | | | | |
| D2140 | Amalgam - one surface, primary or permanent | \$34.67 | \$34.67 | one per tooth every 36 months |
| D2150 | Amalgam - two surfaces, primary or permanent | \$42.68 | \$42.68 | one per tooth every 36 months |
| D2160 | Amalgam - three surfaces, primary or permanent | \$50.92 | \$50.92 | one per tooth every 36 months |
| D2161 | Amalgam - four or more surfaces, primary or permanent | \$60.10 | \$60.10 | one per tooth every 36 months |
| D2330 | Resin based composite - one surface, anterior | \$39.93 | \$39.93 | one per tooth every 36 months |
| D2331 | Resin based composite - two surfaces, anterior | \$49.07 | \$49.07 | one per tooth every 36 months |
| D2332 | Resin based composite - three surfaces, anterior | \$58.81 | \$58.81 | one per tooth every 36 months |
| D2335 | Resin based composite - four or more surfaces | \$70.38 | \$70.38 | one per tooth every 36 months |
| D2391 | Resin based composite - one surface posterior | \$43.74 | \$43.74 | one per tooth every 36 months |
| D2392 | Resin based composite - two surface posterior | \$56.62 | \$56.62 | one per tooth every 36 months |
| D2393 | Resin based composite - three surface posterior | \$68 | \$68 | one per tooth every 36 months |
| D2394 | Resin based composite - four or more surface posterior | \$78.61 | \$78.61 | one per tooth every 36 months |
| Other Restorative Services | | | | |
| D2950 | Core buildup, including any pins, when required | \$70 | \$70 | one per tooth per life |
| D2954 | Prefabricated post and core in addition to crown | \$100 | \$100 | one per tooth per life |
| Crown | | | | |
| D2740 | Crown porcelain/ceramic substrate | \$490 | - | Pre-determination required one per tooth every 5 years |
| D2750 | Crown porcelain fused to high noble metal | \$490 | \$490 | one per tooth every 5 years |
| D2751 | Crown porcelain fused to predominantly base metal | \$525 | \$525 | one per tooth every 5 years |
| D2752 | Crown porcelain fused to noble metal | \$435 | \$435 | one per tooth every 5 years |
| D2790 | Crown full cast high noble metal | \$300 | - | one per tooth every 5 years |
| Endodontics | | | | |
| D3310 | Anterior (excluding final restoration) | \$250 | \$310 | unlimited per year |
| D3320 | Premolar (excluding final restoration) | \$310 | \$395 | unlimited per year |
| D3330 | Molar (excluding final restoration) | \$450 | \$560 | unlimited per year |
| D3346 | Retreatment of previous root canal therapy - anterior | - | \$310 | one per tooth per life after 5 year of initial treatment |
| D3347 | Retreatment of previous root canal therapy - premolar | - | \$395 | one per tooth per life after 5 year of initial treatment |
| D3348 | Retreatment of previous root canal therapy - molar | - | \$560 | one per tooth per life after 5 year of initial treatment |
| Periodontics | | | | |
| D4341 | Periodontal scaling and root planning - per quadrant* | \$68.25 | \$90 | *Pre-determination required one every 12 months |
| D4355 | Full mouth debridement to enable a comprehensive oral evaluation and diagnosis on a subsequent visit | - | \$35 | one every 12 months |
| Prosthodontics | | | | |
| Complete Dentures | | | | |
| D5110 | Complete denture - maxillary* | \$468 | \$468 | Pre-determination required every 5 years |
| D5120 | Complete denture - mandibular* | \$468 | \$468 | every 5 years |
| D5130 | Immediate denture maxillary* | \$400 | \$400 | every 5 years |
| D5140 | Immediate denture mandibular* | \$400 | \$400 | every 5 years |
| D5211 | Maxillary partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5212 | Mandibular partial denture resin base (including any conventional clasp, rests and teeth)* | \$225 | \$225 | every 5 years |
| D5213 | Maxillary partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5214 | Mandibular partial denture - cast metal framework with resin denture bases* | \$520 | \$520 | every 5 years |
| D5225 | Maxillary partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5226 | Mandibular partial denture - flexible base (including any clasps, rests and teeth)* | \$550 | \$690 | every 5 years |
| D5282 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), maxillary* | \$245 | \$245 | every 5 years |
| D5283 | Removable unilateral partial denture - one piece cast metal (including clasps and teeth), mandibular* | \$245 | \$245 | every 5 years |
| D5410 | Adjust complete denture - maxillary | \$25 | \$25 | unlimited per year |
| D5411 | Adjust complete denture - mandibular | \$25 | \$25 | unlimited per year |
| D5421 | Adjust partial denture - maxillary | \$25 | \$25 | unlimited per year |
| D5422 | Adjust partial denture - mandibular | \$25 | \$25 | unlimited per year |
| Prosthodontics - Fixed | | | | |
| D6240 | Pontic - porcelain fused to high noble metal | \$400 | \$400 | Pre-determination required every 5 years |
| D6242 | Pontic - porcelain fused to noble metal | \$365 | \$365 | every 5 years |
| D6750 | Retainer crown - porcelain fused to high noble metal | \$490 | \$490 | every 5 years |
| D6752 | Retainer crown - porcelain fused to noble metal | \$435 | \$435 | every 5 years |
| Implant | | | | |
| D6010 | Surgical placement of implant body endosteal implant | \$835 | \$835 | Pre-determination required one per tooth area per life |
| D6011 | Second stage implant surgery | \$250 | \$250 | one per tooth area per life |
| Implant Supported Prosthetics | | | | |
| D6056 | Prefabricated abutment | \$300 | \$300 | Pre-determination required one per tooth every 5 years |
| D6057 | Custom fabricated abutment | \$450 | \$450 | one per tooth every 5 years |
| D6058 | Abutment supported porcelain - ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6059 | Abutment supported porcelain fused to metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6060 | Abutment supported porcelain fused to metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6061 | Abutment supported porcelain fused to metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6062 | Abutment supported cast metal crown (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6063 | Abutment supported cast metal crown (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6064 | Abutment supported cast metal crown (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6065 | Implant supported porcelain/ceramic crown | \$525 | \$525 | one per tooth every 5 years |
| D6066 | Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6067 | Implant supported crown - high noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6068 | Abutment supported retainer for porcelain/ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6069 | Abutment supported retainer for porcelain fused to metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6070 | Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6071 | Abutment supported retainer for porcelain fused to metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6072 | Abutment supported retainer for cast metal FPD (high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6073 | Abutment supported retainer for cast metal FPD (predominantly base metal) | \$525 | \$525 | one per tooth every 5 years |
| D6074 | Abutment supported retainer for cast metal FPD (noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6075 | Implant supported retainer for ceramic FPD | \$525 | \$525 | one per tooth every 5 years |
| D6076 | Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6077 | Implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal) | \$525 | \$525 | one per tooth every 5 years |
| D6086 | Implant supported crown-predominantly base alloys | \$525 | \$525 | one per tooth every 5 years |
| D6087 | Implant supported crown - noble alloys | \$525 | \$525 | one per tooth every 5 years |
| D6088 | Implant supported crown - titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| D6094 | Abutment supported crown titanium and titanium alloys | \$525 | \$525 | one per tooth every 5 years |
| Oral Surgery | | | | |
| D7140 | Extraction, erupted tooth or exposed root (elevation and/or forceps removal) | \$27.30 | \$40 | unlimited per year |
| D7210 | Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated | \$52.50 | \$110 | unlimited per year |
| D7220 | Removal of impacted tooth - soft tissue | \$94.50 | \$180 | unlimited per year |
| D7230 | Removal of impacted tooth - partially bony | \$131.25 | \$200 | unlimited per year |
| D7240 | Removal of impacted tooth - completely bony | \$131.25 | \$230 | unlimited per year |
| D7250 | Surgical removal of residual tooth roots (cutting procedure) | \$59 | \$120 | unlimited per year |
| Unclassified Treatment | | | | |

| | | | | |
|-------|---|------|------|---------------|
| D9110 | Palliative (emergency) treatment of dental pain - minor procedure | \$22 | \$22 | one per visit |
|-------|---|------|------|---------------|

Services not included in this Dental Benefit Grid are not covered.
Services received from an out-of-network dentist (except emergency care) is not a covered benefit.
For internal use: DL9 / DEN500