

Exhibit #6
Dental Fee Schedule
Effective 1/1/2020

Proc	Description	Rate
D0120	PERIODIC ORAL EVALUATION - EST PATIENT	\$ 67.25
D0140	LIMITED ORAL EVALUATION - PROBLEM FOCUSED	\$ 113.00
D0145	ORAL EVAL PT UND 3 YR AGE CNSL W/PRIM CAREGIVER	\$ 105.25
D0150	COMP ORAL EVALUATION - NEW OR EST PATIENT	\$ 119.00
D0160	DTL&EXT ORAL EVALUATION - PROBLEM FOCUSED REPORT	\$ 238.00
D0170	RE-EVALUATION - LIMITED PROBLEM FOCUSED	\$ 79.25
D0171	RE-EVALUATION POST-OPERATIVE OFFICE VISIT	\$ 79.25
D0180	COMP PERIODONTAL EVALUATION - NEW OR EST PATIENT	\$ 129.25
D0190	SCREENING OF A PATIENT	\$ 67.25
D0191	ASSESSMENT OF A PATIENT	\$ 47.50
D0210	INTRAORAL-COMPLETE SERIES	\$ 182.00
D0220	INTRAORAL - PERIAPICAL FIRST RADIOGRAPHIC IMAGE	\$ 36.75
D0230	INTRAORAL-PERIAPICAL-EACH ADDITIONAL FILM	\$ 32.75
D0240	INTRAORAL - OCCLUSAL RADIOGRAPHIC IMAGE	\$ 56.50
D0250	EXTRAORAL 2D PRJCTN RAD IMG BY RAD SRCE/ DTECTR	\$ 69.50
D0251	EXTRAORAL 2D POSTERIOR DENTAL RAD IMAGE	\$ 63.75
D0270	BITEWING - SINGLE RADIOGRAPHIC IMAGE	\$ 35.25
D0272	BITEWINGS - TWO RADIOGRAPHIC IMAGES	\$ 56.75
D0273	BITEWINGS - THREE RADIOGRAPHIC IMAGES	\$ 69.00
D0274	BITEWINGS - FOUR RADIOGRAPHIC IMAGES	\$ 79.50
D0277	VERTICAL BITEWINGS - 7 TO 8 RADIOGRAPHIC IMAGES	\$ 120.50
D0310	SIALOGRAPHY	\$ 517.50
D0320	TEMPOROMANDIBULAR JOINT ARTHROGRAM INCL INJ	\$ 915.00
D0321	OTHER TEMPOROMANDIBULAR JOINT FILMS BY REPORT	BR
D0322	TOMOGRAPHIC SURVEY	\$ 742.25
D0330	PANORAMIC RADIOGRAPHIC IMAGE	\$ 160.50
D0340	2D CEPHLOMTRIC RAD IMG - ACQSTN MEASRE& ANALYSIS	\$ 181.00
D0350	2D ORAL/FACIAL PHOTOGRAPHIC IMAGES	\$ 86.50
D0351	3D PHOTOGRAPHIC IMAGE	\$ 86.50
D0364	CONE BEAM 3	\$ 288.25
D0365	CNE BEAM CAPTR INTERPJ W FLD VIEW 1 ARCH MNDBL	\$ 367.50
D0366	CNE BEAM CAPTR INTERPJ W FLD VIEW 1 ARCH MAXL	\$ 367.50
D0367	CNE BEAM CAPTR INTERPJ W FLD VIEW BTH JAWS	\$ 414.50
D0368	CNE BEAM CAPTR INTERPJ FR TMJ 2 OR MORE	\$ 426.00
D0369	MAXILLOFACIAL MRI CAPTURE AND INTERPRETATION	\$ 241.50
D0370	MAXLFCL US IMAGE CAPTR AND INTRPJ	\$ 138.25

D0371	SIALOENDOSCOPY CAPTURE AND INTERPRETATION	BR
D0380	CNE BEAM CAPTR LMTD FLD <1 WHL JAW	\$ 297.00
D0381	CNE BEAM CAPTR W FLD VIEW 1 ARCH MNDBL	\$ 402.25
D0382	CNE BEAM CAPTR W FLD VIEW 1 ARCH MAXL	\$ 402.25
D0383	CNE BEAM CAPTR W FLD VIEW BTH JAWS	\$ 402.25
D0384	CNE BEAM CAPTR FR TMJ 2 OR MORE	\$ 431.50
D0385	MAXILLOFACIAL MRI IMAGE CAPTURE	\$ 2,649.00
D0386	MAXILLOFACIAL ULTRASOUND IMAGE CAPTURE	\$ 662.75
D0391	INTERPRETATION OF DIAGNOSTIC IMAGE	BR
D0393	TREATMENT SIMULATION USING 3D IMAGE VOLUME	BR
D0394	DIGITAL SUBTR OF 2 > IMAGES OF THE SAME MODALITY	BR
D0395	FUSION OF 2/> 3D IMAGE VOLUMES OF 1/> MODALITIES	BR
D0411	HBA1C IN-OFFICE POINT OF SERVICE TESTING	BR
D0412	BLOOD GLCSE LVL TST - IN-OFFICE USING GLCSE MTR	BR
D0414	LAB MICRBAL SPEC CULTRE/SENS/REPORT PREP TRNSMSN	\$ 70.75
D0415	COLLECTION MICROORGANISMS CULTURE & SENSITIVITY	\$ 51.25
D0416	VIRAL CULTURE	\$ 76.25
D0417	CLCT & PREP SALIVA SAMPLE FOR LAB DX TESTING	\$ 68.75
D0418	ANALYSIS OF SALIVA SAMPLE	\$ 70.75
D0422	COLLECT/PREP GENETIC SAMPLE FOR LAB ANALYSIS	\$ 51.25
D0423	GENETIC TEST SUSCEPT TO DSEASE SPECIMEN ANLYS	BR
D0425	CARIES SUSCEPTIBILITY TESTS	\$ 44.25
D0431	ADJUNCTIVE PREDX TST NOT INCL CYTOLOGY/BX PROC	\$ 70.75
D0460	PULP VITALITY TESTS	\$ 70.75
D0470	DIAGNOSTIC CASTS	\$ 156.25
D0472	ACCESSION OF TISSUE GROSS EXAMINATION PREP/REPRT	\$ 97.50
D0473	ACCESS TISSUE GR&MIC EXAMINATION PREP/REPRT	\$ 205.75
D0474	ACCESS TISS GR&MIC EX ASSESS SURG MARG PREP/RPT	\$ 230.50
D0475	DECALCIFICATION PROCEDURE	\$ 124.25
D0476	SPECIAL STAINS FOR MICROORGANISMS	\$ 120.75
D0477	SPECIAL STAINS NOT FOR MICROORGANISMS	\$ 165.00
D0478	IMMUNOHISTOCHEMICAL STAINS	\$ 150.75
D0479	TISSUE INSITU HYBRIDIZATION INCL INTERPRETATION	\$ 230.50
D0480	ACESS EXFOLIATIVE CYTOL SMEAR MIC EXAM PREP/REPT	\$ 142.00
D0481	ELECTRON MICROSCOPY	\$ 532.00
D0482	DIRECT IMMUNOFLUORESCENCE	\$ 177.25
D0483	INDIRECT IMMUNOFLUORESCENCE	\$ 177.25
D0484	CONSULTATION ON SLIDES PREPARED ELSEWHERE	\$ 265.75
D0485	CONSULT INCL PREP SLIDES BX MATL SPL REF SRC	\$ 367.25
D0486	ACCESSION TRANSEPIHELIAL CYTOLOG SAMPL MIC EXAM	\$ 170.50
D0502	OTHER ORAL PATHOLOGY PROCEDURES BY REPORT	BR

D0600	DX PX QUANT/MNITR/RECRD CHNGS ENAML/DENTN/CEMNTM	BR
D0601	CARIES RISK ASSESS DOCU FINDING OF LOW RISK	\$ 106.25
D0602	CARIES RISK AX AND DOCU WITH A FNDNG OF MOD RISK	\$ 106.25
D0603	CARIES RISK AX AND DOCU WITH FNDNG OF HIGH RISK	\$ 106.25
D0999	UNSPECIFIED DIAGNOSTIC PROCEDURE BY REPORT	BR
D1110	PROPHYLAXIS - ADULT	\$ 117.25
D1120	PROPHYLAXIS - CHILD	\$ 80.75
D1206	TOPICAL APPLICATION OF FLUORIDE VARNISH	\$ 64.25
D1208	TOPICAL APPLICATION OF FLUORIDE EXCL VARNISH	\$ 43.00
D1310	NUTRITIONAL COUNSELING CONTROL OF DENTAL DISEASE	\$ 62.75
D1320	TOBACCO CNSL CONTROL&PREVENTION ORAL DISEASE	\$ 68.00
D1330	ORAL HYGIENE INSTRUCTIONS	\$ 86.00
D1351	SEALANT - PER TOOTH	\$ 69.75
D1352	PREV RSN REST MOD HIGH CARIES RISK PT-PERM TOOTH	\$ 89.50
D1353	SEALANT REPAIR PER TOOTH	\$ 89.50
D1354	INTERIM CARIES ARRESTING MEDICATION APPLICATION	\$ 69.75
D1510	SPACE MAINTAINER - FIXED - UNILATERAL	\$ 425.25
D1516	SPACE MAINTAINER - FIXED - BILATERIAL MAXILLARY	\$ 595.25
D1517	SPACE MAINTAINER - FIXED - BILATERIAL MANDIBULAR	\$ 595.25
D1520	SPACE MAINTAINER - REMOVABLE - UNILATERAL	\$ 467.50
D1526	SPACE MAINTAINER - REMOVABLE - BILATERAL MAXILRY	\$ 722.75
D1527	SPACE MAINTAINER - REMOVABLE - BILATERAL MNDBULR	\$ 722.75
D1550	RECMNT/REBND OF SPACE MAINTAINER	\$ 91.75
D1555	REMOVAL OF FIXED SPACE MAINTAINER	\$ 88.50
D1575	DISTAL SHOE SPACE MAINTANR - FIXED - UNILATERAL	\$ 467.50
D1999	UNSPECIFIED PREVENTIVE PROCEDURE BY REPORT	BR
D2140	AMALGAM - ONE SURFACE PRIMARY OR PERMANENT	\$ 201.25
D2150	AMALGAM - TWO SURFACES PRIMARY OR PERMANENT	\$ 260.50
D2160	AMALGAM - THREE SURFACES PRIMARY OR PERMANENT	\$ 314.75
D2161	AMALGAM-FOUR/MORE SURFACES PRIMARY/PERMANENT	\$ 383.50
D2330	RESIN-BASED COMPOSITE - ONE SURFACE ANTERIOR	\$ 204.25
D2331	RESIN-BASED COMPOSITE - TWO SURFACES ANTERIOR	\$ 260.75
D2332	RESIN-BASED COMPOSITE - THREE SURFACES ANTERIOR	\$ 319.00
D2335	RESIN-BASED COMPOSITE 4/> SURFACES INCISAL ANGLE	\$ 377.50
D2390	RESIN-BASED COMPOSITE CROWN ANTERIOR	\$ 418.25
D2391	RESIN-BASED COMPOSITE - ONE SURFACE POSTERIOR	\$ 239.25
D2392	RESIN-BASED COMPOSITE - TWO SURFACES POSTERIOR	\$ 313.00
D2393	RESIN-BASED COMPOSITE - THREE SURFACES POSTERIOR	\$ 389.00
D2394	RESIN COMPOS - FOUR OR MORE SURFACES POSTERIOR	\$ 476.25
D2410	GOLD FOIL - ONE SURFACE	\$ 352.00
D2420	GOLD FOIL - TWO SURFACES	\$ 586.75

D2430	GOLD FOIL - THREE SURFACES	\$ 1,016.75
D2510	INLAY - METALLIC - ONE SURFACE	\$ 930.50
D2520	INLAY - METALLIC - TWO SURFACES	\$ 1,055.75
D2530	INLAY - METALLIC - THREE OR MORE SURFACES	\$ 1,217.00
D2542	ONLAY - METALLIC - TWO SURFACES	\$ 1,193.50
D2543	ONLAY - METALLIC - THREE SURFACES	\$ 1,248.25
D2544	ONLAY - METALLIC - FOUR OR MORE SURFACES	\$ 1,298.00
D2610	INLAY - PORCELAIN/CERAMIC - ONE SURFACE	\$ 1,095.00
D2620	INLAY - PORCELAIN/CERAMIC - TWO SURFACES	\$ 1,155.75
D2630	INLAY - PORCELAIN/CERAMIC - THREE/MORE SURFACES	\$ 1,231.00
D2642	ONLAY - PORCELAIN/CERAMIC - TWO SURFACES	\$ 1,196.50
D2643	ONLAY - PORCELAIN/CERAMIC - THREE SURFACES	\$ 1,290.50
D2644	ONLAY - PORCELAIN/CERAMIC - 4 OR MORE SURFACES	\$ 1,368.75
D2650	INLAY - RESIN-BASED COMPOSITE - ONE SURFACE	\$ 719.50
D2651	INLAY - RESIN-BASED COMPOSITE - TWO SURFACES	\$ 857.00
D2652	INLAY RESIN BASED COMPOSITE 3 OR MORE SURFACES	\$ 901.00
D2662	ONLAY - RESIN-BASED COMPOSITE - TWO SURFACES	\$ 782.00
D2663	ONLAY - RESIN-BASED COMPOSITE - THREE SURFACES	\$ 919.75
D2664	ONLAY RESIN BASED COMPOSIT FOUR OR MORE SURFACES	\$ 985.25
D2710	CROWN - RESIN-BASED COMPOSITE (INDIRECT)	\$ 585.25
D2712	CROWN 3/4 RESIN-BASED COMPOSITE (INDIRECT)	\$ 585.25
D2720	CROWN - RESIN WITH HIGH NOBLE METAL	\$ 1,442.00
D2721	CROWN - RESIN WITH PREDOMINANTLY BASE METAL	\$ 1,351.50
D2722	CROWN - RESIN WITH NOBLE METAL	\$ 1,381.00
D2740	CROWN - PORCELAIN/CERAMIC SUBSTRATE	\$ 1,480.00
D2750	CROWN - PORCELAIN FUSED TO HIGH NOBLE METAL	\$ 1,460.50
D2751	CROWN - PORCELAIN FUSED PREDOMINANTLY BASE METAL	\$ 1,360.00
D2752	CROWN - PORCELAIN FUSED TO NOBLE METAL	\$ 1,392.75
D2780	CROWN - 3/4 CAST HIGH NOBLE METAL	\$ 1,401.00
D2781	CROWN - 3/4 CAST PREDOMINANTLY BASE METAL	\$ 1,318.50
D2782	CROWN - 3/4 CAST NOBLE METAL	\$ 1,361.50
D2783	CROWN - 3/4 PORCELAIN/CERAMIC	\$ 1,440.50
D2790	CROWN - FULL CAST HIGH NOBLE METAL	\$ 1,409.25
D2791	CROWN - FULL CAST PREDOMINANTLY BASE METAL	\$ 1,335.25
D2792	CROWN - FULL CAST NOBLE METAL	\$ 1,360.00
D2794	CROWN - TITANIUM	\$ 1,442.00
D2799	PROVISIONAL CROWN	\$ 585.25
D2910	RECMNT/REBND INLAY ONLAY/PART CVRGE RESTORATION	\$ 131.75
D2915	RECMNT/REBND CAST OR PREFABRICATED POST AND CORE	\$ 131.75
D2920	RE-CEMENT OR RE-BOND CROWN	\$ 133.50
D2921	REATTACHMENT OF TOOTH FRAG INCISAL EDGE/CUSP	\$ 192.25

D2929	PREFABR STAINLESS PORC CROWN - PRIMARY TOOTH	\$ 528.75
D2930	PREFABR STAINLESS STEEL CROWN - PRIMARY TOOTH	\$ 363.75
D2931	PREFABR STAINLESS STEEL CROWN - PERMANENT TOOTH	\$ 411.50
D2932	PREFABRICATED RESIN CROWN	\$ 439.00
D2933	PREFABR STAINLESS STEEL CROWN W/RESIN WINDOW	\$ 503.25
D2934	PREFAB ESTHETIC COAT STNLESS STEEL CROWN PRIM	\$ 503.25
D2940	PROTECTIVE RESTORATION	\$ 138.75
D2941	INTERIM THERAPEUTIC RESTORATION PRIM DENTITION	\$ 138.75
D2949	RESTOR FOUNDATION N INDIR RESTOR	\$ 138.75
D2950	CORE BUILDUP INCLUDING ANY PINS WHEN REQUIRED	\$ 347.50
D2951	PIN RETENTION - PER TOOTH ADDITION RESTORATION	\$ 78.75
D2952	POST AND CORE ADDITION TO CROWN INDIRECTLY FAB	\$ 548.75
D2953	EACH ADDITIONAL INDIRECTLY FAB POST SAME TOOTH	\$ 274.25
D2954	PREFABRICATED POST AND CORE IN ADDITION TO CROWN	\$ 439.00
D2955	POST REMOVAL	\$ 338.50
D2957	EACH ADDITIONAL PREFABRICATED POST - SAME TOOTH	\$ 219.50
D2960	LABIAL VENEER (RESIN LAMINATE) - CHAIRSIDE	\$ 1,060.75
D2961	LABIAL VENEER (RESIN LAMINATE) - LABORATORY	\$ 1,203.75
D2962	LABIAL VENEER (PORCELAIN LAMINATE) - LABORATORY	\$ 1,307.75
D2971	ADD PROC NEW CRWN UND XSTING PART DENTUR FRMEWRK	\$ 210.25
D2975	COPING	\$ 640.00
D2980	CROWN REPAIR BY REPORT	\$ 256.00
D2981	INLAY REPAIR BY REPORT	\$ 256.00
D2982	ONLAY REPAIR BY REPORT	\$ 256.00
D2983	VENEER REPAIR BY REPORT	\$ 256.00
D2990	RESIN INFILT OF INCIPIENT LESIONS	\$ 91.75
D2999	UNSPECIFIED RESTORATIVE PROCEDURE BY REPORT	BR
D3110	PULP CAP - DIRECT (EXCLUDING FINAL RESTORATION)	\$ 125.00
D3120	PULP CAP - INDIRECT	\$ 100.50
D3220	TX PULP-REMOV PULP CORONAL DENTINOCEMENTL JUNC	\$ 257.00
D3221	PULPAL DEBRIDEMENT PRIMARY AND PERMANENT TEETH	\$ 282.00
D3222	PART PULPOTOMY FOR APEXOGENEIS PERM TOOTH	\$ 260.75
D3230	PULPAL THERAPY - ANTERIOR PRIMARY TOOTH	\$ 252.00
D3240	PULPAL THERAPY - POSTERIOR PRIMARY TOOTH	\$ 310.25
D3310	ENDODONTIC THERAPY ANTERIOR TOOTH	\$ 988.00
D3320	ENDODONTIC THERAPY PREMOLAR TOOTH	\$ 1,210.75
D3330	ENODODONTIC THERAPY MOLAR	\$ 1,501.25
D3331	TREATMENT RC OBSTRUCTION; NON-SURGICAL ACCESS	\$ 387.50
D3332	INCOMPLETE ENDO TX; INOP UNRESTORABLE/FX TOOTH	\$ 736.00
D3333	INTERNAL ROOT REPAIR OF PERFORATION DEFECTS	\$ 339.00
D3346	RETREATMENT PREVIOUS RC THERAPY - ANTERIOR	\$ 1,317.50

D3347	RETREATMENT PREVIOUS RC THERAPY - PREMOLAR	\$ 1,550.00
D3348	RETREATMENT PREVIOUS ROOT CANAL THERAPY - MOLAR	\$ 1,918.00
D3351	APEXIFICATION/RECALCIFICAT INIT VST	\$ 604.00
D3352	APEXIFICAT/RECALCIFICAT INT MED REPL	\$ 270.75
D3353	APEXIFICATION/RECALCIFICATION - FINAL VISIT	\$ 833.00
D3355	PULPAL REGENERATION - INITIAL VISIT	\$ 604.00
D3356	PULPAL REGEN - INTERIM MED RPLCMNT	\$ 270.75
D3357	PULPAL REGENERATION - COMPLETION OF TREATMENT	BR
D3410	APICOECTOMY - ANTERIOR	\$ 1,197.50
D3421	APICOECTOMY - PREMOLAR (FIRST ROOT)	\$ 1,333.25
D3425	APICOECTOMY - MOLAR (FIRST ROOT)	\$ 1,510.25
D3426	APICOECTOMY (EACH ADDITIONAL ROOT)	\$ 510.50
D3427	PERIRADICULAR SURGERY WITHOUT APICOECTOMY	\$ 1,083.25
D3428	BG IN CONJ PERIRADICULAR SURG/TOOTH SINGLE SITE	\$ 1,579.00
D3429	BG IN CONJ PERIRADICUL SURG EACH CONTIG TH SSS	\$ 1,506.00
D3430	RETROGRADE FILLING - PER ROOT	\$ 375.00
D3431	BIO MAT SFT OSS REGE CONJ PERIR SUR	\$ 1,854.00
D3432	GTR RESORB BRRER PER SITE IN CONJ PERIRAD SURG	\$ 1,593.25
D3450	ROOT AMPUTATION - PER ROOT	\$ 781.00
D3460	ENDODONTIC ENDOSSEOUS IMPLANT	\$ 2,916.00
D3470	INTENTIONAL REIMPLANTATION W/NECESSARY SPLINTING	\$ 1,489.25
D3910	SURGICAL PROCEDURE ISOLATION TOOTH W/RUBBER DAM	\$ 208.25
D3920	HEMISECTION NOT INCLUDING ROOT CANAL THERAPY	\$ 593.50
D3950	CANAL PREPARATION&FITTING PREFORMED DOWEL/POST	\$ 270.75
D3999	UNSPECIFIED ENDODONTIC PROCEDURE BY REPORT	BR
D4210	GINGIVECT/PLSTY 4/>CNTIG/TOOTH BOUND SPACES-QUAD	\$ 1,249.50
D4211	GINGIVECT/PLSTY 1-3 CNTIG/TOOTH BOUND SPACE-QUAD	\$ 555.00
D4212	GINGIVECT/PLSTY 1-3CNTIG PER TOOTH	\$ 444.25
D4230	ANAT CROWN EXP 4/> CONTIGUOUS TEETH PER QUAD	\$ 1,749.00
D4231	ANATOMICAL CROWN EXPOSURE 1-3 TEETH PER QUADRANT	\$ 833.00
D4240	GINGL FLP PROC 4/> CONTIG/TOOTH BOUND SPACE-QUAD	\$ 1,582.50
D4241	GINGL FLP PROC 1-3 CONTIG/TOOTH BOUND SPACE-QUAD	\$ 916.25
D4245	APICALLY POSITIONED FLAP	\$ 1,166.00
D4249	CLINICAL CROWN LENGTHENING - HARD TISSUE	\$ 1,734.75
D4260	OSSEOUS SURG 4/> CNTIG TEETH QUAD	\$ 2,637.25
D4261	OSSEOUS SURG 1-3 CNTIG TEETH QUAD	\$ 1,416.00
D4263	BONE REPLACEMENT GRAFT - FIRST SITE IN QUADRANT	\$ 943.75
D4264	BONE REPLACEMENT GRAFT - EA ADD SITE QUADRANT	\$ 805.00
D4265	BIOLOGIC MATERIALS AID SOFT&OSSEOUS TISSUE REGEN	BR
D4266	GUID TISSUE REGEN - RESORBABLE BARRIER PER SITE	\$ 971.50
D4267	GUID TISSUE REGEN - NONRESORB BARRIER PER SITE	\$ 1,249.50

D4268	SURGICAL REVISION PROCEDURE PER TOOTH	BR
D4270	PEDICLE SOFT TISSUE GRAFT PROCEDURE	\$ 1,873.75
D4273	AUTOGNS CONECTIVE TISSUE GRFT 1ST TOOTH/IMPLANT	\$ 2,290.25
D4274	DISTAL OR PROXIMAL WEDGE PROCEDURE	\$ 1,299.25
D4275	NONAUTGNS CONECTV TISSUE GRFT 1ST TOOTH/IMPLANT	\$ 1,721.25
D4276	COMB CNCTIVE TISSUE&DBL PEDICLE GRAFT PER TOOTH	\$ 2,567.75
D4277	FREE SOFT TISSUE GRAFT, 1ST TOOTH/ IMPLANT	\$ 1,943.25
D4278	FREE SOFT TISSUE GRAFT, E/ADNL TOOTH, IMPLNT	\$ 638.50
D4283	AUTO CNNCTV TISSUE GRFT PROC E/A TOOTH, IMPLANT	\$ 1,951.50
D4285	NON-AUTO CNNCTV TSSUE GRFT PROC E/A TOOTH/IMPLNT	\$ 1,468.50
D4320	PROVISIONAL SPLINTING - INTRACORONAL	\$ 612.50
D4321	PROVISIONAL SPLINTING - EXTRACORONAL	\$ 556.75
D4341	PRDONTAL SCALING&ROOT PLANING 4/MORE TEETH-QUAD	\$ 352.50
D4342	PRDONTAL SCALING&ROOT PLANING 1-3 TEETH-QUAD	\$ 204.25
D4346	SCALNG GNGIVAL INFLAMM FULL MOUTH AFTR ORAL EVAL	\$ 204.25
D4355	FULL MOUTH DEBRID ENABLE COMP EVALUATION&DX	\$ 241.25
D4381	LOC DEL ANTIMICROBL AGTS CREVICULR TISS TOOTH BR	BR
D4910	PERIODONTAL MAINTENANCE	\$ 217.25
D4920	UNSCHEDULED DRESSING CHANGE	\$ 157.75
D4921	GINGIVAL IRRIGATION PER QUADRANT	BR
D4999	UNSPECIFIED PERIODONTAL PROCEDURE BY REPORT	BR
D5110	COMPLETE DENTURE - MAXILLARY	\$ 2,383.50
D5120	COMPLETE DENTURE - MANDIBULAR	\$ 2,383.50
D5130	IMMEDIATE DENTURE - MAXILLARY	\$ 2,598.50
D5140	IMMEDIATE DENTURE - MANDIBULAR	\$ 2,598.50
D5211	MAXILLARY PARTIAL DENTURE - RESIN BASE	\$ 2,011.50
D5212	MANDIBULAR PARTIAL DENTURE - RESIN BASE	\$ 2,337.75
D5213	MAX PART DENTUR-CAST METL FRMEWRK W/RSN BASE	\$ 2,633.50
D5214	MAND PART DENTUR- CAST METL FRMEWRK W/RSN BASE	\$ 2,633.50
D5221	IMMED MAXILLARY PARTIAL DENTURE RESIN BASE	\$ 2,194.25
D5222	IMMED MANDIBULAR PARTIAL DENTURE RESIN BASE	\$ 2,548.75
D5223	IMMED MAXIL PART DENTURE CAST METL FRAME W/RESIN	\$ 2,870.50
D5224	IMMED MAND PART DENTURE CAST METL FRAME W/RESIN	\$ 2,870.50
D5225	MAXILLARY PARTIAL DENTURE FLEXIBLE BASE	\$ 2,011.50
D5226	MANDIBULAR PARTIAL DENTURE FLEXIBLE BASE	\$ 2,337.75
D5282	RMVBL UNIL PRTL DNTR CST MTL INCL CLSP TTH MXLRY	\$ 1,535.25
D5283	RMVBL UNIL PRTL DNTR CST MTL INCL CLSP TTH MNDBL	\$ 1,535.25
D5410	ADJUST COMPLETE DENTURE - MAXILLARY	\$ 130.50
D5411	ADJUST COMPLETE DENTURE - MANDIBULAR	\$ 130.50
D5421	ADJUST PARTIAL DENTURE - MAXILLARY	\$ 130.50
D5422	ADJUST PARTIAL DENTURE - MANDIBULAR	\$ 130.50

D5511	REPAIR BROKEN COMPLETE DENTURE BASE, MANDIBULAR	\$ 261.00
D5512	REPAIR BROKEN COMPLETE DENTURE BASE, MAXILLARY	\$ 261.00
D5520	REPLACE MISSING/BROKEN TEETH - COMPLETE DENTURE	\$ 217.25
D5611	REPAIR RESIN PARTIAL DENTURE BASE, MANDIBULAR	\$ 282.50
D5612	REPAIR RESIN PARTIAL DENTURE BASE, MAXILLARY	\$ 282.50
D5621	REPAIR CAST FRAMEWORK, MANDIBULAR	\$ 304.50
D5622	REPAIR CAST FRAMEWORK, MAXILLARY	\$ 304.50
D5630	REPAIR OR REPLACE BROKEN CLASP PER TOOTH	\$ 369.50
D5640	REPLACE BROKEN TEETH - PER TOOTH	\$ 239.25
D5650	ADD TOOTH TO EXISTING PARTIAL DENTURE	\$ 326.25
D5660	ADD CLASP TO EXISTING PARTIAL DENTURE PER TOOTH	\$ 391.50
D5670	REPLACE ALL TEETH&ACRYLIC CAST METAL FRMEWRK MAX	\$ 956.75
D5671	REPLACE ALL TEETH&ACRYLIC CAST METL FRMEWRK MAND	\$ 956.75
D5710	REBASE COMPLETE MAXILLARY DENTURE	\$ 967.75
D5711	REBASE COMPLETE MANDIBULAR DENTURE	\$ 924.00
D5720	REBASE MAXILLARY PARTIAL DENTURE	\$ 913.75
D5721	REBASE MANDIBULAR PARTIAL DENTURE	\$ 913.75
D5730	RELINE COMPLETE MAXILLARY DENTURE (CHAIRSIDE)	\$ 546.00
D5731	RELINE COMPLETE MANDIBULAR DENTURE (CHAIRSIDE)	\$ 546.00
D5740	RELINE MAXILLARY PARTIAL DENTURE (CHAIRSIDE)	\$ 500.25
D5741	RELINE MANDIBULAR PARTIAL DENTURE (CHAIRSIDE)	\$ 500.25
D5750	RELINE COMPLETE MAXILLARY DENTURE (LABORATORY)	\$ 728.50
D5751	RELINE COMPLETE MANDIBULAR DENTURE (LABORATORY)	\$ 728.50
D5760	RELINE MAXILLARY PARTIAL DENTURE (LABORATORY)	\$ 717.75
D5761	RELINE MANDIBULAR PARTIAL DENTURE (LABORATORY)	\$ 717.75
D5810	INTERIM COMPLETE DENTURE (MAXILLARY)	\$ 1,152.50
D5811	INTERIM COMPLETE DENTURE (MANDIBULAR)	\$ 1,239.50
D5820	INTERIM PARTIAL DENTURE (MAXILLARY)	\$ 891.50
D5821	INTERIM PARTIAL DENTURE (MANDIBULAR)	\$ 946.00
D5850	TISSUE CONDITIONING MAXILLARY	\$ 228.50
D5851	TISSUE CONDITIONING MANDIBULAR	\$ 228.50
D5862	PRECISION ATTACHMENT BY REPORT	BR
D5863	OVERDENTURE COMPLETE MAXILLARY	\$ 2,522.25
D5864	OVERDENTURE PARTIAL MAXILLARY	\$ 3,327.00
D5865	OVERDENTURE COMPLETE MIBULAR	\$ 2,522.25
D5866	OVERDENTURE PARTIAL MIBULAR	\$ 3,457.50
D5867	REPLACEMENT REPL PART SEMI-PRCISN/PRCISN ATTCH	BR
D5875	MODIFICATION REMV PROSTH AFTER IMPLANT SURGERY	BR
D5876	ADD MTL SUBSTRUCTR TO ACRYLIC FULL DNTR PER ARCH	BR
D5899	UNS REMOVABLE PROSTHODONTIC PROCEDURE REPORT	BR
D5911	FACIAL MOULAGE (SECTIONAL)	\$ 604.50

D5912	FACIAL MOULAGE (COMPLETE)	\$ 604.50
D5913	NASAL PROSTHESIS	\$ 12,730.25
D5914	AURICULAR PROSTHESIS	\$ 12,730.25
D5915	ORBITAL PROSTHESIS	\$ 17,227.25
D5916	OCULAR PROSTHESIS	\$ 4,595.00
D5919	FACIAL PROSTHESIS	BR
D5922	NASAL SEPTAL PROSTHESIS	BR
D5923	OCULAR PROSTHESIS INTERIM	BR
D5924	CRANIAL PROSTHESIS	BR
D5925	FACIAL AUGMENTATION IMPLANT PROSTHESIS	BR
D5926	NASAL PROSTHESIS REPLACEMENT	BR
D5927	AURICULAR PROSTHESIS REPLACEMENT	BR
D5928	ORBITAL PROSTHESIS REPLACEMENT	BR
D5929	FACIAL PROSTHESIS REPLACEMENT	BR
D5931	OBTURATOR PROSTHESIS SURGICAL	\$ 6,854.25
D5932	OBTURATOR PROSTHESIS DEFINITIVE	\$ 12,819.50
D5933	OBTURATOR PROSTHESIS MODIFICATION	BR
D5934	MANDIBULAR RESECTION PROSTHESIS W/GUIDE FLANGE	\$ 11,684.00
D5935	MANDIBULAR RESECTION PROSTHESIS W/O GUIDE FLANGE	\$ 10,166.50
D5936	OBTURATOR PROSTHESIS INTERIM	\$ 11,419.00
D5937	TRISMUS APPLIANCE (NOT FOR TMD TREATMENT)	\$ 1,435.25
D5951	FEEDING AID	\$ 1,865.75
D5952	SPEECH AID PROSTHESIS PEDIATRIC	\$ 6,058.50
D5953	SPEECH AID PROSTHESIS ADULT	\$ 11,505.75
D5954	PALATAL AUGMENTATION PROSTHESIS	\$ 10,662.25
D5955	PALATAL LIFT PROSTHESIS DEFINITIVE	\$ 9,861.75
D5958	PALATAL LIFT PROSTHESIS INTERIM	BR
D5959	PALATAL LIFT PROSTHESIS MODIFICATION	BR
D5960	SPEECH AID PROSTHESIS MODIFICATION	BR
D5982	SURGICAL STENT	\$ 967.75
D5983	RADIATION CARRIER	\$ 2,174.75
D5984	RADIATION SHIELD	\$ 2,174.75
D5985	RADIATION CONE LOCATOR	\$ 2,174.75
D5986	FLUORIDE GEL CARRIER	\$ 217.25
D5987	COMMISSURE SPLINT	\$ 3,262.00
D5988	SURGICAL SPLINT	\$ 652.50
D5991	VESICULOBULLOUS DISEASE MEDICAMENT CARRIER	\$ 250.00
D5992	ADJUST MAXILLOFACIAL PROSTH APPLIANCE BY REPORT	BR
D5993	MAINT / CLEAN MAXILLOFACIAL PROSTH BY REPORT	BR
D5994	PERIDONL MEDIC CARRIER PERIPH SEAL LAB PRCESSD	BR
D5999	UNSPECIFIED MAXILLOFACIAL PROSTHESIS BY REPORT	BR

D6010	SURG PLACEMENT IMPLANT BODY: ENDOSTEAL IMPLANT	\$ 3,981.75
D6011	SECOND STAGE IMPLANT SURGERY	BR
D6012	SURG PLCMT INTERIM IMPL TRNSITIONL PROS: ENDOS	\$ 3,762.25
D6013	SURGICAL PLACEMENT OF MINI IMPLANT	\$ 3,981.75
D6040	SURGICAL PLACEMENT: EPOSTEAL IMPLANT	\$ 13,700.25
D6050	SURGICAL PLACEMENT: TRANSOSTEAL IMPLANT	\$ 10,220.75
D6051	INTERIM ABUTMENT	BR
D6052	SEMI-PRECISION ATTACHMENT ABUTMENT	\$ 1,687.50
D6055	CONNECTING BAR IMPLANT OR ABUTMENT SUPPORTED	\$ 1,196.00
D6056	PREFABRICATED ABUTMENT INCLUDES PLACEMENT	\$ 826.50
D6057	CUSTOM FABRICATED ABUTMENT INCLUDES PLACEMENT	\$ 1,022.00
D6058	ABUTMENT SUPPORTED PORCELAIN/CERAMIC CROWN	\$ 2,292.00
D6059	ABUT SUPP PORCELAIN TO METL CROWN HI NOBLE METL	\$ 2,261.50
D6060	ABUT SUPP PORCELAIN TO MTL CROWN PREDOM BASE MTL	\$ 2,137.75
D6061	ABUT SUPP PORCELAIN TO METAL CROWN NOBLE METAL	\$ 2,181.25
D6062	ABUTMENT SUPP CAST METAL CROWN HIGH NOBLE METAL	\$ 2,172.50
D6063	ABUTMENT SUPP CAST METAL CROWN PREDOM BASE METAL	\$ 1,891.75
D6064	ABUTMENT SUPP CAST METAL CROWN NOBLE METAL	\$ 1,979.00
D6065	IMPL SUPP PORCELAIN/CERAMIC CROWN	\$ 2,255.00
D6066	IMPL SUPP PORCLN FUSED METL CRWN TITNM/HIGH NOBL	\$ 2,196.25
D6067	IMPL SUPP METAL CROWN TITIANM/HIGH NOBLE METL	\$ 2,131.25
D6068	ABUT SUPP RETAINER PORCELAIN/CERAMIC FPD	\$ 2,272.50
D6069	ABUT RETAINR PORCELN TO METL FPD HI NOBL METL	\$ 2,261.50
D6070	ABUT RETN PORCELN TO METL FPD PREDOM BASE METL	\$ 2,137.75
D6071	ABUT SUPP RETN PORCELN FUSD METAL FPD NOBLE METL	\$ 2,181.25
D6072	ABUT SUPP RETN CAST METL FPD HIGH NOBLE METL	\$ 2,207.00
D6073	ABUT RTNR CAST METL FPD PREDOM BASE METL	\$ 2,016.00
D6074	ABUTMENT RTNR CAST METAL FPD NOBLE METAL	\$ 2,142.00
D6075	IMPLANT SUPPORTED RETAINER FOR CERAMIC FPD	\$ 2,255.00
D6076	IMPL SUPP RTNR PORCLN FUSED METL FPD TITNM/HIGH	\$ 2,196.25
D6077	IMPL SUPP RTNR CST METL FPD TITNM/HIGH NOBLE	\$ 2,131.25
D6080	IMPL MAINT PROC REMV CLEAN PROSTH & ABUT REINSRT	\$ 187.25
D6081	SCALNG/DBRDMNT IMPLNT WO FLAP ENTRY/CLOS	\$ 95.75
D6085	PROVISIONAL IMPLANT CROWN	\$ 656.75
D6090	REPAIR IMPLANT SUPPORTED PROSTHESIS BY REPORT	BR
D6091	REPL ATTACHMNT IMPL/ABUT SUPP PROS PER ATTACHMNT	\$ 902.50
D6092	RECEMENT / REBOND IMPLANT/ABUTMENT SUPP CROWN	\$ 176.25
D6093	RECMNT/REBOND IMPL/ABUTMNT SUPP FIX PART DENTURE	\$ 276.25
D6094	ABUTMENT SUPPORTED CROWN TITANIUM	\$ 1,793.75
D6095	REPAIR IMPLANT ABUTMENT BY REPORT	BR
D6096	REMOVE BROKEN IMPLANT RETAINING SCREW	BR

D6100	IMPLANT REMOVAL BY REPORT	BR
D6101	DBRDMNT OF PERI-IMPLANT DEFECT	\$ 645.75
D6102	DBRDMNT OF PERI-IMPLANT DEFECT	\$ 887.25
D6103	BONE GRFT RPR PERIIMPLNT DFCT W/O FLAP ENTR/CLSE	\$ 739.50
D6104	BONE GRAFT AT TIME OF IMPLANT PLACEMENT	\$ 739.50
D6110	IMPL/ABUTMENT SUPPORTED RD - MAXILLARY	\$ 2,972.75
D6111	IMPL/ABUTMENT SUPPORTED RD - MANDIBULAR	\$ 2,972.75
D6112	IMPL/ABUTMENT SUPPORTED RPD - MAXILLARY	\$ 2,972.75
D6113	IMPLANT / ABUTMENT SUPPORTED RPD - MANDIBULAR	\$ 2,972.75
D6114	IMPLANT / ABUTMENT SUPPORTED FD - MAXILLARY	\$ 5,206.00
D6115	IMPLANT/ABUTMENT SUPPORTED FD - MANDIBULAR	\$ 5,206.00
D6116	IMPL/ABUTMENT SUPPORTED FD - MAXILLARY - PARTIAL	\$ 3,992.50
D6117	IMPL/ABUT SUPPORTED FD - MANDIBULAR - PARTIAL	\$ 3,992.50
D6118	IMP/ABUT SPRTD INTRM FIXED DENTR EDENTLS MANDBLR	\$ 2,707.25
D6119	IMP/ABUT SPRTD INTRM FIXED DENTR EDENTLS MAXLARY	\$ 2,707.25
D6190	RADIOGRAPHIC/SURGICAL IMPLANT INDEX BY REPORT	\$ 402.25
D6194	ABUTMENT SUPPORTED RETAINER CROWN FOR FPD	\$ 1,848.25
D6199	UNSPECIFIED IMPLANT PROCEDURE BY REPORT	BR
D6205	PONTIC - INDIRECT RESIN BASED COMPOSITE	\$ 931.25
D6210	PONTIC - CAST HIGH NOBLE METAL	\$ 1,423.75
D6211	PONTIC - CAST PREDOMINANTLY BASE METAL	\$ 1,334.25
D6212	PONTIC - CAST NOBLE METAL	\$ 1,388.25
D6214	PONTIC - TITANIUM	\$ 1,432.75
D6240	PONTIC - PORCELAIN FUSED TO HIGH NOBLE METAL	\$ 1,406.00
D6241	PONTIC - PORCELN FUSED PREDOMINANTLY BASE METAL	\$ 1,298.50
D6242	PONTIC - PORCELAIN FUSED TO NOBLE METAL	\$ 1,370.00
D6245	PONTIC - PORCELAIN/CERAMIC	\$ 1,450.75
D6250	PONTIC - RESIN WITH HIGH NOBLE METAL	\$ 1,388.25
D6251	PONTIC - RESIN WITH PREDOMINANTLY BASE METAL	\$ 1,280.50
D6252	PONTIC - RESIN WITH NOBLE METAL	\$ 1,321.75
D6253	PROVISIONAL PONTIC	\$ 598.25
D6545	RETAINER - CAST METAL RESIN BONDED FIX PROSTH	\$ 530.25
D6548	RETAINER - PORCELN/CERAMIC RSN BONDED FIX PROSTH	\$ 582.75
D6549	RESIN RETAINER FOR RESIN BONDED FIXED PROSTHESIS	\$ 382.00
D6600	RETAINER INLAY - PORCELAIN/CERAMIC TWO SURFACES	\$ 1,052.25
D6601	RETAINER INLAY - PORC/CERAMIC 3 OR MORE SURFACES	\$ 1,103.25
D6602	RETAINER INLAY CAST HIGH NOBLE METAL 2 SURFACES	\$ 1,124.25
D6603	RETAINR INLAY - CAST HI NOBLE METAL 3/MORE SURFS	\$ 1,237.00
D6604	RETAINER INLAY - CAST PREDOM BASE METAL 2 SURFS	\$ 1,102.00
D6605	RTAINR INLAY - CAST PREDOM BASE MTL 3/MORE SURFS	\$ 1,167.50
D6606	RETAINER INLAY - CAST NOBLE METAL TWO SURFACES	\$ 1,084.25

D6607	RETNR INLAY CAST NOBLE METAL 3 OR MORE SURFACES	\$ 1,202.75
D6608	RETAINER ONLAY - PORCELAIN/CERAMIC TWO SURFACES	\$ 1,143.50
D6609	RETAINER ONLAY PORCELAIN/CERAMIC 3/MORE SURFACES	\$ 1,193.50
D6610	RETAINER ONLAY - HIGH NOBLE METAL TWO SURFACES	\$ 1,212.75
D6611	RETAINER ONLAY HIGH NOBLE METAL 3/MORE SURFACES	\$ 1,326.50
D6612	RETAINER ONLAY CAST PREDOM BASE METAL 2 SURFACES	\$ 1,206.25
D6613	RETNR ONLAY CAST PREDOM BASE METAL 3/MORE SURFS	\$ 1,260.75
D6614	RETAINER ONLAY - CAST NOBLE METAL TWO SURFACES	\$ 1,180.75
D6615	RETNR ONLAY CAST NOBLE METAL 3 OR MORE SURFACES	\$ 1,227.00
D6624	RETAINER INLAY - TITANIUM	\$ 1,124.25
D6634	RETAINER ONLAY - TITANIUM	\$ 1,180.75
D6710	RETAINER CROWN - INDIRECT RESIN BASED COMPOSITE	\$ 1,204.50
D6720	RETAINER CROWN - RESIN WITH HIGH NOBLE METAL	\$ 1,405.25
D6721	RETAINER CROWN - RESIN WITH PREDOM BASE METAL	\$ 1,333.00
D6722	RETAINER CROWN - RESIN WITH NOBLE METAL	\$ 1,357.25
D6740	RETAINER CROWN - PORCELAIN/CERAMIC	\$ 1,477.50
D6750	RETNR CROWN PORCELAIN FUSED TO HIGH NOBLE METAL	\$ 1,439.25
D6751	RETNR CROWN PORCELAIN FUSED PREDOM BASE METAL	\$ 1,342.50
D6752	RETAINER CROWN - PORCELAIN FUSED TO NOBLE METAL	\$ 1,374.75
D6780	RETAINER CROWN - 3/4 CAST HIGH NOBLE METAL	\$ 1,357.25
D6781	RETAINER CROWN 3/4 CAST PREDOMINANTLY BASE METAL	\$ 1,357.25
D6782	RETAINER CROWN - 3/4 CAST NOBLE METAL	\$ 1,260.75
D6783	RETAINER CROWN - 3/4 PORCELAIN/CERAMIC	\$ 1,397.25
D6790	RETAINER CROWN - FULL CAST HIGH NOBLE METAL	\$ 1,389.25
D6791	RETAINER CROWN FULL CAST PREDOM BASE METAL	\$ 1,316.75
D6792	RETAINER CROWN - FULL CAST NOBLE METAL	\$ 1,365.00
D6793	PROVISIONAL RETAINER CROWN	\$ 570.25
D6794	RETAINER CROWN - TITANIUM	\$ 1,365.00
D6920	CONNECTOR BAR	\$ 388.50
D6930	RECEMENT / REBOND FIXED PARTIAL DENTURE	\$ 226.25
D6940	STRESS BREAKER	\$ 513.75
D6950	PRECISION ATTACHMENT	\$ 992.50
D6980	FIXED PARTIAL DENTURE REPAIR BY REPORT	BR
D6985	PEDIATRIC PARTIAL DENTURE FIXED	\$ 863.25
D6999	UNSPECIFIED FIXED PROSTHODONTIC PROCEDURE REPORT	BR
D7111	EXTRACTION CORONAL REMNANTS - PRIMARY TOOTH	\$ 181.50
D7140	EXTRACTION ERUPTED TOOTH OR EXPOSED ROOT	\$ 241.25
D7210	SURG REMOVAL ERUPTED TOOTH REMV BONE ELEV FLAP	\$ 360.50
D7220	REMOVAL OF IMPACTED TOOTH - SOFT TISSUE	\$ 451.75
D7230	REMOVAL OF IMPACTED TOOTH - PARTIALLY BONY	\$ 601.00
D7240	REMOVAL OF IMPACTED TOOTH - COMPLETELY BONY	\$ 705.50

D7241	REMV IMP TOOTH - CMPL BONY W/UNUSUAL SURG COMPS	\$ 886.25
D7250	SURGICAL REMOVAL OF RESIDUAL TOOTH ROOTS	\$ 380.75
D7251	CORONECTOMY INTENTIONAL PARTIAL TOOTH REMOVAL	\$ 746.50
D7260	OROANTRAL FISTULA CLOSURE	\$ 3,281.25
D7261	PRIMARY CLOSURE OF A SINUS PERFORATION	\$ 1,367.00
D7270	TOOTH REIMPL &OR STBL ACC EVULSED/DISPLCD TOOTH	\$ 1,025.25
D7272	TOOTH TRANSPLANTATION	\$ 1,367.00
D7280	SURGICAL ACCESS OF AN UNERUPTED TOOTH	\$ 956.75
D7282	MOBILIZ ERUPTED/MALPOSITIONED TOOTH AID ERUPTION	\$ 478.50
D7283	PLCMT DEVICE FACILITATE ERUPTION IMPACTED TOOTH	\$ 410.00
D7285	BIOPSY OF ORAL TISSUE HARD	\$ 1,914.00
D7286	BIOPSY OF ORAL TISSUE SOFT	\$ 820.50
D7287	EXFOLIATIVE CYTOLOGICAL SAMPLE COLLECTION	\$ 328.00
D7288	BRUSH BIOPSY - TRANSEPIHELIAL SAMPLE COLLECTION	\$ 328.00
D7290	SURGICAL REPOSITIONING OF TEETH	\$ 820.50
D7291	TRANSSEPTAL FIBEROT/SUPRA CRESTAL FIBEROT BR	BR
D7292	SURG PLCMT: TEMP ANCHORAGE SCREW RET PLATE FLAP	\$ 1,312.50
D7293	SURG PLCMT: TEMP ANCHORAGE DEVICE RQR SURG FLAP	\$ 820.50
D7294	SURG PLCMT: TEMP ANCHORAGE DEVICE W/O SURG FLAP	\$ 683.50
D7295	HARVEST BONE FOR USE AUTOGENOUS GRAFTING PROC	BR
D7296	CORTICOTOMY 1 - 3 TEETH OR TOOTH SPACES PER QUAD	BR
D7297	CORTCTMY 4 OR MORE TEETH OR TOOTH SPCE PER QUAD	BR
D7310	ALVEOLOPLASTY W/EXTRACTION 4/> TEETH/SPACE QUAD	\$ 582.50
D7311	ALVEOLOPLSTY CONJNC XTRACT 1-3 TEETH/SPACES QUAD	\$ 509.75
D7320	ALVEOLOPLASTY NOT W/EXTRACTIONS 4/> TEETH/SPACE	\$ 947.00
D7321	ALVEOLOPLSTY NOT CNJNC XTRCT 1-3 TEETH/SPCE QUAD	\$ 801.00
D7340	VESTIBULOPLASTY RIDGE EXT SEC EPITHELIALIZATION	\$ 4,005.25
D7350	VESTIBULOPLASTY RIDGE EXT W/SOFT TISS GRAFTS	\$ 11,652.25
D7410	EXCISION OF BENIGN LESION UP TO 1.25 CM	\$ 1,747.75
D7411	EXCISION OF BENIGN LESION GREATER THAN 1.25 CM	\$ 2,767.50
D7412	EXCISION OF BENIGN LESION COMPLICATED	\$ 3,058.75
D7413	EXCISION OF MALIGNANT LESION UP TO 1.25 CM	\$ 2,039.00
D7414	EXCISION OF MALIGNANT LESION > 1.25 CM	\$ 3,058.75
D7415	EXCISION OF MALIGNANT LESION COMPLICATED	\$ 3,422.50
D7440	EXC MALIG TUMOR-LESION DIAMETER UP TO 1.25 CM	\$ 2,767.50
D7441	EXC MALIG TUMOR-LESION DIAM GREATER THAN 1.25 CM	\$ 4,078.25
D7450	REMOVAL BEN ODONTOGENIC CYST/TUMR- UP TO 1.25 CM	\$ 1,747.75
D7451	REMOVAL BENIGN ODONTOGENIC CYST/TUMOR- > 1.25 CM	\$ 2,388.50
D7460	REMOVAL BEN NONODONTOGENIC CYST/TUMR- UP 1.25 CM	\$ 1,747.75
D7461	REMOVAL BEN NONODONTOGENIC CYST/TUMOR > 1.25 CM	\$ 2,388.50
D7465	DESTRUCTION LESION PHYSICAL/CHEM METHOD BY REPRT	\$ 947.00

D7471	REMOVAL OF LATERAL EXOSTOSIS	\$ 2,164.50
D7472	REMOVAL OF TORUS PALATINUS	\$ 2,572.25
D7473	REMOVAL OF TORUS MANDIBULARIS	\$ 2,426.50
D7485	SURGICAL REDUCTION OF OSSEOUS TUBEROSITY	\$ 2,164.50
D7490	RADICAL RESECTION OF MAXILLA OR MANDIBLE	\$ 17,478.25
D7510	INCISION & DRAINAGE ABSCESS-INTRAORAL SOFT TISS	\$ 626.50
D7511	I & D ABSCESS INTRAORAL SOFT TISSUE COMPLICATED	\$ 947.00
D7520	INCISION & DRAINAGE ABSCESS-EXTRAORAL SOFT TISS	\$ 2,983.00
D7521	I & D ABSCESS EXTRAORAL SOFT TISSUE COMPLICATED	\$ 3,277.00
D7530	REMOVAL FB FROM MUCOSA SKIN/SUBCUT ALVEOL TISSUE	\$ 1,074.75
D7540	REMOV REACT-PRODUC FOREIGN BODIES-MUSCULOSKEL SYS	\$ 1,191.25
D7550	PART OSTEC/SEQUESTRECTOMY REMOVAL NON-VITAL BONE	\$ 742.75
D7560	MAXILLARY SINUSOTOMY REMOVAL TOOTH FRAGMENT/FB	\$ 5,899.00
D7610	MAXILLA-OPEN REDUCTION	\$ 9,540.00
D7620	MAXILLA-CLOSED REDUCTION	\$ 7,154.25
D7630	MANDIBLE-OPEN REDUCTION	\$ 12,403.75
D7640	MANDIBLE-CLOSED REDUCTION	\$ 7,871.25
D7650	MALAR AND/OR ZYGOMATIC ARCH - OPEN REDUCTION	\$ 5,963.00
D7660	MALAR AND/OR ZYGOMATIC ARCH - CLOSED REDUCTION	\$ 3,516.25
D7670	ALVEOLUS-CLOSED REDUCTION W/STABILIZATION TEETH	\$ 2,744.00
D7671	ALVEOLUS-OPEN REDUCTION W/STABILIZATION TEETH	\$ 5,170.50
D7680	FCE BNS - COMP RDUC W/FIX&MX SURG APPRCHES CPT	\$ 17,888.75
D7710	MAXILLA - OPEN REDUCTION	\$ 11,212.00
D7720	MAXILLA - CLOSED REDUCTION	\$ 7,871.25
D7730	MANDIBLE - OPEN REDUCTION	\$ 16,219.75
D7740	MANDIBLE - CLOSED REDUCTION	\$ 8,025.50
D7750	MALAR AND/OR ZYGOMATIC ARCH - OPEN REDUCTION	\$ 10,207.25
D7760	MALAR AND/OR ZYGOMATIC ARCH - CLOSED REDUCTION	\$ 4,095.50
D7770	ALVEOLUS - OPEN REDUCTION STABILIZATION OF TEETH	\$ 5,549.25
D7771	ALVEOLUS CLOSED REDUCTION STABILIZATION OF TEETH	\$ 4,282.00
D7780	FACIAL BONES-COMP RDUC FIX & MX SURG APPROACHES	\$ 23,852.00
D7810	OPEN REDUCTION OF DISLOCATION	\$ 10,492.75
D7820	CLOSED REDUCTION OF DISLOCATION	\$ 1,718.75
D7830	MANIPULATION UNDER ANESTHESIA	\$ 984.25
D7840	CONDYLECTOMY	\$ 14,303.00
D7850	SURGICAL DISCECTOMY WITH/WITHOUT IMPLANT	\$ 12,351.25
D7852	DISC REPAIR	\$ 14,143.00
D7854	SYNOVECTOMY	\$ 14,594.25
D7856	MYOTOMY	\$ 10,355.75
D7858	JOINT RECONSTRUCTION	\$ 29,518.00
D7860	ARTHROTOMY	\$ 12,581.50

D7865	ARTHROPLASTY	\$ 20,275.00
D7870	ARTHROCENTESIS	\$ 670.00
D7871	NON-ARTHROSCOPIC LYSIS AND LAVAGE	\$ 1,339.75
D7872	ARTHROSCOPY - DIAGNOSIS WITH OR WITHOUT BIOPSY	\$ 7,151.50
D7873	ARTHROSCOPY SURGICAL: LAVAGE&LYSIS ADHESIONS	\$ 8,611.00
D7874	ARTHROSCOPY SURGICAL: DISC REPSTN&STABILIZATION	\$ 12,351.25
D7875	ARTHROSCOPY - SURGICAL: SYNOVECTOMY	\$ 13,531.00
D7876	ARTHROSCOPY - SURGICAL: DISCECTOMY	\$ 14,588.75
D7877	ARTHROSCOPY - SURGICAL: DEBRIDEMENT	\$ 12,875.75
D7880	OCCLUSAL ORTHOTIC DEVICE BY REPORT	\$ 1,608.00
D7881	OCCLUSAL ORTHOTIC DEVICE ADJUSTMENT	\$ 174.50
D7899	UNSPECIFIED TMD THERAPY BY REPORT	BR
D7910	SUTURE OF RECENT SMALL WOUNDS UP TO 5 CM	\$ 955.50
D7911	COMPLICATED SUTURE - UP TO 5 CM	\$ 2,385.75
D7912	COMPLICATED SUTURE - GREATER THAN 5 CM	\$ 4,293.75
D7920	SKIN GRAFT	\$ 7,035.00
D7921	COLL APPL AUTOLOGOUS BLD CNCNTRT PRODUCT	\$ 649.50
D7940	OSTEOPLASTY - FOR ORTHOGNATHIC DEFORMITIES	BR
D7941	OSTEOTOMY - MANDIBULAR RAMI	\$ 17,915.25
D7943	OSTEOT-MANDIB RAMI W/BONE GRFT;INCL OBTAIN GRAFT	\$ 16,458.50
D7944	OSTEOTOMY - SEGMENTED OR SUBAPICAL	\$ 14,667.50
D7945	OSTEOTOMY - BODY OF MANDIBLE	\$ 19,517.00
D7946	LEFORT I (MAXILLA - TOTAL)	\$ 24,178.25
D7947	LEFORT I (MAXILLA - SEGMENTED)	\$ 20,333.25
D7948	LEFORT II/LEFORT III - W/O BONE GRAFT	\$ 26,392.00
D7949	LEFORT II OR LEFORT III - WITH BONE GRAFT	\$ 34,374.00
D7950	OSSEOUS OSTEOPERIOSTEAL/CARTILAGE GRAFT MAND/MAX	BR
D7951	SINUS AUGMENTATION WITH BONE OR BONE SUBSTITUTES	BR
D7952	SINUS AUGMENTATION VIA A VERTICAL APPROACH	BR
D7953	BONE REPLCMT GRAFT RIDGE PRESERVATION PER SITE	\$ 990.75
D7955	REPAIR MAXLOFACIAL SOFT &/ HARD TISSUE DEFECT	BR
D7960	FRENULECTOMY SEP PROC NOT INCIDENTL ANOTHER PROC	\$ 801.00
D7963	FRENULOPLASTY	\$ 1,311.00
D7970	EXCISION OF HYPERPLASTIC TISSUE - PER ARCH	\$ 1,165.25
D7971	EXCISION OF PERICORONAL GINGIVA	\$ 437.25
D7972	SURGICAL REDUCTION OF FIBROUS TUBEROSITY	\$ 1,631.50
D7979	NON-SURGICAL SIALOLITHOTOMY	BR
D7980	SURGICAL SIALOLITHOTOMY	\$ 1,835.25
D7981	EXCISION OF SALIVARY GLAND BY REPORT	BR
D7982	SIALODOCHOPLASTY	\$ 4,340.25
D7983	CLOSURE OF SALIVARY FISTULA	\$ 4,165.75

D7990	EMERGENCY TRACHEOTOMY	\$ 3,583.00
D7991	CORONOIDECTOMY	\$ 8,739.00
D7995	SYNTHETIC GRAFT-MANDIBLE/FACIAL BONES BY REPORT	BR
D7996	IMPLANT-MANDIBLE AUGMENTATION PURPOSES BY REPORT	BR
D7997	APPLIANCE REMOVAL INCLUDES REMOVAL OF ARCHBAR	\$ 670.00
D7998	INTRAORAL PLCMT FIX DEVICE NOT CONJUNCTION W/FX	\$ 2,913.00
D7999	UNSPECIFIED ORAL SURGERY PROCEDURE BY REPORT	BR
D8010	LIMITED ORTHODONTIC TREATMENT PRIMARY DENTITION	BR
D8020	LTD ORTHODONTIC TREATMENT TRANSITIONAL DENTITION	BR
D8030	LTD ORTHODONTIC TREATMENT ADOLESCENT DENTITION	BR
D8040	LIMITED ORTHODONTIC TREATMENT ADULT DENTITION	BR
D8050	INTERCEPTIVE ORTHODONTIC TX PRIMARY DENTITION	BR
D8060	INTRCPTV ORTHODONTIC TX TRANSITIONAL DENTITION	BR
D8070	COMP ORTHODONTIC TX TRANSITIONAL DENTITION	BR
D8080	COMPREHENSIVE ORTHODONTIC TX ADOLES DENTITION	BR
D8090	COMPREHENSIVE ORTHODONTIC TX ADULT DENTITION	BR
D8210	REMOVABLE APPLIANCE THERAPY	BR
D8220	FIXED APPLIANCE THERAPY	BR
D8660	PREORTHODONTIC TREATMENT VISIT	BR
D8670	PERIODIC ORTHODONTIC TREATMENT VISIT	BR
D8680	ORTHODONTIC RETENTION	BR
D8681	REMOVABLE ORTHODONTIC RETAINER ADJUSTMENT	BR
D8690	ORTHODONTIC TREATMENT	BR
D8691	REPAIR OF ORTHODONTIC APPLIANCE	BR
D8692	REPLACEMENT OF LOST OR BROKEN RETAINER	BR
D8693	RE-CEMENT OR RE-BOND FIXED RETAINER	BR
D8694	REPAIR OF FIXED RETAINERS INCLUDES REATTACHMENT	BR
D8695	REMOVAL OF FIXED ORTHO APPLIANCES TX NOT COMPLT	BR
D8999	UNSPECIFIED ORTHODONTIC PROCEDURE BY REPORT	BR
D9110	PALLIATIVE EMERGENCY TX DENTAL PAIN MINOR PROC	\$ 181.00
D9120	FIXED PARTIAL DENTURE SECTIONING	\$ 204.75
D9130	TMJ JOINT DYSFUNCTION - NON-INVASIVE PHYSL THERP	BR
D9210	LOCAL ANES-NOT CONJUNCTION W/OP/SURGICAL PROC	\$ 96.75
D9211	REGIONAL BLOCK ANESTHESIA	\$ 107.00
D9212	TRIGEMINAL DIVISION BLOCK ANESTHESIA	\$ 167.00
D9215	LOCAL ANESTHESIA CONJUNCTION OPERATIVE/SURG PROC	\$ 80.25
D9219	EVALUATION FOR DEEP SEDATION / GA	\$ 190.25
D9222	DEEP SEDATION / GENERAL ANESTHESIA FIRST 15 MIN	\$ 567.25
D9223	DEEP SEDATION/ GEN ANESTH EACH 15 MIN INCREMENT	\$ 434.00
D9230	INHALATION OF NITROUS OXIDE/ANXIOLYSIS ANALGESIA	\$ 160.00
D9239	IV MOD (CONSCIOUS) SEDTION/ANALGSIA FIRST 15 MIN	\$ 467.00

D9243	IV MOD (CONSCIOUS) SEDATION EACH 15 MIN INCRMENT	\$ 366.75
D9248	NON-INTRAVENOUS CONSCIOUS SEDATION	\$ 233.75
D9310	CONSULT DX SERV DENT/PHY NOT REQUESTING DENT/PHY	\$ 251.50
D9311	CONSULT WITH A MEDICAL HEALTHCARE PROFESSIONAL	\$ 251.50
D9410	HOUSE/EXTENDED CARE FACILITY CALL	\$ 287.25
D9420	HOSPITAL OR AMBULATORY SURGICAL CENTER CALL	\$ 465.00
D9430	OFFICE VISIT OBSERVATION NO OTHER SRVC PERFORMED	BR
D9440	OFFICE VISIT - AFTER REGULARLY SCHEDULED HOURS	\$ 157.00
D9450	CASE PRESENTATION DTL&EXT TREATMENT PLANNING	\$ 78.50
D9610	THERAPEUTIC PARENTERAL DRUG SINGL ADMINISTRATION	BR
D9612	TX PARENTERAL DRUGS 2/> ADMINISTRATIONS DIFF MED	BR
D9613	INFLTRN SUSTND RELSE THRPTIC DRG SINGLE MTPL SITE	\$ 81.75
D9630	OTHER DRUGS AND/OR MEDICAMENTS BY REPORT	BR
D9910	APPLICATION OF DESENSITIZING MEDICAMENT	\$ 99.00
D9911	APPLIC DESENZT RSN CERV &OR ROOT SURF-TOOTH	\$ 138.00
D9920	BEHAVIOR MANAGEMENT BY REPORT	BR
D9930	TX COMPLICATIONS - UNUSUAL CIRCUMSTANCES REPORT	BR
D9932	CLEAN/INSPECT REMOVBL COMPLETE MAXILLARY DENTURE	\$ 242.50
D9933	CLEAN INSPECT REMVBL COMPLETE MANDIBULAR DENTURE	\$ 242.50
D9934	CLEAN/ INSPECT REMVBL PARTIAL MAXILLARY DENTURE	\$ 242.50
D9935	CLEAN INSPECT REMVBL PARTIAL MANDIBULAR DENTURE	\$ 242.50
D9941	FABRICATION OF ATHLETIC MOUTHGUARD	\$ 282.25
D9942	REPAIR AND/OR RELINE OF OCCLUSAL GUARD	\$ 338.75
D9943	OCCLUSAL GUARD ADJUSTMENT	\$ 169.25
D9944	OCCLUSAL GUARD - HARD APPLIANCE, FULL ARCH	\$ 818.50
D9945	OCCLUSAL GUARD - SOFT APPLIANCE, FULL ARCH	\$ 818.50
D9946	OCCLUSAL GUARD HARD APPLIANCE PARTIAL ARCH	\$ 818.50
D9950	OCCLUSION ANALYSIS - MOUNTED CASE	\$ 536.00
D9951	OCCLUSAL ADJUSTMENT - LIMITED	\$ 239.75
D9952	OCCLUSAL ADJUSTMENT - COMPLETE	\$ 1,128.75
D9961	DUPLICATE/COPY PATIENT'S RECORDS	BR
D9970	ENAMEL MICROABRASION	\$ 126.75
D9971	ODONTOPLASTY 1-2 TEETH; INCL REMOVAL ENAMEL PROJ	\$ 163.75
D9972	EXTERNAL BLEACHING - PER ARCH	\$ 564.50
D9973	EXTERNAL BLEACHING - PER TOOTH	\$ 93.25
D9974	INTERNAL BLEACHING - PER TOOTH	\$ 493.75
D9975	EXTERNAL BLEACHING - PER ARCH	\$ 564.50
D9985	SALES TAX	BR
D9986	MISSED APPOINTMENT	BR
D9987	CANCELLED APPOINTMENT	BR
D9990	CERT TRNSLATION OR SIGN LANGUAGE SRVCS PER VISIT	BR

D9991	DENTAL CASE MGMT ADDRESS APPNTMNT COMPL BARRIERS	\$ 99.00
D9992	DENTAL CASE MANAGEMENT - CARE COORDINATION	\$ 99.00
D9993	DENTAL CASE MGMT - MOTIVATIONAL INTERVIEWING	\$ 99.00
D9994	DENTAL CASE MGMT - PATIENT EDU IMPRV ORAL HEALTH	\$ 135.25
D9995	TELEDENTISTRY - SYNCHRONOUS; REAL TIME ENCOUNTER	\$ 451.25
D9996	TEL DENTISTRY ASYNCHRONOUS INFO FWD DENTIST SUBSEQUENT REVIEW	\$ 338.75
D9999	UNSPECIFIED ADJUNCTIVE PROC BY REPORT (01/2019)	BR