

**LIBERTY Dental Plan of Nevada, Inc. Provider Agreement**  
**NV Exchange Fee Schedule**  
Effective January 1, 2018

Code	Description of Services	Fee
	<b>DIAGNOSTIC</b>	
D0120	Periodic oral evaluation – established patient	\$33.24
D0140	Limited oral evaluation – problem focused	\$33.24
D0145	Oral evaluation for a patient under three years of age and counseling with primary caregiver	\$20.50
D0150	Comprehensive oral evaluation – new or established patient	\$33.24
D0160	Detailed and extensive oral evaluation – problem focused, by report	\$36.89
D0170	Re-evaluation – limited, problem focused (established patient; not post-operative visit)	\$18.44
D0171	Re-evaluation – post-operative office visit	\$0.00
D0180	Comprehensive periodontal evaluation – new or established patient	\$36.99
D0210	Intraoral – complete series of radiographic images	\$58.94
D0220	Intraoral – periapical first radiographic image	\$18.86
D0230	Intraoral – periapical each additional radiographic image	\$5.89
D0240	Intraoral – occlusal radiographic image	\$14.14
D0250	Extra-oral – 2D projection radiographic image created using a stationary radiation source, and detector	\$20.03
D0251	Extra-oral posterior dental radiographic image	\$18.00
D0270	Bitewing – single radiographic image	\$11.79
D0272	Bitewings – two radiographic images	\$21.21
D0273	Bitewings – three radiographic images	\$16.40
D0274	Bitewings – four radiographic images	\$23.57
D0277	Vertical bitewings – 7 to 8 radiographic images	\$5.00
D0290	Posterior-anterior or lateral skull and facial bone survey radiographic image	\$51.24
D0322	Tomographic survey	\$153.99
D0330	Panoramic radiographic image	\$41.24
D0340	2D cephalometric radiographic image – acquisition, measurement and analysis	\$40.99
D0350	2D oral/facial photographic image obtained intra-orally or extra-orally	\$20.50
D0351	3D photographic image	\$28.67
D0415	Collection of microorganisms for culture and sensitivity	\$34.85
D0416	Viral culture	\$34.85
D0425	Caries susceptibility tests	\$14.30
D0460	Pulp vitality tests	\$10.25
D0470	Diagnostic casts	\$25.62
D0472	Accession of tissue, gross examination, preparation and transmission of written report	\$20.00
D0473	Accession of tissue, gross and microscopic examination, preparation and transmission of written report	\$20.00
D0474	Accession of tissue, gross and microscopic examination, including assessment of surgical margins for presence of disease, preparation and transmission of written report	\$20.00
D0486	Laboratory accession of transepithelial cytologic sample, microscopic examination, preparation and transmission of written report	\$43.05
D0502	Other oral pathology procedures, by report	\$55.34

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D0601	Caries risk assessment and documentation, with a finding of low risk	\$33.00
D0602	Caries risk assessment and documentation, with a finding of moderate risk	\$33.00
D0603	Caries risk assessment and documentation, with a finding of high risk	\$33.00
	<b>PREVENTIVE</b>	
D1110	Prophylaxis – adult	\$49.81
D1120	Prophylaxis – child	\$57.28
D1206	Topical application of fluoride varnish	\$53.30
D1208	Topical application of fluoride – excluding varnish	\$10.24
D1310	Nutritional counseling for control of dental disease	\$0.00
D1320	Tobacco counseling for the control and prevention of oral disease	\$0.00
D1330	Oral hygiene instructions	\$0.00
D1351	Sealant - per tooth	\$23.57
D1352	Preventive resin restoration in a moderate to high caries risk patient – permanent tooth	\$10.25
D1353	Sealant repair – per tooth	\$16.40
D1354	Interim caries arresting medicament application - per tooth	\$12.30
D1510	Space maintainer – fixed, unilateral	\$139.09
D1515	Space maintainer – fixed - bilateral	\$278.18
D1520	Space maintainer – removable – unilateral	\$102.49
D1525	Space maintainer – removable – bilateral	\$143.50
D1550	Re-cement or re-bond space maintainer	\$22.54
D1555	Removal of fixed space maintainer	\$22.54
D1575	Distal shoe space maintainer – fixed – unilateral	\$82.00
	<b>RESTORATIVE</b>	
D2140	Amalgam – one surface, primary or permanent	\$64.83
D2150	Amalgam – two surfaces, primary or permanent	\$86.04
D2160	Amalgam – three surfaces, primary or permanent	\$97.83
D2161	Amalgam – four or more surfaces, primary or permanent	\$117.87
D2330	Resin-based composite – one surface, anterior	\$56.38
D2331	Resin-based composite – two surfaces, anterior	\$75.85
D2332	Resin-based composite – three surfaces, anterior	\$83.03
D2335	Resin-based composite – four or more surfaces or involving incisal angle (anterior)	\$94.30
D2390	Resin-based composite crown, anterior	\$57.40
D2391	Resin-based composite – one surface, posterior	\$43.05
D2392	Resin-based composite – two surfaces, posterior	\$55.34
D2393	Resin-based composite – three surfaces, posterior	\$63.55
D2394	Resin-based composite – four or more surfaces, posterior	\$69.69
D2510	Inlay – metallic – one surface	\$223.00
D2520	Inlay – metallic – two surfaces	\$253.00
D2530	Inlay – metallic – three or more surfaces	\$292.00
D2542	Onlay – metallic – two surfaces	\$263.00
D2543	Onlay – metallic – three surfaces	\$277.00
D2544	Onlay – metallic – four or more surfaces	\$295.00
D2610	Inlay – porcelain/ceramic – one surface	\$360.74

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D2620	Inlay – porcelain/ceramic – two surfaces	\$380.00
D2630	Inlay – porcelain/ceramic – three or more surfaces	\$380.00
D2642	Onlay – porcelain/ceramic – two surfaces	\$287.00
D2643	Onlay – porcelain/ceramic – three surfaces	\$310.00
D2644	Onlay – porcelain/ceramic – four or more surfaces	\$329.00
D2650	Inlay – resin-based composite – one surface	\$237.06
D2651	Inlay – resin-based composite – two surfaces	\$282.41
D2652	Inlay – resin-based composite – three or more surfaces	\$296.84
D2662	Onlay – resin-based composite – two surfaces	\$257.67
D2663	Onlay – resin-based composite – three surfaces	\$303.02
D2664	Onlay – resin-based composite – four or more surfaces	\$324.66
D2710	Crown – resin-based composite (indirect)	\$170.53
D2712	Crown – ¾ resin-based composite (indirect)	\$303.40
D2720	Crown – resin with high noble metal	\$405.00
D2721	Crown – resin with predominantly base metal	\$307.50
D2722	Crown – resin with noble metal	\$379.00
D2740	Crown, porcelain/ceramic	\$450.99
D2750	Crown – porcelain fused to high noble metal	\$425.60
D2751	Crown – porcelain fused to predominantly base metal	\$327.99
D2752	Crown – porcelain fused to noble metal	\$405.91
D2780	Crown – ¾ cast high noble metal	\$408.31
D2781	Crown – ¾ cast predominantly base metal	\$266.49
D2782	Crown – ¾ cast noble metal	\$396.78
D2783	Crown – ¾ porcelain/ceramic	\$419.84
D2790	Crown – full cast high noble metal	\$410.71
D2791	Crown – full cast predominantly base metal	\$327.99
D2792	Crown – full cast noble metal	\$396.30
D2794	Crown – titanium	\$420.32
D2910	Re-cement or re-bond inlay, onlay, veneer or partial coverage restoration	\$30.74
D2915	Re-cement or re-bond indirectly fabricated or prefabricated post and core	\$34.02
D2920	Re-cement or re-bond crown	\$30.74
D2921	Reattachment of tooth fragment, incisal edge or cusp	\$41.00
D2930	Prefabricated stainless steel crown – primary tooth	\$92.24
D2931	Prefabricated stainless steel crown – permanent tooth	\$133.25
D2932	Prefabricated resin crown	\$61.50
D2933	Prefabricated stainless steel crown with resin window	\$112.74
D2940	Protective restoration	\$30.74
D2949	Restorative foundation for an indirect restoration	\$38.97
D2950	Core buildup, including any pins when required	\$123.00
D2951	Pin retention – per tooth, in addition to restoration	\$20.50
D2952	Post and core in addition to crown, indirectly fabricated	\$163.99
D2953	Each additional indirectly fabricated post – same tooth	\$133.25
D2954	Prefabricated post and core in addition to crown	\$102.49
D2955	Post removal	\$82.00
D2957	Each additional prefabricated post – same tooth	\$71.75

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D2960	Labial veneer (resin laminate) – chairside	\$123.00
D2961	Labial veneer (resin laminate) – laboratory	\$205.00
D2962	Labial veneer (porcelain laminate) – laboratory	\$205.00
D2971	Additional procedures to construct new crown under existing partial denture framework	\$20.00
D2975	Coping	\$166.05
D2980	Crown repair necessitated by restorative material failure	\$84.04
D2981	Inlay repair necessitated by restorative material failure	\$71.79
D2982	Onlay repair necessitated by restorative material failure	\$71.79
D2983	Veneer repair necessitated by restorative material failure	\$71.79
	<b>ENDODONTICS</b>	
D3110	Pulp cap – direct (excluding final restoration)	\$25.62
D3120	Pulp cap – indirect (excluding final restoration)	\$20.50
D3220	Therapeutic pulpotomy (excluding final restoration) – removal of pulp coronal to the dentinocemental junction and application of medicament	\$61.50
D3221	Pulpal debridement, primary and permanent teeth	\$35.00
D3222	Partial pulpotomy for apexogenesis – permanent tooth with incomplete root development	\$65.59
D3230	Pulpal therapy (resorbable filling) – anterior, primary tooth (excluding final restoration)	\$102.49
D3240	Pulpal therapy (resorbable filling) – posterior, primary tooth (excluding final restoration)	\$102.49
D3310	Endodontic therapy, anterior tooth (excluding final restoration)	\$205.00
D3320	Endodontic therapy, premolar tooth (excluding final restoration)	\$246.00
D3330	Endodontic therapy, molar tooth(excluding final restoration)	\$327.99
D3331	Treatment of root canal obstruction; non-surgical access	\$50.00
D3332	Incomplete endodontic therapy; inoperable, unrestorable or fractured tooth	\$196.00
D3333	Internal root repair of perforation defects	\$20.00
D3346	Retreatment of previous root canal therapy – anterior	\$305.00
D3347	Retreatment of previous root canal therapy, premolar	\$359.00
D3348	Retreatment of previous root canal therapy – molar	\$505.00
D3351	Apexification/recalcification – initial visit (apical closure/calcific repair of perforations, root resorption, etc.)	\$82.00
D3352	Apexification/recalcification – interim medication replacement	\$82.00
D3353	Apexification/recalcification – final visit (includes completed root canal therapy – apical closure/calcific repair of perforations, root resorption, etc.)	\$163.99
D3410	Apicoectomy – anterior	\$143.50
D3421	Apicoectomy, premolar (first root)	\$153.74
D3425	Apicoectomy – molar (first root)	\$163.99
D3426	Apicoectomy (each additional root)	\$61.50
D3427	Periradicular surgery without apicoectomy	\$305.19
D3430	Retrograde filling – per root	\$61.50
D3450	Root amputation – per root	\$102.49
D3460	Endodontic endosseous implant	\$317.75
D3920	Hemisection (including any root removal), not including root canal therapy	\$82.00

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D3950	Canal preparation and fitting of preformed dowel or post	\$61.50
	<b>PERIODONTICS</b>	
D4210	Gingivectomy or gingivoplasty – four or more contiguous teeth or tooth bounded spaces per quadrant	\$123.00
D4211	Gingivectomy or gingivoplasty – one to three contiguous teeth or tooth bounded spaces per quadrant	\$40.99
D4212	Gingivectomy or gingivoplasty to allow access for restorative procedure, per tooth	\$71.74
D4230	Anatomical crown exposure, four or more contiguous teeth or bounded tooth spaces per quadrant	\$188.60
D4231	Anatomical crown exposure, one to three teeth or bonded tooth spaces per quadrant	\$166.05
D4240	Gingival flap procedure, including root planing – four or more contiguous teeth or tooth bounded spaces per quadrant	\$123.00
D4241	Gingival flap procedure, including root planing – one to three contiguous teeth or tooth bounded spaces per quadrant	\$63.55
D4245	Apically positioned flap	\$20.00
D4249	Clinical crown lengthening – hard tissue	\$209.10
D4260	Osseous surgery (including elevation of a full thickness flap and closure) – four or more contiguous teeth or tooth bounded spaces per quadrant	\$205.00
D4261	Osseous surgery (including elevation of a full thickness flap and closure) – one to three contiguous teeth or tooth bounded spaces per quadrant	\$163.99
D4263	Bone replacement graft – retained natural tooth – first site in quadrant	\$194.75
D4264	Bone replacement graft – retained natural tooth – each additional site in quadrant	\$159.89
D4265	Biologic materials to aid in soft and osseous tissue regeneration	\$96.35
D4266	Guided tissue regeneration – resorbable barrier, per site	\$284.95
D4267	Guided tissue regeneration – non-resorbable barrier, per site (includes membrane removal)	\$327.99
D4270	Pedicle soft tissue graft procedure	\$123.00
D4273	Autogenous connective tissue graft procedure (including donor and recipient surgical sites) first tooth, implant or edentulous tooth position	\$338.24
D4274	Mesial/distal wedge procedure, single tooth (when not performed in conjunction with surgical procedures in the same anatomical area)	\$209.10
D4275	Non-autogenous connective tissue graft (including recipient site and donor material) first tooth, implant, or edentulous tooth position in graft	\$345.00
D4277	Free soft tissue graft procedure (including recipient and donor surgical sites) first tooth, implant, or edentulous tooth position in graft	\$614.99
D4278	Free soft tissue graft procedure (including recipient and donor surgical sites) each additional contiguous tooth, implant, or edentulous tooth position in same graft site	\$204.99
D4283	Autogenous connective tissue graft procedure (including donor and recipient surgical sites) – each additional contiguous tooth, implant or edentulous tooth position in same graft site	\$159.00
D4285	Non-autogenous connective tissue graft procedure (including recipient surgical site and donor material) – each additional contiguous tooth, implant or edentulous tooth position in same graft site	\$159.00

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D4320	Provisional splinting – intracoronal	\$20.50
D4321	Provisional splinting – extracoronal	\$20.50
D4341	Periodontal scaling and root planing – four or more teeth per quadrant	\$102.91
D4342	Periodontal scaling and root planing – one to three teeth per quadrant	\$55.34
D4346	Scaling in presence of generalized moderate or severe gingival inflammation – full mouth, after oral evaluation	\$184.50
D4355	Full mouth debridement to enable a comprehensive oral evaluation and diagnosis on a subsequent visit	\$74.83
D4381	Localized delivery of antimicrobial agents via a controlled release vehicle into diseased crevicular tissue, per tooth	\$69.69
D4910	Periodontal maintenance	\$40.99
D4920	Unscheduled dressing change (by someone other than treating dentist or their staff)	\$41.00
D4921	Gingival irrigation – per quadrant	\$10.00
	<b>PROSTHODONTICS (REMOVABLE)</b>	
D5110	Complete denture – maxillary	\$615.00
D5120	Complete denture – mandibular	\$615.00
D5130	Immediate denture – maxillary	\$666.25
D5140	Immediate denture – mandibular	\$666.25
D5211	Maxillary partial denture – resin base (including any conventional clasps, rests and teeth)	\$205.00
D5212	Mandibular partial denture – resin base (including any conventional clasps, rests and teeth)	\$205.00
D5213	Maxillary partial denture – cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	\$615.00
D5214	Mandibular partial denture – cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	\$615.00
D5221	Immediate maxillary partial denture – resin base (including any conventional clasps, rests and teeth)	\$348.50
D5222	Immediate mandibular partial denture – resin base (including any conventional clasps, rests and teeth)	\$362.85
D5223	Immediate maxillary partial denture – cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	\$615.00
D5224	Immediate mandibular partial denture – cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	\$615.00
D5225	Maxillary partial denture – flexible base (including any clasps, rests and teeth)	\$442.00
D5226	Mandibular partial denture – flexible base (including any clasps, rests and teeth)	\$501.00
D5281	Removable unilateral partial denture – one piece cast metal (including clasps and teeth)	\$410.00
D5410	Adjust complete denture – maxillary	\$40.99
D5411	Adjust complete denture – mandibular	\$40.99
D5421	Adjust partial denture – maxillary	\$40.99
D5422	Adjust partial denture – mandibular	\$40.99
D5510	Repair broken complete denture base	\$61.50
D5511	Repair broken complete denture base, mandibular	\$61.50

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<b>Code</b>	<b>Description of Services</b>	<b>Fee</b>
D5512	Repair broken complete denture base, maxillary	\$61.50
D5520	Replace missing or broken teeth – complete denture (each tooth)	\$40.99
D5610	Repair resin denture base	\$61.50
D5611	Repair resin partial denture base, mandibular	\$61.50
D5612	Repair resin partial denture base, maxillary	\$61.50
D5620	Repair cast framework	\$123.00
D5621	Repair cast partial framework, mandibular	\$123.00
D5622	Repair cast partial framework, maxillary	\$123.00
D5630	Repair or replace broken clasp - per tooth	\$123.00
D5640	Replace broken teeth - per tooth	\$61.50
D5650	Add tooth to existing partial denture	\$61.50
D5660	Add clasp to existing partial denture - per tooth	\$102.49
D5670	Replace all teeth and acrylic on cast metal framework (maxillary)	\$305.44
D5671	Replace all teeth and acrylic on cast metal framework (mandibular)	\$305.44
D5710	Rebase complete maxillary denture	\$184.00
D5711	Rebase complete mandibular denture	\$176.00
D5720	Rebase maxillary partial denture	\$173.00
D5721	Rebase mandibular partial denture	\$173.00
D5730	Reline complete maxillary denture (chairside)	\$123.00
D5731	Reline complete mandibular denture (chairside)	\$123.00
D5740	Reline maxillary partial denture (chairside)	\$102.49
D5741	Reline mandibular partial denture (chairside)	\$102.49
D5750	Reline complete maxillary denture (laboratory)	\$189.62
D5751	Reline complete mandibular denture (laboratory)	\$189.62
D5760	Reline maxillary partial denture (laboratory)	\$163.99
D5761	Reline mandibular partial denture (laboratory)	\$163.99
D5820	Interim partial denture (maxillary)	\$205.00
D5821	Interim partial denture (mandibular)	\$205.00
D5850	Tissue conditioning, maxillary	\$40.99
D5851	Tissue conditioning, mandibular	\$40.99
D5862	Precision attachment, by report	\$182.44
	<b>PROSTHODONTICS, FIXED</b>	
D6205	Pontic – indirect resin based composite	\$267.58
D6210	Pontic – cast high noble metal	\$396.00
D6211	Pontic – cast predominantly base metal	\$377.00
D6212	Pontic – cast noble metal	\$370.00
D6214	Pontic – titanium	\$365.00
D6240	Pontic – porcelain fused to high noble metal	\$392.00
D6241	Pontic – porcelain fused to predominantly base metal	\$370.00
D6242	Pontic – porcelain fused to noble metal	\$385.00
D6245	Pontic – porcelain/ceramic	\$216.00
D6250	Pontic – resin with high noble metal	\$398.80
D6251	Pontic – resin with predominantly base metal	\$367.92
D6252	Pontic – resin with noble metal	\$379.76
D6600	Retainer inlay – porcelain/ceramic, two surfaces	\$292.73

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D6601	Retainer inlay – porcelain/ceramic, three or more surfaces	\$307.03
D6602	Retainer inlay – cast high noble metal, two surfaces	\$312.84
D6603	Retainer inlay – cast high noble metal, three or more surfaces	\$344.12
D6604	Retainer inlay – cast predominantly base metal, two surfaces	\$306.58
D6605	Retainer inlay – cast predominantly base metal, three or more surfaces	\$324.91
D6606	Retainer inlay – cast noble metal, two surfaces	\$301.67
D6607	Retainer inlay – cast noble metal, three or more surfaces	\$334.74
D6608	Retainer onlay – porcelain/ceramic, two surfaces	\$318.20
D6609	Retainer onlay – porcelain/ceramic, three or more surfaces	\$332.06
D6610	Retainer onlay – cast high noble metal, two surfaces	\$337.42
D6611	Retainer onlay – cast high noble metal, three or more surfaces	\$369.15
D6612	Retainer onlay – cast predominantly base metal, two surfaces	\$335.63
D6613	Retainer onlay – cast predominantly base metal, three or more surfaces	\$350.83
D6614	Retainer onlay – cast noble metal, two surfaces	\$328.48
D6615	Retainer onlay – cast noble metal, three or more surfaces	\$341.44
D6710	Retainer crown – indirect resin based composite	\$285.00
D6720	Retainer crown – resin with high noble metal	\$391.05
D6721	Retainer crown – resin with predominantly base metal	\$370.94
D6722	Retainer crown – resin with noble metal	\$377.64
D6740	Retainer crown – porcelain/ceramic	\$411.16
D6750	Retainer crown – porcelain fused to high noble metal	\$400.43
D6751	Retainer crown – porcelain fused to predominantly base metal	\$373.62
D6752	Retainer crown – porcelain fused to noble metal	\$382.56
D6780	Retainer crown – ¾ cast high noble metal	\$377.64
D6781	Retainer crown – ¾ cast predominantly base metal	\$377.64
D6782	Retainer crown – ¾ cast noble metal	\$350.83
D6783	Retainer crown – ¾ porcelain/ceramic	\$388.81
D6790	Retainer crown – full cast high noble metal	\$386.58
D6791	Retainer crown – full cast predominantly base metal	\$366.47
D6792	Retainer crown – full cast noble metal	\$379.88
D6794	Retainer crown – titanium	\$379.88
D6930	Re-cement or re-bond fixed partial denture	\$76.87
D6940	Stress breaker	\$93.00
D6980	Fixed partial denture repair necessitated by restorative material failure	\$20.00
	<b>ORAL AND MAXILLOFACIAL SURGERY</b>	
D7111	Extraction, coronal remnants, primary tooth	\$40.99
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	\$45.09
D7210	Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated	\$87.12
D7220	Removal of impacted tooth – soft tissue	\$128.12
D7230	Removal of impacted tooth – partially bony	\$122.96
D7240	Removal of impacted tooth – completely bony	\$147.60
D7241	Removal of impacted tooth – completely bony, with unusual surgical complications	\$205.00
D7250	Removal of residual tooth roots (cutting procedure)	\$82.00



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D7251	Coronectomy – intentional partial tooth removal	\$61.50
D7260	Oroantral fistula closure	\$246.00
D7261	Primary closure of a sinus perforation	\$286.99
D7270	Tooth re-implantation and/or stabilization of accidentally evulsed or displaced tooth	\$102.49
D7280	Exposure of an unerupted tooth	\$123.00
D7282	Mobilization of erupted or malpositioned tooth to aid eruption	\$40.00
D7283	Placement of device to facilitate eruption of impacted tooth	\$49.20
D7285	Incisional biopsy of oral tissue – hard (bone, tooth)	\$92.24
D7286	Incisional biopsy of oral tissue – soft	\$82.00
D7287	Exfoliative cytological sample collection	\$40.18
D7288	Brush biopsy – transepithelial sample collection	\$47.56
D7290	Surgical repositioning of teeth	\$246.00
D7291	Transseptal fiberotomy/supra crestal fiberotomy, by report	\$77.89
D7292	Placement of temporary anchorage device [screw retained plate] requiring flap; includes device removal	\$727.75
D7293	Placement of temporary anchorage device requiring flap; includes device removal	\$533.00
D7294	Placement of temporary anchorage device without flap; includes device removal	\$395.64
D7310	Alveoloplasty in conjunction with extractions – four or more teeth or tooth spaces, per quadrant	\$86.10
D7311	Alveoloplasty in conjunction with extractions – one to three teeth or tooth spaces, per quadrant	\$108.65
D7320	Alveoloplasty not in conjunction with extractions – four or more teeth or tooth spaces, per quadrant	\$108.65
D7321	Alveoloplasty not in conjunction with extractions – one to three teeth or tooth spaces, per quadrant	\$157.85
D7410	Excision of benign lesion up to 1.25 cm	\$102.49
D7411	Excision of benign lesion greater than 1.25 cm	\$100.45
D7412	Excision of benign lesion, complicated	\$139.39
D7440	Excision of malignant tumor – lesion diameter up to 1.25 cm	\$656.00
D7441	Excision of malignant tumor – lesion diameter greater than 1.25 cm	\$327.99
D7450	Removal of benign odontogenic cyst or tumor – lesion diameter up to 1.25 cm	\$205.00
D7451	Removal of benign odontogenic cyst or tumor – lesion diameter greater than 1.25 cm	\$327.99
D7460	Removal of benign nonodontogenic cyst or tumor – lesion diameter up to 1.25 cm	\$205.00
D7461	Removal of benign nonodontogenic cyst or tumor – lesion diameter greater than 1.25 cm	\$327.99
D7465	Destruction of lesion(s) by physical or chemical method, by report	\$107.63
D7471	Removal of lateral exostosis (maxilla or mandible)	\$50.00
D7472	Removal of torus palatinus	\$143.50
D7473	Removal of torus mandibularis	\$147.60
D7490	Radical resection of maxilla or mandible	\$4,100.00
D7510	Incision and drainage of abscess – intraoral soft tissue	\$82.00

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D7511	Incision and drainage of abscess – intraoral soft tissue – complicated (includes drainage of multiple fascial spaces)	\$90.61
D7520	Incision and drainage of abscess – extraoral soft tissue	\$123.00
D7521	Incision and drainage of abscess – extraoral soft tissue – complicated (includes drainage of multiple fascial spaces)	\$145.96
D7530	Removal of foreign body from mucosa, skin, or subcutaneous alveolar tissue	\$86.10
D7540	Removal of reaction producing foreign bodies, musculoskeletal system	\$123.00
D7550	Partial ostectomy/sequestrectomy for removal of non-vital bone	\$358.75
D7560	Maxillary sinusotomy for removal of tooth fragment or foreign body	\$266.49
D7610	Maxilla – open reduction (teeth immobilized, if present)	\$820.00
D7620	Maxilla – closed reduction (teeth immobilized, if present)	\$717.50
D7630	Mandible – open reduction (teeth immobilized, if present)	\$922.49
D7640	Mandible – closed reduction (teeth immobilized, if present)	\$820.00
D7650	Malar and/or zygomatic arch – open reduction	\$512.49
D7660	Malar and/or zygomatic arch – closed reduction	\$410.00
D7670	Alveolus – closed reduction, may include stabilization of teeth	\$410.00
D7671	Alveolus – open reduction, may include stabilization of teeth	\$779.00
D7680	Facial bones – complicated reduction with fixation and multiple surgical approaches	\$1,025.00
D7710	Maxilla – open reduction	\$1,025.00
D7720	Maxilla – closed reduction	\$902.00
D7730	Mandible – open reduction	\$1,168.49
D7740	Mandible – closed reduction	\$922.49
D7750	Malar and/or zygomatic arch – open reduction	\$645.75
D7760	Malar and/or zygomatic arch – closed reduction	\$533.00
D7770	Alveolus - open reduction stabilization of teeth	\$533.00
D7771	Alveolus, closed reduction stabilization of teeth	\$73.79
D7780	Facial bones – complicated reduction with fixation and multiple approaches	\$2,500.99
D7910	Suture of recent small wounds up to 5 cm	\$26.64
D7911	Complicated suture – up to 5 cm	\$53.30
D7912	Complicated suture – greater than 5 cm	\$10.25
D7940	Osteoplasty – for orthognathic deformities	\$1,230.00
D7941	Osteotomy – mandibular rami	\$820.00
D7943	Osteotomy – mandibular rami with bone graft; includes obtaining the graft	\$1,537.50
D7944	Osteotomy – segmented or subapical	\$1,025.00
D7945	Osteotomy – body of mandible	\$1,025.00
D7946	LeFort I (maxilla – total)	\$2,562.49
D7947	LeFort I (maxilla – segmented)	\$2,562.49
D7948	LeFort II or LeFort III (osteoplasty of facial bones for midface hypoplasia or retrusion) – without bone graft	\$2,870.00
D7949	LeFort II or LeFort III – with bone graft	\$4,182.00
D7951	Sinus augmentation with bone or bone substitutes via a lateral open approach	\$803.59
D7953	Bone replacement graft for ridge preservation – per site	\$440.74
D7955	Repair of maxillofacial soft and/or hard tissue defect	\$922.49

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<b>Code</b>	<b>Description of Services</b>	<b>Fee</b>
D7960	Frenulectomy – also known as frenectomy or frenotomy – separate procedure not incidental to another procedure	\$123.00
D7963	Frenuloplasty	\$145.54
D7970	Excision of hyperplastic tissue - per arch	\$246.00
D7971	Excision of pericoronal gingiva	\$123.00
D7980	Surgical sialolithotomy	\$246.00
D7981	Excision of salivary gland, by report	\$410.00
D7982	Sialodochoplasty	\$584.24
D7983	Closure of salivary fistula	\$246.00
D7990	Emergency tracheotomy	\$512.49
D7991	Coronoidectomy	\$820.00
D7996	Implant-mandible for augmentation purposes (excluding alveolar ridge), by report	\$0.00
D7998	Intraoral placement of a fixation device not in conjunction with a fracture	\$596.54
	<b>ORTHODONTICS</b>	
D8040	Limited orthodontic treatment of the adult dentition	\$696.99
D8080	Comprehensive orthodontic treatment of the adolescent dentition	\$1,865.49
D8090	Comprehensive orthodontic treatment of the adult dentition	\$1,947.50
D8660	Pre-orthodontic treatment examination to monitor growth and development	\$49.20
D8670	Periodic orthodontic treatment visit	\$79.94
D8680	Orthodontic retention (removal of appliances, construction and placement of retainer(s))	\$117.87
D8690	Orthodontic treatment (alternative billing to a contract fee)	\$81.15
D8693	Re-cement or re-bond fixed retainer	\$69.69
D8694	Repair of fixed retainers, includes reattachment	\$33.81
D8999	Unspecified orthodontic procedure, by report	\$0.00
	<b>ADJUNCTIVE GENERAL SERVICES</b>	
D9110	Palliative (emergency) treatment of dental pain - minor procedure	\$40.99
D9120	Fixed partial denture sectioning	\$71.75
D9210	Local anesthesia not in conjunction with operative or surgical procedures	\$10.25
D9211	Regional block anesthesia	\$18.00
D9212	Trigeminal division block anesthesia	\$10.25
D9215	Local anesthesia in conjunction with operative or surgical procedures	\$6.15
D9219	Evaluation for deep sedation or general anesthesia	\$0.00
D9222	Deep sedation/general anesthesia, first 15 minute increment	\$53.30
D9223	Deep sedation/general anesthesia, each subsequent 15 minute increment	\$53.30
D9230	Inhalation of nitrous oxide/analgesia, anxiolysis	\$18.44
D9239	Intravenous moderate (conscious) sedation/analgesia, first 15 minute increment	\$18.45
D9243	Intravenous moderate (conscious) sedation/analgesia, each subsequent 15 minute increment	\$18.45
D9248	Non-intravenous conscious sedation	\$91.22
D9310	Consultation – diagnostic service provided by dentist or physician other than requesting dentist or physician	\$61.50
D9410	House/extended care facility call	\$61.50

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D9420	Hospital or ambulatory surgical center call	\$40.99
D9430	Office visit for observation (during regularly scheduled hours) – no other services performed	\$18.44
D9440	Office visit – after regularly scheduled hours	\$61.50
D9450	Case presentation, detailed and extensive treatment planning	\$20.00
D9610	Therapeutic parenteral drug, single administration	\$20.50
D9612	Therapeutic parenteral drugs, two or more administrations, different medications	\$40.99
D9630	Drugs or medicaments dispensed in the office for home use	\$10.25
D9930	Treatment of complications (post-surgical) – unusual circumstances, by report	\$34.85
D9932	Cleaning and inspection of removable complete denture, maxillary	\$47.87
D9933	Cleaning and inspection of removable complete denture, mandibular	\$47.87
D9934	Cleaning and inspection of removable partial denture, maxillary	\$47.87
D9935	Cleaning and inspection of removable partial denture, mandibular	\$47.87
D9940	Occlusal guard, by report	\$205.00
D9942	Repair and/or reline of occlusal guard	\$70.52
D9943	Occlusal guard adjustment	\$33.40
D9950	Occlusion analysis - mounted case	\$168.09
D9951	Occlusal adjustment – limited	\$10.25
D9952	Occlusal adjustment – complete	\$163.99
D9975	External bleaching for home application, per arch; includes materials and fabrication of custom trays	\$111.32
D9986	Missed appointment	\$0.00
D9987	Cancelled appointment	\$0.00