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## A Better Path to Benefits



Dominion National recognizes that you're a unique individual and we've designed plans and programs that work for you. We seek a better way to serve you through customized plans and exceptional service so that you can focus on what makes you extraordinary and fulfilled.

## WE WORK FOR THE BENEFIT OF OVER 900,000 MEMBERS,<sup>1</sup> DELIVERING:

### EXTENSIVE NETWORKS<sup>2</sup>

Choice PPO network offers access to over 350,000 dentists nationally.<sup>1,3</sup>

Elite PPO and Elite ePPO networks provide unmatched flexibility and lower out-of-pocket costs.

Select Plan network is one of the largest in the Mid-Atlantic region.<sup>3,5</sup>

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### SECURE ONLINE ACCESS

Access your digital ID card, find a provider and more through secure online resources.



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**98% MEMBER  
SATISFACTION RATE<sup>4</sup>**



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888.518.5338**

Eligibility and claim information is available for members, benefit administrators and dentists.

### VALUE-ADDED BENEFITS

#### SMILEDIRECTCLUB

[DominionNational.com/sdc](https://DominionNational.com/sdc)

Orthodontic clear aligners offer a cost-effective alternative to traditional braces.<sup>6</sup>

#### HEARING DISCOUNT PROGRAM

[amplifonusa.com/dn](https://amplifonusa.com/dn)

Access to discounts on hearing aids and services.<sup>7</sup>

#### DIGIBITE TELEDENTISTRY APP

[DominionNational.com/teledentistry](https://DominionNational.com/teledentistry)

Receive a dental consultation without leaving your home or office!

1 Dominion National Internal Performance Report, 2021.

2 Networks and products vary by state. Check availability on your state marketplace.

3 Participating providers are subject to change.

4 Dominion National customer satisfaction survey, based on renewing members, 2021.

5 Managed care plan with exclusive network, fixed member copayments, no annual maximum dollar limits, no waiting periods and no deductibles. In New Jersey, Select Plans are available in Camden, Cumberland and Gloucester counties only. Dominion National Network Analysis Report, 2021. Mid-Atlantic includes D.C., Delaware, Maryland, New Jersey, Pennsylvania and Virginia.

6 Visit [DominionNational.com/sdc](https://DominionNational.com/sdc) for full details. Not all individuals are suitable candidates for clear aligners. These services, which are offered and arranged for by SmileDirectClub, are intended for certain individuals who have mild or moderate orthodontic needs and only if approved by a state-licensed dentist or orthodontist. Dominion National is not a provider of dental care services.

7 Visit [amplifonusa.com/dn](https://amplifonusa.com/dn) for full details. Hearing services are administered by Amplifon Hearing Health Care Corp.

The dental plan is underwritten by Dominion Dental Services, Inc. (hereinafter referred to as “Dominion”).



**Select Plan Basic Pediatric 702xs (NJ)**  
**Description of Services, Member Copayments, Exclusions and Limitations for Pediatric Services (under age 19)**  
 - under age 19 (coverage continues through end of month in which the Member turns 19) -

**Plan Highlights**

- This plan has fixed Member Copayments.
- This plan requires Members to use Participating Dentists except for out-of-area emergency dental services and/or for services provided when a Member is referred to an out-of-network specialist. See exclusion 7.
- Annual Out-of-Pocket Maximum: \$375 per Member per calendar year for Necessary and Appropriate Dental Services treatment (maximum of \$750 for policy covering two or more Members). The Member shall only be responsible for the Member Copayment listed in the Member Copayment column.
- There are no annual maximum dollar limits, no waiting periods and no deductibles.
- If course of treatment is to exceed \$300, pre-authorization is required.

| ADA CODE                     | DESCRIPTION   | MEMBER COPAYMENT(S) | ADA CODE | DESCRIPTION  | MEMBER COPAYMENT(S) |
|------------------------------|---|---------------------|----------|--|---------------------|
| <b>Diagnostic/Preventive</b> |   |                     | D0385    | Maxillofacial MRI/ultrasound image capture .....   | 164                 |
| D9439                        | Office visit.....   | 10                  | D0386    | Maxillofacial MRI/ultrasound image capture .....   | 164                 |
| D0120                        | Periodic oral eval - established patient .....                    | 0                   | D0391    | Interpretation of diagnostic image only .....  | 0                   |
| D0140                        | Limited oral eval - problem focused.....                          | 0                   | D0414    | Lab processing of microbial specimen to include culture & sensitivity studies .....  | 29                  |
| D0145                        | Oral eval for a patient under 3 years of age .....                | 0                   | D0415    | Collection of microorganisms for culture and sensitivity .....   | 29                  |
| D0150                        | Comprehensive oral eval - new or established patient              | 0                   | D0416    | Viral culture .....  | 35                  |
| D0160                        | Detailed and extensive oral eval - problem focused....            | 0                   | D0417    | Collection/Prep of saliva sample for lab.....  | 26                  |
| D0170                        | Re-evaluation - limited, problem focused .....                    | 0                   | D0418    | Analysis of saliva sample .....  | 32                  |
| D0171                        | Re-evaluation - post-operative office visit.....                  | 41                  | D0422    | Collection and preparation of genetic sample material for lab analysis and report .....  | 50                  |
| D0180                        | Comp. periodontal eval - new or established patient .             | 0                   | D0423    | Genetic test for susceptibility to diseases .....  | 75                  |
| D0210                        | Intraoral - complete series of radiographic images .....          | 26                  | D0425    | Caries susceptibility tests .....  | 27                  |
| D0220                        | Intraoral - periapical first radiographic image .....             | 0                   | D0431    | Adjunctive pre-diagnostic.....   | 49                  |
| D0230                        | Intraoral - periapical each add. radiographic image ...           | 0                   | D0460    | Pulp vitality tests .....  | 0                   |
| D0240                        | Intraoral - occlusal radiographic image .....                     | 0                   | D0470    | Diagnostic casts .....   | 0                   |
| D0250                        | Extra-oral - 2D projection radiographic image .....               | 0                   | D0472    | Accession of tissue, gross exam, prep, transm .....  | 114                 |
| D0251                        | Extra-oral posterior dental radiographic image.....               | 44                  | D0473    | Accession of tissue, gross and micro. exam., prep, transm .....  | 156                 |
| D0270                        | Bitewing - single radiographic image.....                         | 0                   | D0474    | Accession of tissue, gross and micro. exam., prep, transm .....  | 53                  |
| D0272                        | Bitewings - two radiographic images.....                          | 0                   | D0480    | Accession of exfoliative cytologic smears, micro. exam., prep, transm .....  | 52                  |
| D0273                        | Bitewings - three radiographic images .....                       | 0                   | D0486    | Lab accession trans cytologic sample, micro. exam., prep, transm.....  | 0                   |
| D0274                        | Bitewings - four radiographic images .....                        | 0                   | D0502    | Other oral pathology procedures, by report .....   | 0                   |
| D0277                        | Vertical bitewings - 7 to 8 radiographic images.....              | 0                   | D0600    | Non-ionizing diagnostic procedure capable of quantifying, monitoring abnormalities incl premalignant and malignant lesions ..... | 0                   |
| D0310                        | Sialography .....   | 370                 | D0601    | Caries risk assessment & documentation, with a finding of low risk.....  | 0                   |
| D0320                        | Temporomandibular joint arthrogram, incl. injection.              | 370                 | D0602    | Caries risk assessment & documentation, with a finding of moderate risk.....   | 0                   |
| D0321                        | Other temporomandibular joint radiographic images, by report..... | 120                 | D0603    | Caries risk assessment & documentation, with a finding of high risk.....   | 0                   |
| D0322                        | Tomographic survey .....  | 0                   | D0701    | Panoramic radiographic image – image capture only .  | 0                   |
| D0330                        | Panoramic radiographic image .....                                | 30                  | D0702    | 2-D cephalometric radiographic image – image capture only .....  | 0                   |
| D0340                        | 2D cephalometric radiographic image .....                         | 0                   | D0703    | 2-D oral/facial photographic image obtained intra-orally or extra-orally – image capture only.....                               | 0                   |
| D0350                        | 2D oral/facial photographic images (intraoral/extraoral) .....    | 0                   | D0704    | 3-D photographic image – image capture only .....  | 0                   |
| D0351                        | 3D photographic image .....                                       | 0                   | D0705    | Extra-oral posterior dental radiographic image – image capture only.....   | 0                   |
| D0364                        | Cone Beam CT limited view-less than one jaw.....                  | 98                  | D0706    | Intraoral – occlusal radiographic image – image capture only .....   | 0                   |
| D0365                        | Cone Beam CT one full dental arch (mandibular/maxillary).....     | 164                 | D0707    | Intraoral – periapical radiographic image – image capture only .....   | 0                   |
| D0366                        | Cone Beam CT one full dental arch (mandibular/maxillary).....     | 164                 |          |  |                     |
| D0367                        | Cone Beam CT both jaws.....                                       | 164                 |          |  |                     |
| D0368                        | Cone Beam CT- TMJ.....  | 96                  |          |  |                     |
| D0369                        | Maxillofacial MRI/ultrasound .....                                | 164                 |          |  |                     |
| D0370                        | Maxillofacial MRI/ultrasound .....                                | 164                 |          |  |                     |
| D0380                        | Cone beam CT image capture-less than one jaw .....                | 98                  |          |  |                     |
| D0381                        | Cone beam CT image capture one arch (mandibular/maxillary).....   | 98                  |          |  |                     |
| D0382                        | Cone beam CT image capture one arch (mandibular/maxillary).....   | 98                  |          |  |                     |
| D0383                        | Cone beam CT image capture both jaws.....                         | 156                 |          |  |                     |
| D0384                        | Cone beam CT image capture- TMJ.....                              | 97                  |          |  |                     |



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|-------------------------------|--|---------------------|--------------------------------|--|---------------------|
| D0708                         | Intraoral – bitewing radiographic image – image capture only .....   | 0                   | D2630                          | Inlay - porcelain/ceramic - >=3 surfaces.....  | 375                 |
| D0709                         | Intraoral – complete series of radiographic images – image capture only.....   | 0                   | D2642                          | Onlay - porcelain/ceramic - two surfaces.....  | 375                 |
| D1110                         | Prophylaxis (cleaning) - adult .....   | 0                   | D2643                          | Onlay - porcelain/ceramic - three surfaces.....  | 375                 |
| D1120                         | Prophylaxis (cleaning) - child .....   | 0                   | D2644                          | Onlay - porcelain/ceramic - >=4 surfaces .....   | 375                 |
| D1206                         | Topical application of fluoride varnish.....   | 0                   | D2650                          | Inlay - resin-based composite - one surface .....  | 375                 |
| D1208                         | Topical application of fluoride - excluding varnish .....  | 0                   | D2651                          | Inlay - resin-based composite - two surfaces .....   | 375                 |
| D1310                         | Nutritional counseling for control of dental disease ...   | 0                   | D2652                          | Inlay - resin-based composite - >=3 surfaces.....  | 375                 |
| D1320                         | Tobacco counseling for control of prev. oral disease... 0  | 0                   | D2662                          | Onlay - resin-based composite - two surfaces.....  | 375                 |
| D1321                         | Counseling for the control and prevention of adverse oral, behavioral, and systemic health effects associated with high-risk substance use ..... | 0                   | D2663                          | Onlay - resin-based composite - three surfaces .....   | 375                 |
| D1330                         | Oral hygiene instructions.....   | 0                   | D2664                          | Onlay - resin-based composite - >=4 surfaces.....  | 375                 |
| D1351                         | Sealant - per tooth .....  | 21                  | D2710                          | Crown - resin based composite (indirect).....  | 272                 |
| D1352                         | Prev resin rest. mod/high caries risk – perm. tooth ....   | 21                  | D2712                          | Crown - 3/4 resin-based composite (indirect).....  | 375                 |
| D1354                         | Application of caries arresting medicament - per tooth.....  | 0                   | D2720                          | Crown - resin with high noble metal .....  | 375                 |
| D1355                         | Caries preventive medicament application – per tooth.....  | 21                  | D2721                          | Crown - resin with predominantly base metal .....  | 375                 |
| D1510                         | Space maintainer – fixed, unilateral – per quadrant ...  | 143                 | D2722                          | Crown - resin with noble metal .....   | 375                 |
| D1516                         | Space maintainer - fixed - bilateral, maxillary .....  | 198                 | D2740                          | Crown - porcelain/ceramic .....  | 375                 |
| D1517                         | Space maintainer - fixed - bilateral, mandibular .....   | 198                 | D2750                          | Crown - porcelain fused to high noble metal .....  | 375                 |
| D1520                         | Space maintainer – removable, unilateral – per quadrant.....   | 143                 | D2751                          | Crown - porcelain fused to predominantly base metal  | 375                 |
| D1526                         | Space maintainer - removable - bilateral, maxillary ....   | 198                 | D2752                          | Crown - porcelain fused to noble metal.....  | 375                 |
| D1527                         | Space maintainer - removable - bilateral, mandibular   | 198                 | D2753                          | Crown - porcelain fused to titanium and titanium alloys .....                                      | 375                 |
| D1551                         | Re-cement or re-bond bilateral space maintainer – maxillary .....  | 34                  | D2780                          | Crown - 3/4 cast high noble metal .....  | 375                 |
| D1552                         | Re-cement or re-bond bilateral space maintainer – mandibular .....   | 34                  | D2781                          | Crown - 3/4 cast predominantly base metal .....  | 375                 |
| D1553                         | Re-cement or re-bond unilateral space maintainer – per quadrant.....   | 34                  | D2782                          | Crown - 3/4 cast noble metal .....   | 375                 |
| D1556                         | Removal of fixed unilateral space maintainer – per quadrant.....   | 44                  | D2783                          | Crown - 3/4 porcelain/ceramic.....   | 375                 |
| D1557                         | Removal of fixed bilateral space maintainer – maxillary .....  | 44                  | D2790                          | Crown - full cast high noble metal.....  | 375                 |
| D1558                         | Removal of fixed bilateral space maintainer – mandibular .....   | 44                  | D2791                          | Crown - full cast predominately base metal.....  | 375                 |
| D1575                         | Distal shoe space maintainer – fixed, unilateral – per quadrant.....   | 143                 | D2792                          | Crown - full cast noble metal.....   | 375                 |
| <b>Restorative (Fillings)</b> |  |                     | D2910                          | Recement inlay .....   | 43                  |
| D2140                         | Amalgam - one surface, prim. or perm. ....   | 41                  | D2915                          | Recement cast or prefab. post and core.....  | 82                  |
| D2150                         | Amalgam - two surfaces, prim. or perm.....   | 51                  | D2920                          | Recement crown .....   | 43                  |
| D2160                         | Amalgam - three surfaces, prim. or perm. ....  | 64                  | D2928                          | Prefab. porcelain/ceramic crown – permanent tooth .  | 375                 |
| D2161                         | Amalgam - >=4 surfaces, prim. or perm. ....  | 78                  | D2929                          | Prefab. porcelain/ceramic crown - prim. tooth .....  | 375                 |
| D2330                         | Resin-based composite - one surface, anterior .....  | 69                  | D2930                          | Prefab. stainless steel crown - prim. tooth .....  | 110                 |
| D2331                         | Resin-based composite - two surfaces, anterior .....   | 83                  | D2931                          | Prefab. stainless steel crown - perm. tooth.....   | 121                 |
| D2332                         | Resin-based composite - three surfaces, anterior.....  | 99                  | D2932                          | Prefabricated resin crown .....  | 140                 |
| D2335                         | Resin-based composite - >=4 surfaces, anterior.....  | 119                 | D2933                          | Prefab. stainless steel crown w/ resin window .....  | 271                 |
| D2390                         | Resin-based composite crown, anterior.....   | 192                 | D2934                          | Prefab. esthetic coated primary tooth .....  | 296                 |
| D2391                         | Resin-based composite - one surface, posterior .....   | 73                  | D2940                          | Protective restoration .....   | 39                  |
| D2392                         | Resin-based composite - two surfaces, posterior.....   | 87                  | D2950                          | Core buildup, including any pins .....   | 125                 |
| D2393                         | Resin-based composite - three surfaces, posterior ....   | 102                 | D2951                          | Pin retention - per tooth, in addition to restoration ...  | 22                  |
| D2394                         | Resin-based composite - >=4 surfaces, posterior.....   | 123                 | D2952                          | Post and core in addition to crown .....   | 186                 |
| D2410                         | Gold foil - one surface .....  | 168                 | D2953                          | Each add. indirectly fabricated post - same tooth.....   | 50                  |
| D2420                         | Gold foil - two surfaces.....  | 198                 | D2954                          | Prefab. post and core in addition to crown .....   | 154                 |
| D2430                         | Gold foil - three surfaces .....   | 268                 | D2955                          | Post removal (not in conj. with endo. therapy).....  | 105                 |
| <b>Crown &amp; Bridge</b>     |  |                     | D2957                          | Each add. prefab post - same tooth .....   | 40                  |
| D2510                         | Inlay- metallic - one surface .....  | 375                 | D2970                          | Temporary crown (fractured tooth) .....  | 0                   |
| D2520                         | Inlay- metallic - two surfaces.....  | 375                 | D2971                          | Additional procedures to customize a crown to fit under an existing partial denture framework..... | 73                  |
| D2530                         | Inlay - metallic - three or more surfaces.....   | 375                 | D2975                          | Coping .....   | 225                 |
| D2542                         | Onlay - metallic-two surfaces.....   | 375                 | D2980                          | Crown repair necessitated by restorative material failure .....                                    | 102                 |
| D2543                         | Onlay - metallic - three surfaces.....   | 375                 | D2981                          | Inlay repair necessitated by restorative material failure .....                                    | 102                 |
| D2544                         | Onlay - metallic - four or more surfaces .....   | 375                 | D2982                          | Onlay repair necessitated by restorative material failure .....                                    | 102                 |
| D2610                         | Inlay - porcelain/ceramic - one surface .....  | 375                 | <b>Endodontics<sup>1</sup></b> |  |                     |
| D2620                         | Inlay - porcelain/ceramic - two surfaces.....  | 375                 | D3110                          | Pulp cap - direct (excl. final restoration).....   | 32                  |
|                               |  |                     | D3120                          | Pulp cap - indirect (excl. final restoration).....   | 32                  |
|                               |  |                     | D3220                          | Therapeutic pulpotomy (excl. final restor.).....   | 81                  |
|                               |  |                     | D3221                          | Pulpal debridement, prim. and perm. teeth .....  | 94                  |
|                               |  |                     | D3222                          | Partial pulpotomy for apexogenesis .....   | 160                 |
|                               |  |                     | D3230                          | Pulpal therapy - resorbable filling, anterior, primary tooth.....                                  | 160                 |
|                               |  |                     | D3240                          | Pulpal therapy - resorbable filling, posterior, primary tooth.....                                 | 164                 |
|                               |  |                     | D3310                          | Endodontic therapy, anterior tooth (excluding final restoration).....                              | 341                 |

| ADA CODE | DESCRIPTION   | MEMBER COPAYMENT(S) | ADA CODE | DESCRIPTION   | MEMBER COPAYMENT(S) |
|----------|---|---------------------|----------|---|---------------------|
| D3320    | Endodontic therapy, premolar tooth (excluding final restoration) .....                            | 375                 | D4274    | Mesial/distal wedge procedure, single tooth .....   | 308                 |
| D3330    | Endodontic therapy, molar tooth (excluding final restoration) .....                               | 375                 | D4275    | Non-autogenous connective tissue graft (including recipient site and donor material).....   | 375                 |
| D3331    | Treatment of root canal obstr. non-surgical .....   | 207                 | D4276    | Comb. connec. tissue/double and pedicle graft, per tooth.....   | 375                 |
| D3332    | Incomp. endo. therapy-inop. or fractured tooth.....   | 183                 | D4277    | Free soft tissue graft, per tooth.....  | 375                 |
| D3333    | Internal root repair of perforation defects.....  | 105                 | D4278    | Free soft tissue graft, each add. tooth.....  | 100                 |
| D3346    | Retreat of prev. root canal therapy, anterior .....   | 375                 | D4322    | Splint – intra-coronal; natural teeth or prosthetic crowns .....  | 375                 |
| D3347    | Retreat of prev root canal therapy - premolar .....   | 375                 | D4323    | Splint – extra-coronal; natural teeth or prosthetic crowns .....  | 375                 |
| D3348    | Retreat of prev. root canal therapy, molar .....  | 375                 | D4341    | Perio scaling and root planing - >3 cont teeth, per quad. ....  | 109                 |
| D3351    | Apexification/recalcification - initial visit.....  | 202                 | D4342    | Perio scaling and root planing - <= 3 teeth, per quad .   | 63                  |
| D3352    | Apexification/recalcification - interim med. repl.....  | 350                 | D4346    | Scaling in presence of generalized moderate or severe gingival inflammation - full mouth, after oral evaluation .....                               | 45                  |
| D3353    | Apexification/recalcification - final visit .....   | 350                 | D4355    | Full mouth debridement .....  | 89                  |
| D3355    | Pulpal regeneration - initial visit.....  | 202                 | D4381    | Localized delivery of antimicrobial agents.....   | 98                  |
| D3356    | Pulpal regeneration - interim medication replacement .....  | 350                 | D4910    | Periodontal maintenance .....   | 74                  |
| D3357    | Pulpal regeneration - completion of treatment .....   | 350                 |          | <b>Prosthetics (Dentures)</b>   |                     |
| D3410    | Apicoectomy - anterior.....   | 323                 | D5110    | Complete denture - maxillary.....   | 375                 |
| D3421    | Apicoectomy - premolar (first root).....  | 364                 | D5120    | Complete denture - mandibular.....  | 375                 |
| D3425    | Apicoectomy - molar (first root) .....  | 375                 | D5130    | Immediate denture - maxillary .....   | 375                 |
| D3426    | Apicoectomy/periradicular surgery (each add. root) ..   | 152                 | D5140    | Immediate denture - mandibular .....  | 375                 |
| D3428    | Bone graft in conj. w/ periradicular surg., per tooth, single site.....                           | 375                 | D5211    | Maxillary partial denture - resin base.....   | 375                 |
| D3429    | Bone graft in conj. w/ periradicular surg., add. contiguous tooth, same site .....                | 375                 | D5212    | Mandibular partial denture - resin base.....  | 375                 |
| D3430    | Retrograde filling - per root.....  | 119                 | D5213    | Maxillary partial denture - cast metal framework with resin denture bases (including retentive/clasping materials, rests and teeth) .....           | 375                 |
| D3431    | Biologic materials to aid soft/osseous tissue regen. in conj. w/ periradicular surg. ....         | 375                 | D5214    | Mandibular partial denture - cast metal framework with resin denture bases (including retentive/ clasping materials, rests and teeth).....          | 375                 |
| D3432    | Guided tissue regen., resorbable barrier, per site, in conj. w/ periradicular surg. ....          | 375                 | D5221    | Immediate maxillary partial denture – resin base (including retentive/clasping materials, rests and teeth).....                                     | 375                 |
| D3450    | Root amputation - per root .....  | 234                 | D5222    | Immediate mandibular partial denture – resin base (including retentive/clasping materials, rests and teeth).....                                    | 375                 |
| D3471    | Surgical repair of root resorption - anterior .....   | 323                 | D5223    | Immediate maxillary partial denture – cast metal framework with resin denture bases (including retentive/clasping materials, rests and teeth).....  | 375                 |
| D3472    | Surgical repair of root resorption – premolar .....   | 364                 | D5224    | Immediate mandibular partial denture – cast metal framework with resin denture bases (including retentive/clasping materials, rests and teeth)..... | 375                 |
| D3473    | Surgical repair of root resorption – molar .....  | 375                 | D5225    | Maxillary partial denture - flexible base.....  | 375                 |
| D3501    | Surgical exposure of root surface without apicoectomy or repair of root resorption – anterior ... | 323                 | D5226    | Mandibular partial denture - flexible base.....   | 375                 |
| D3502    | Surgical exposure of root surface without apicoectomy or repair of root resorption – premolar .   | 364                 | D5227    | Immediate maxillary partial denture - flexible base (including any clasps, rests and teeth) .....   | 375                 |
| D3503    | Surgical exposure of root surface without apicoectomy or repair of root resorption – molar .....  | 375                 | D5228    | Immediate mandibular partial denture - flexible base (including any clasps, rests and teeth) .....  | 375                 |
| D3910    | Surg. proc. for isol. of tooth w/ rubber dam .....  | 57                  | D5282    | Rem. unilateral partial denture - one piece cast metal, maxillary.....  | 375                 |
| D3920    | Hemisection, not inc. root canal therapy .....  | 234                 | D5283    | Rem. unilateral partial denture - one piece cast metal, mandibular .....  | 375                 |
| D3921    | Decoronation or submergence of an erupted tooth ..  | 107                 | D5284    | Rem. unilateral partial denture – one piece flexible base (including clasps and teeth) – per quadrant .....   | 375                 |
| D3950    | Canal prep/fitting of preformed dowel or post .....   | 136                 | D5286    | Rem. unilateral partial denture – one piece resin (including clasps and teeth) – per quadrant.....  | 375                 |
|          | <b>Periodontics'</b>  |                     | D5410    | Adjust complete denture - maxillary .....   | 38                  |
| D4210    | Gingivectomy or gingivoplasty - >3 cont. teeth, per quad. ....                                    | 279                 | D5411    | Adjust complete denture - mandibular .....  | 38                  |
| D4211    | Gingivectomy or gingivoplasty - <=3 teeth, per quad..   | 100                 | D5421    | Adjust partial denture - maxillary.....   | 38                  |
| D4212    | Gingivectomy or gingivoplasty, rest., per tooth.....  | 40                  | D5422    | Adjust partial denture - mandibular .....   | 38                  |
| D4240    | Gingival flap proc., inc. root planing - >3 cont. teeth, per quad .....                           | 345                 | D5511    | Repair broken complete denture base, mandibular....   | 87                  |
| D4241    | Gingival flap proc, inc. root planing - <=3 cont. teeth, per quad .....                           | 106                 | D5512    | Repair broken complete denture base, maxillary.....   | 87                  |
| D4245    | Apically positioned flap .....  | 186                 | D5520    | Replace missing or broken teeth - complete denture .  | 87                  |
| D4249    | Clinical crown lengthening - hard tissue.....   | 375                 | D5611    | Repair resin partial denture base, mandibular.....  | 87                  |
| D4260    | Osseous surgery - >3 cont. teeth, per quad .....  | 375                 | D5612    | Repair resin partial denture base, maxillary.....   | 87                  |
| D4261    | Osseous surgery - <=3 cont. teeth, per quad .....   | 375                 |          |   |                     |
| D4263    | Bone replacement graft - retained natural tooth - first site in quad.....                         | 375                 |          |   |                     |
| D4264    | Bone replacement graft - retained natural tooth - each add. site in quad. ....                    | 375                 |          |   |                     |
| D4265    | Biologic materials to aid in soft and osseous tissue regeneration, per site .....                 | 375                 |          |   |                     |
| D4266    | Guided tissue regen. - resorb. barrier, per site.....   | 375                 |          |   |                     |
| D4267    | Guided tissue regen. - non-resorb. barrier, per site ....   | 375                 |          |   |                     |
| D4268    | Surgical revision proc., per tooth .....  | 358                 |          |   |                     |
| D4270    | Pedicle soft tissue graft procedure .....   | 375                 |          |   |                     |
| D4273    | Autogenous connective tissue graft proc. ....   | 375                 |          |   |                     |

| ADA CODE | DESCRIPTION  | MEMBER COPAYMENT(S) | ADA CODE                | DESCRIPTION   | MEMBER COPAYMENT(S) |
|----------|--|---------------------|-------------------------|---|---------------------|
| D5621    | Repair cast partial framework, mandibular .....  | 87                  | D5959                   | Palatal lift prosthesis, modification .....   | 375                 |
| D5622    | Repair cast partial framework, maxillary.....  | 87                  | D5960                   | Speech aid prosthesis, modification.....  | 278                 |
| D5630    | Repair or replace broken retentive/clasping material - per tooth .....                               | 115                 | D5982                   | Surgical stent .....  | 87                  |
| D5640    | Replace broken teeth - per tooth .....   | 87                  | D5983                   | Radiation carrier.....  | 375                 |
| D5650    | Add tooth to existing partial denture .....  | 87                  | D5984                   | Radiation shield .....  | 375                 |
| D5660    | Add clasp to existing partial denture -per tooth .....   | 115                 | D5985                   | Radiation cone locator .....  | 375                 |
| D5670    | Replace all teeth and acrylic on cast metal framework (maxillary).....                               | 287                 | D5986                   | Fluoride gel carrier .....  | 126                 |
| D5671    | Replace all teeth and acrylic on cast metal framework (mandibular).....                              | 287                 | D5987                   | Commissure splint.....  | 375                 |
| D5710    | Rebase complete maxillary denture.....   | 260                 | D5988                   | Surgical splint .....   | 125                 |
| D5711    | Rebase complete mandibular denture .....   | 260                 | D5991                   | Topical medicament carrier.....   | 126                 |
| D5720    | Rebase maxillary partial denture.....  | 260                 | D5992                   | Adjustment of prosthetic appliance, by report .....   | 24                  |
| D5721    | Rebase mandibular partial denture.....   | 260                 | D5993                   | Cleaning and maintenance prosthetic appliance .....   | 18                  |
| D5725    | Rebase hybrid prosthesis.....  | 260                 | D5994                   | Periodontal medicament carrier .....  | 150                 |
| D5730    | Reline complete maxillary denture (direct).....  | 159                 | <b>Implant Services</b> |   |                     |
| D5731    | Reline complete mandibular denture (direct).....   | 159                 | D6010                   | Surgical placement of implant body, endosteal .....   | 375                 |
| D5740    | Reline maxillary partial denture (direct).....   | 155                 | D6011                   | Second stage implant surgery .....  | 200                 |
| D5741    | Reline mandibular partial denture (direct).....  | 155                 | D6012                   | Surgical placement of interim implant body for transitional prosthesis: endosteal implant .....   | 375                 |
| D5750    | Reline complete maxillary denture (indirect).....  | 224                 | D6013                   | Surgical placement of mini implant.....   | 375                 |
| D5751    | Reline complete mandibular denture (indirect) .....  | 224                 | D6040                   | Surgical placement, eposteal implant .....  | 375                 |
| D5760    | Reline maxillary partial denture (indirect).....   | 224                 | D6050                   | Surgical placement, transosteal implant .....   | 375                 |
| D5761    | Reline mandibular partial denture (indirect).....  | 224                 | D6051                   | Interim implant abutment placement .....  | 197                 |
| D5765    | Soft liner for complete or partial removable denture - indirect .....                                | 53                  | D6055                   | Dental implant supported connecting bar .....   | 375                 |
| D5810    | Interim complete denture - maxillary.....  | 362                 | D6056                   | Prefabricated abutment .....  | 375                 |
| D5811    | Interim complete denture - mandibular.....   | 362                 | D6057                   | Custom fabricated abutment .....  | 375                 |
| D5820    | Interim partial denture (including retentive/clasping materials, rests, and teeth), maxillary .....  | 362                 | D6058                   | Abutment supported porcelain/ceramic crown .....  | 375                 |
| D5821    | Interim partial denture (including retentive/clasping materials, rests, and teeth), mandibular ..... | 362                 | D6059                   | Abutment supported porcelain fused to metal crown - high noble metal .....  | 375                 |
| D5850    | Tissue conditioning - maxillary .....  | 79                  | D6060                   | Abutment supported porcelain fused to metal crown - predominantly based metal .....   | 375                 |
| D5851    | Tissue conditioning - mandibular .....   | 79                  | D6061                   | Abutment supported porcelain fused to metal crown - noble metal .....   | 375                 |
| D5862    | Precision attachment, by report.....   | 375                 | D6062                   | Abutment supported cast metal crown - high noble metal .....  | 375                 |
| D5863    | Overdenture - complete maxillary.....  | 375                 | D6063                   | Abutment supported cast metal crown - predominantly based metal .....   | 375                 |
| D5864    | Overdenture - partial maxillary .....  | 375                 | D6064                   | Abutment supported cast metal crown - noble metal .....   | 375                 |
| D5865    | Overdenture - complete mandibular.....   | 375                 | D6065                   | Implant supported porcelain/ceramic crown.....  | 375                 |
| D5866    | Overdenture - partial mandibular .....   | 375                 | D6066                   | Implant supported crown - porcelain fused to high noble alloys .....  | 375                 |
| D5875    | Mod. of remov prosthesis post implant surgery .....  | 41                  | D6067                   | Implant supported crown - high noble alloys.....  | 375                 |
| D5911    | Facial moulage (sectional) .....   | 147                 | D6068                   | Abutment supp. retainer for porc/ceramic FPD.....   | 375                 |
| D5912    | Facial moulage (complete) .....  | 147                 | D6069                   | Abutment supp. retainer for porc/high noble FPD.....  | 375                 |
| D5913    | Nasal prosthesis .....   | 375                 | D6070                   | Abutment supp. retainer for porc/pred. base FPD.....  | 375                 |
| D5914    | Auricular prosthesis.....  | 375                 | D6071                   | Abutment supp. retainer for porc/noble FPD .....  | 375                 |
| D5915    | Orbital prosthesis .....   | 375                 | D6072                   | Abutment supp. retainer for cast high noble FPD .....   | 375                 |
| D5916    | Ocular prosthesis.....   | 375                 | D6073                   | Abutment supp. retainer for cast high noble FPD .....   | 375                 |
| D5919    | Facial prosthesis .....  | 375                 | D6074                   | Abutment supp. retainer for cast noble metal FPD.....   | 375                 |
| D5922    | Nasal septal prosthesis.....   | 375                 | D6080                   | Implant maintenance procedures .....  | 61                  |
| D5923    | Ocular prosthesis, interim .....   | 375                 | D6081                   | Scaling and debridement in the presence of inflammation or mucositis of a single implant, including cleaning of the implant surfaces, without flap entry and closure..... | 63                  |
| D5924    | Cranial prosthesis .....   | 375                 | D6090                   | Repair implant supported prosthesis .....   | 362                 |
| D5925    | Facial augmentation implant prosthesis.....  | 375                 | D6091                   | Replacement of replaceable part of semi-precision or precision attachment of implant/abutment supported prosthesis, per attachment .....                                  | 34                  |
| D5926    | Nasal prosthesis, replacement .....  | 169                 | D6092                   | Re-cement implant/abutment supp. crown .....  | 56                  |
| D5927    | Auricular prosthesis, replacement .....  | 375                 | D6093                   | Re-cement impl/abutment supp. fixed par .....   | 86                  |
| D5928    | Orbital prosthesis, replacement.....   | 375                 | D6095                   | Repair implant abutment, by report .....  | 375                 |
| D5929    | Facial prosthesis, replacement .....   | 255                 | D6110                   | Implant / abut supp rem dent for edentulous arch - maxillary.....   | 375                 |
| D5931    | Obturator prosthesis, surgical .....   | 375                 |                         |   |                     |
| D5932    | Obturator prosthesis, definitive .....   | 375                 |                         |   |                     |
| D5933    | Obturator prosthesis, modification .....   | 375                 |                         |   |                     |
| D5934    | Mandibular resection prosthesis w/ guide flange.....   | 375                 |                         |   |                     |
| D5935    | Mandibular resection prosthesis w/o guide flange.....  | 375                 |                         |   |                     |
| D5936    | Obturator prosthesis, interim.....   | 375                 |                         |   |                     |
| D5951    | Feeding aid .....  | 375                 |                         |   |                     |
| D5952    | Speech aid prosthesis.....   | 375                 |                         |   |                     |
| D5953    | Speech aid prosthesis, adult.....  | 375                 |                         |   |                     |
| D5954    | Palatal augmentation prosthesis .....  | 375                 |                         |   |                     |
| D5955    | Palatal lift prosthesis, definitive .....  | 375                 |                         |   |                     |
| D5958    | Palatal lift prosthesis, interim.....  | 375                 |                         |   |                     |



| ADA CODE                    | DESCRIPTION   | MEMBER COPAYMENT(S) | ADA CODE                        | DESCRIPTION   | MEMBER COPAYMENT(S) |
|-----------------------------|---|---------------------|---------------------------------|---|---------------------|
| D6111                       | Implant / abut supp rem dent for edentulous arch - mandibular .....             | 375                 | D6790                           | Retainer crown - full cast high noble metal.....                                    | 375                 |
| D6112                       | Implant / abut supp rem dent for partially edentulous arch - maxillary .....    | 375                 | D6791                           | Retainer crown - full cast predominately base metal..                               | 375                 |
| D6113                       | Implant / abut supp rem dent for partially edentulous arch - mandibular .....   | 375                 | D6792                           | Retainer crown - full cast noble metal.....   | 375                 |
| D6114                       | Implant / abut supp fixed dent for edentulous arch - maxillary .....            | 375                 | D6930                           | Recement or rebond fixed partial denture.....                                       | 69                  |
| D6115                       | Implant / abut supp fixed dent for edentulous arch - mandibular .....           | 375                 | D6950                           | Precision attachment.....   | 375                 |
| D6116                       | Implant / abut supp fixed dent for partially edentulous arch - maxillary .....  | 375                 | D6980                           | Fixed partial denture repair, by report .....                                       | 172                 |
| D6117                       | Implant / abut supp fixed dent for partially edentulous arch - mandibular ..... | 375                 | D6985                           | Pediatric partial denture, fixed.....   | 375                 |
| D6194                       | Abutment supported retainer crown for FPD – titanium and titanium alloys .....  | 375                 |                                 |   |                     |
| <b>Bridge &amp; Pontics</b> |   |                     | <b>Oral Surgery<sup>1</sup></b> |   |                     |
| D6205                       | Pontic - indirect resin based composite .....                                   | 375                 | D7111                           | Extraction, coronal remnants - primary tooth.....                                   | 56                  |
| D6210                       | Pontic - cast high noble metal .....  | 375                 | D7140                           | Extraction, erupted tooth or exposed root .....                                     | 69                  |
| D6211                       | Pontic - cast predominately base metal .....                                    | 375                 | D7210                           | Extraction, erupted tooth req elev, etc .....                                       | 133                 |
| D6212                       | Pontic - cast noble metal.....  | 375                 | D7220                           | Removal of impacted tooth - soft tissue .....                                       | 151                 |
| D6240                       | Pontic - porcelain fused to high noble metal.....                               | 375                 | D7230                           | Removal of impacted tooth - partially bony.....                                     | 196                 |
| D6241                       | Pontic - porcelain fused to predominately base metal                            | 375                 | D7240                           | Removal of impacted tooth - completely bony .....                                   | 241                 |
| D6242                       | Pontic - porcelain fused to noble metal .....                                   | 375                 | D7241                           | Removal of imp. tooth - completely bony, with unusual surg. complications .....     | 217                 |
| D6245                       | Pontic - porcelain/ceramic.....   | 375                 | D7250                           | Removal of residual tooth roots .....   | 141                 |
| D6250                       | Pontic - resin with high noble metal.....                                       | 375                 | D7251                           | Coronectomy-intentional partial tooth removal .....                                 | 217                 |
| D6251                       | Pontic - resin with predominately base metal.....                               | 375                 | D7260                           | Oroantral fistula closure.....  | 375                 |
| D6252                       | Pontic - resin with noble metal.....  | 375                 | D7261                           | Primary closure of a sinus perforation .....  | 375                 |
| D6545                       | Ret. - cast metal for resin bonded fixed prosthesis ....                        | 251                 | D7270                           | Tooth reimplant./stabiliz. of acc. evulsed/displaced tooth.....                     | 226                 |
| D6548                       | Ret. - porc./ceramic for resin bonded fixed prosthesis                          | 375                 | D7272                           | Tooth transplantation.....  | 375                 |
| D6549                       | Resin retainer - for resin bonded fixed prost.....                              | 251                 | D7280                           | Exposure of an unerupted tooth .....  | 153                 |
| D6600                       | Retainer inlay - porc./ceramic, two surfaces .....                              | 375                 | D7282                           | Mobil. of erupted/malpositioned tooth to aid eruption.....                          | 231                 |
| D6601                       | Retainer inlay - porc./ceramic, >=3 surfaces .....                              | 375                 | D7283                           | Place. of device to facilitate erupt. of impacted tooth                             | 144                 |
| D6602                       | Retainer inlay - cast high noble metal, two surfaces...                         | 375                 | D7285                           | Biopsy of oral tissue - hard (bone, tooth).....                                     | 375                 |
| D6603                       | Retainer inlay - cast high noble metal, >=3 surfaces ...                        | 375                 | D7286                           | Biopsy of oral tissue - soft (all others) .....                                     | 295                 |
| D6604                       | Retainer inlay - cast predominantly base metal, two surfaces .....              | 375                 | D7287                           | Exfoliative cytological sample collection .....                                     | 28                  |
| D6605                       | Retainer inlay - cast predominantly base metal, >=3 surfaces .....              | 375                 | D7288                           | Brush biopsy - transepithelial sample collect.....                                  | 93                  |
| D6606                       | Retainer inlay - cast noble metal, two surfaces.....                            | 375                 | D7290                           | Surgical repositioning of teeth .....   | 375                 |
| D6607                       | Retainer inlay - cast noble metal, >=3 surfaces .....                           | 375                 | D7291                           | Transseptal fiberotomy/supra crestal fiberotomy, by report .....                    | 60                  |
| D6608                       | Retainer onlay - porc./ceramic, two surfaces.....                               | 375                 | D7292                           | Placement of temporary anchorage device (screw retained plate) requiring flap ..... | 375                 |
| D6609                       | Retainer onlay - porc./ceramic, three or more surfaces .....                    | 375                 | D7293                           | Placement of temporary anchorage device requiring flap .....                        | 375                 |
| D6610                       | Retainer onlay - cast high noble metal, two surfaces..                          | 375                 | D7294                           | Placement of temporary anchorage device without flap .....                          | 131                 |
| D6611                       | Retainer onlay - cast high noble metal, >=3 surfaces..                          | 375                 | D7295                           | Bone harvesting-autogenous grafting procedure.....                                  | 173                 |
| D6612                       | Retainer onlay - cast predominantly base metal, two surfaces .....              | 375                 | D7310                           | Alveoloplasty in conj. w/ extractions, >=4 per quad. ...                            | 141                 |
| D6613                       | Retainer onlay - cast predominantly base metal, >=3 surfaces .....              | 375                 | D7311                           | Alveoloplasty in conj. w/ extractions, 1-3 per quad. ...                            | 141                 |
| D6614                       | Retainer onlay - cast noble metal, two surfaces.....                            | 375                 | D7320                           | Alveoloplasty not in conj. w/ extractions, >=4 per quad. ....                       | 141                 |
| D6615                       | Retainer onlay - cast noble metal, >=3 surfaces.....                            | 375                 | D7321                           | Alveoloplasty not in conj. w/ extractions, 1-3 per quad. ....                       | 141                 |
| D6710                       | Retainer crown - indirect resin based composite.....                            | 375                 | D7340                           | Vestibuloplasty - ridge ext. sec. epithel.....                                      | 375                 |
| D6720                       | Retainer crown - resin with high noble metal .....                              | 375                 | D7350                           | Vestibuloplasty - ridge ext. inc. grafts, etc.....                                  | 375                 |
| D6721                       | Retainer crown - resin with predominantly base metal .....                      | 375                 | D7410                           | Excision of benign lesion up to 1.25 cm .....                                       | 278                 |
| D6722                       | Retainer crown - resin with noble metal.....                                    | 375                 | D7411                           | Excision of benign lesion > 1.25 cm.....  | 225                 |
| D6740                       | Retainer crown - porcelain/ceramic .....  | 375                 | D7412                           | Excision of benign lesion, complicated.....   | 313                 |
| D6750                       | Retainer crown - porcelain fused to high noble metal                            | 375                 | D7413                           | Excision of malignant lesion up to 1.25 cm .....                                    | 375                 |
| D6751                       | Retainer crown - porcelain fused to predominately base metal.....               | 375                 | D7414                           | Excision of malignant lesion > 1.25 cm.....   | 375                 |
| D6752                       | Retainer crown - porcelain fused to noble metal .....                           | 375                 | D7415                           | Excision of malignant lesion, complicated.....                                      | 375                 |
| D6753                       | Retainer crown – porcelain fused to titanium and titanium alloys .....          | 375                 | D7440                           | Exc. of malignant tumor- lesion diam. <=1.25cm .....                                | 375                 |
| D6780                       | Retainer crown - 3/4 cast high noble metal .....                                | 375                 | D7441                           | Exc. of malignant tumor- lesion diam. >1.25cm .....                                 | 375                 |
| D6781                       | Retainer crown - 3/4 cast predominantly base metal .                            | 375                 | D7450                           | Removal of benign odon cyst/tumor - diam <=1.25cm                                   | 354                 |
| D6782                       | Retainer crown - 3/4 cast noble metal .....                                     | 375                 | D7451                           | Removal of benign odon cyst/tumor - diam >1.25cm.                                   | 375                 |
| D6783                       | Retainer crown - 3/4 porc./ceramic .....  | 375                 | D7460                           | Removal of benign nonodon cyst/tumor-diam <=1.25cm.....                             | 375                 |
| D6784                       | Retainer crown – 3/4 titanium and titanium alloys.....                          | 375                 | D7461                           | Removal of benign nonodon cyst/tumor-diam >1.25cm.....                              | 375                 |

| ADA CODE | DESCRIPTION  | MEMBER COPAYMENT(S) | ADA CODE                           | DESCRIPTION  | MEMBER COPAYMENT(S) |
|----------|--|---------------------|------------------------------------|--|---------------------|
| D7465    | Destruct. of lesion(s) by phys or chem method.....   | 300                 | D7947                              | LeFort I (maxillary - segmented).....  | 375                 |
| D7471    | Removal of lateral exostosis .....   | 351                 | D7948                              | LeFort II or LeFort III .....  | 375                 |
| D7472    | Removal of torus palatinus.....  | 375                 | D7949                              | LeFort II or LeFort III - with bone graft .....  | 375                 |
| D7473    | Removal of torus mandibularis .....  | 375                 | D7950                              | Osseous, osteoperiosteal, or cartilage graft .....   | 313                 |
| D7485    | Surgical reduction of osseous tuberosity .....   | 375                 | D7951                              | Sinus Augmentation via lateral approach.....   | 375                 |
| D7490    | Radical resection of maxilla or mandible .....   | 375                 | D7952                              | Sinus augmentation via vertical approach.....  | 319                 |
| D7510    | Incision and drainage of abscess - intraoral soft tissue   | 96                  | D7955                              | Repair of maxillofacial soft and hard tissue.....  | 321                 |
| D7511    | Incision/drainage of abscess - intra. soft tissue, comp.   | 112                 | D7961                              | Buccal/labial frenectomy (frenulectomy).....   | 263                 |
| D7520    | Incision/drainage of abscess - extra. soft tissue .....  | 116                 | D7962                              | Lingual frenectomy (frenulectomy).....   | 263                 |
| D7521    | Incision/drainage of abscess - extra. soft tissue, comp.....   | 120                 | D7963                              | Frenuloplasty.....   | 293                 |
| D7530    | Foreign body rem from muc./skin/subcut tissue .....  | 87                  | D7970                              | Excision of hyperplastic tissue - per arch.....  | 233                 |
| D7540    | Reaction producing foreign bodies removal.....   | 375                 | D7971                              | Excision of pericoronal gingiva .....  | 131                 |
| D7550    | Partial ostect/sequestrect non-vital bone rem.....   | 336                 | D7972                              | Surgical reduction of fibrous tuberosity .....   | 375                 |
| D7560    | Max. sinusotomy for tooth fragment removal .....   | 375                 | D7979                              | Non-surgical sialolithotomy.....   | 43                  |
| D7610    | Maxillary - open reduction (teeth immobilized).....  | 375                 | D7980                              | Surgical sialolithotomy .....  | 228                 |
| D7620    | Maxillary - closed reduction (teeth immobilized).....  | 375                 | D7981                              | Excision of salivary gland, by report .....  | 375                 |
| D7630    | Mandible - open reduction (teeth immobilized) .....  | 375                 | D7982                              | Sialodochoplasty .....   | 375                 |
| D7640    | Mandible - closed reduction (teeth immobilize) .....   | 375                 | D7983                              | Closure of salivary fi stula.....  | 375                 |
| D7650    | Malar and/or zygomatic arch - open reduction.....  | 375                 | D7990                              | Emergency tracheotomy .....  | 375                 |
| D7660    | Malar and/or zygomatic arch- closed reduction.....   | 375                 | D7991                              | Coronoidectomy.....  | 375                 |
| D7670    | Alveolus - closed reduction .....  | 375                 | D7995                              | Synthetic graft - mandible or facial bones.....  | 270                 |
| D7671    | Alveolus- open reduction(incl. teeth stabil.) .....  | 375                 | D7996                              | Implant-mandible for augmentation purposes .....   | 375                 |
| D7680    | Facial bones - complicated reduction.....  | 375                 | D7997                              | Appliance removal (not by original dentist) .....  | 269                 |
| D7710    | Maxillary - open reduction .....   | 375                 | <b>Orthodontics<sup>2</sup></b>    |  |                     |
| D7720    | Maxillary - closed reduction .....   | 375                 | D8010                              | Limited ortho. treatment of the primary dentition ....   | 375                 |
| D7730    | Mandible - open reduction.....   | 375                 | D8020                              | Limited ortho. treatment of the transitional dentition   | 375                 |
| D7740    | Mandible - closed reduction.....   | 375                 | D8030                              | Limited ortho treatment - adolescent dentition .....   | 375                 |
| D7750    | Malar and/or zygomatic arch - open reduction.....  | 375                 | D8040                              | Limited ortho treatment - adult dentition.....   | 375                 |
| D7760    | Malar and/or zygomatic arch- closed reduction.....   | 375                 | D8070                              | Comp. ortho. treatment - transitional dentition .....  | 375                 |
| D7770    | Alveolus - open reduction stabiliz. of teeth.....  | 375                 | D8080                              | Comp. ortho. treatment - adolescent dentition.....   | 375                 |
| D7771    | Alveolus, closed reduction stabiliz. of teeth.....   | 208                 | D8090                              | Comp. ortho. treatment - adult dentition .....   | 375                 |
| D7780    | Facial bones - complicated reduction.....  | 375                 | D8660                              | Pre-orthodontic treatment visit .....  | 375                 |
| D7810    | Open reduction of dislocation .....  | 375                 | D8670                              | Periodic ortho. treatment visit (as part of contract) ...                                      | 118                 |
| D7820    | Closed reduction of dislocation .....  | 342                 | D8680                              | Orthodontic retainer (rem. of appl./placement of retainer(s)).....                             | 375                 |
| D7830    | Manipulation under anesthesia .....  | 283                 | D8681                              | Removable orthodontic retainer adjustment.....   | 31                  |
| D7840    | Condylectomy.....  | 375                 | D8696                              | Repair of orthodontic appliance – maxillary .....  | 100                 |
| D7850    | Surgical discectomy, with/without implant.....   | 375                 | D8697                              | Repair of orthodontic appliance – mandibular .....   | 100                 |
| D7854    | Synovectomy .....  | 375                 | D8698                              | Re-cement or re-bond fixed retainer – maxillary .....  | 174                 |
| D7858    | Joint reconstruction.....  | 375                 | D8699                              | Re-cement or re-bond fixed retainer – mandibular ...   | 174                 |
| D7860    | Arthrotomy.....  | 375                 | D8701                              | Repair of fixed retainer, includes reattachment – maxillary .....                              | 174                 |
| D7865    | Arthroplasty.....  | 375                 | D8702                              | Repair of fixed retainer, includes reattachment – mandibular .....                             | 174                 |
| D7870    | Arthrocentesis .....   | 158                 | D8703                              | Replacement of lost or broken retainer – maxillary ...   | 179                 |
| D7871    | Non-arthroscopic lysis and lavage .....  | 375                 | D8704                              | Replacement of lost or broken retainer – mandibular  | 179                 |
| D7872    | Arthroscopy - diagnosis, w/ or w/out biopsy .....  | 375                 | <b>Adjunctive General Services</b> |  |                     |
| D7873    | Arthroscopy-surgical-lavage/lysis of adhesion .....  | 375                 | D9110                              | Palliative (emergency) treatment of dental pain.....   | 43                  |
| D7874    | Arthroscopy - surgical: disc reposit/stabiliz .....  | 375                 | D9210                              | Local anesthesia not in conj. w/ operative/surg. procedures .....                              | 0                   |
| D7875    | Arthroscopy - surgical: synovectomy.....   | 375                 | D9211                              | Regional block anesthesia .....  | 0                   |
| D7876    | Arthroscopy - surgical: discectomy.....  | 375                 | D9212                              | Trigeminal division block anesthesia .....   | 0                   |
| D7877    | Arthroscopy - surgical: debridement.....   | 375                 | D9215                              | Local anesthesia in conj. w/ operative/surg. procedures .....                                  | 0                   |
| D7880    | Occlusal orthotic device, "by report" .....  | 272                 | D9219                              | Evaluation for deep sedation or general anesthesia ...   | 0                   |
| D7910    | Suture of recent small wounds up to 5 cm.....  | 59                  | D9222                              | Deep sedation/general anesthesia - first 15 minutes..  | 103                 |
| D7911    | Complicated suture, <= 5 cm.....   | 69                  | D9223                              | Deep sedation/general anesthesia - each subsequent 15 minute increment.....                    | 103                 |
| D7912    | Complicated suture, > 5 cm.....  | 79                  | D9230                              | Inhalation of nitrous oxide/analgesia, anxiolysis.....   | 37                  |
| D7920    | Skin graft - identify defect .....   | 375                 | D9239                              | Intravenous moderate (conscious) sedation/analgesia – first 15 minutes.....                    | 103                 |
| D7921    | Collection application of blood concentrate .....  | 40                  | D9243                              | Intravenous moderate (conscious) sedation/analgesia - each subsequent 15 minute increment..... | 103                 |
| D7922    | Placement of intra-socket biological dressing to aid in hemostasis or clot stabilization, per site ..... | 20                  | D9248                              | Non-intravenous conscious sedation .....   | 145                 |
| D7940    | Osteoplasty - for orthognathic deformities .....   | 375                 | D9310                              | Consultation (diagnostic service by nontreating dentist) .....                                 | 43                  |
| D7941    | Osteotomy - mandibular rami .....  | 375                 | D9410                              | House/extended care facility call .....  | 200                 |
| D7943    | Osteotomy - mandibular rami with bone graft.....   | 375                 | D9420                              | Hospital call .....  | 375                 |
| D7944    | Osteotomy- segmented/ subapical-per sext/quad.....   | 375                 |                                    |  |                     |
| D7945    | Osteotomy - body of mandible.....  | 375                 |                                    |  |                     |
| D7946    | LeFort I (maxillary - total) .....   | 375                 |                                    |  |                     |



| ADA CODE | DESCRIPTION  | MEMBER COPAYMENT(S) |
|----------|--|---------------------|
| D9430    | Office visit for observation (during regularly scheduled hours) - no other services performed .....                    | 0                   |
| D9440    | Office visit after regularly scheduled hours.....  | 90                  |
| D9450    | Case pres, detailed/ext treatment planning.....  | 43                  |
| D9610    | Therapeutic parenteral drug, single admin. ....  | 26                  |
| D9612    | Therapeutic parenteral drug, 2 or more admin., diff. med. ....   | 70                  |
| D9613    | Infiltration of sustained release therapeutic drug, per quadrant.....  | 190                 |
| D9630    | Drugs or medicaments dispensed in the office for home use.....   | 42                  |
| D9910    | Application of desensitizing medicament .....  | 31                  |
| D9911    | Appl. of desen. resin for cervical/root surf.....  | 38                  |
| D9920    | Behavior management, by report .....   | 68                  |
| D9930    | Treatment of complications (post-surgical).....  | 43                  |
| D9941    | Fabrication of athletic mouthguard.....  | 102                 |
| D9942    | Repair and/or relines of occlusal guard .....  | 105                 |
| D9943    | Occlusal guard adjustment.....   | 46                  |
| D9944    | Occlusal guard – hard appliance, full arch.....  | 272                 |
| D9945    | Occlusal guard – soft appliance, full arch.....  | 272                 |
| D9946    | Occlusal guard – hard appliance, partial arch .....  | 272                 |
| D9950    | Occlusion analysis - mounted case.....   | 104                 |
| D9951    | Occlusal adjustment - limited.....   | 66                  |
| D9952    | Occlusal adjustment - complete .....   | 266                 |
| D9971    | Odontoplasty 1 - 2 teeth .....   | 48                  |
| D9974    | Internal bleaching - per tooth .....   | 163                 |
| D9986    | Missed appointment .....   | 50                  |
| D9995    | Teledentistry - synchronous; real-time encounter (when available) .....  | 0                   |
| D9996    | Teledentistry - asynchronous; information stored and forwarded to dentist for subsequent review (when available) ..... | 0                   |
| D9997    | Dental case management – patients with special health care needs.....  | 50                  |

1. Specialty care is provided at the listed copayment whether performed by a Participating General Dentist or a Participating Plan Specialist.
2. See limitation #12 for additional coverage information.

Current Dental Terminology © American Dental Association. Only current ADA CDT codes are considered valid by Dominion. For a full description of each code, please consult the ADA's CDT guidelines.

**Plan Exclusions**

1. Services which are covered under worker's compensation or employer's liability laws.
2. Services which are not Necessary and Appropriate Dental Services for the patient's dental health as determined by the Plan.
3. Cosmetic, elective or aesthetic dentistry except as required due to accidental bodily injury to sound natural teeth as determined by the Plan.
4. Services with respect to malignancies, cysts or neoplasms, hereditary, congenital, mandibular prognathism or development malformations where, in the opinion of the Plan, such services should not be performed in a dental office, with the exception of the necessary care and treatment of medically diagnosed congenital defects and birth abnormalities.
5. Treatment required for conditions resulting from major disaster, epidemic, war, acts of war, whether declared or undeclared, or while on active duty as a member of the armed forces of any nation.
6. Procedures not listed as covered services under this Plan.
7. Services obtained outside of the dental office in which enrolled and that are not pre-authorized by such office or the Plan (with the exception of out-of-area emergency dental services).

**Plan Limitations**

1. One (1) evaluation (D0120, D0145, D0150 or D0160) per six (6) months, per patient.
2. One (1) teeth cleaning (D1110 or D1120) per six (6) months, per patient.
3. One fluoride treatment per six (6) months, per patient.
4. Extraoral panoramic film/view and bitewings may be substituted for the full mouth series with the same frequency limit.
5. One (1) set of full mouth x-rays or panoramic film is covered every three (3) years.
6. Sealants, limited to one time application to all occlusal surfaces that are unfilled and caries free, in premolars and permanent molars. Replacement of sealants can be considered with pre-authorization.
7. Space maintainers to maintain space for eruption of permanent tooth/teeth, includes placement and removal.
8. Denture rebase following 12 months post denture insertion and subject to pre-authorization, denture rebase is covered and includes adjustments for first 6 months following service. Denture relines following 12 months post denture insertion denture relines are covered once a year without pre-authorization and includes adjustments for first 6 months following service.
9. One root scaling and planing (D4341, D4342 or D4346) per quadrant of mouth per six (6) months, subject to pre-authorization.
10. Periodontal maintenance following surgery, subject to pre-authorization.
11. Anesthesia requires a narrative of medical necessity be maintained in patient records. A maximum of 2 hours of services is allowed for general anesthesia and intravenous conscious sedation. There is no maximum for non-intravenous conscious sedation. General anesthesia is not covered with procedure codes D9230, D9239 or D9243. Intravenous conscious sedation is not covered with procedure codes D9222, D9223 or D9230. Non-intravenous conscious sedation is not covered with procedure codes D9222, D9223 or D9230. Analgesia (nitrous oxide) is not covered with procedure code D9222, D9223, D9239 or D9243.
12. Orthodontic treatment requires pre-authorization and is not considered for cosmetic purposes. Orthodontic consultation can be provided once annually as needed by the same provider. Pre-orthodontic treatment visit for completion of the HLD (NJ-Mod2) assessment form and diagnostic photographs and panoramic radiograph/views is required for consideration of services. Orthodontic cases that require extraction of permanent teeth must be approved for orthodontic treatment prior to extractions being provided. The orthodontic approval should be submitted with referral to oral surgeon or Participating Dentist providing the extractions and extractions should not be provided without proof of approval for orthodontic service. Initiation of treatment should take into consideration time needed to treat the case to ensure treatment is completed prior to 19th birthday. Periodic oral evaluation, preventive services and needed dental treatment must be provided prior to initiation of orthodontic treatment. The placement of the appliance represents the treatment start date. Reimbursement includes placement and removal of appliance. Removal can be requested by report as separate service for provider that did not start case and requires pre-authorization. Completion of treatment must be documented to include diagnostic photographs and panoramic radiograph/view of completed case and submitted when active treatment has ended and bands are removed. Date of service used is date of band removal.
13. Teledentistry, synchronous (D9995) or asynchronous (D9996), must be accompanied by a covered procedure.