



MetLife

**PACIFIC DENTAL SERVICES
CENTRAL FLORIDA GP'S ONLY
ZIP CODES: 335, 336, 337 and 346**

Procedure Code	Procedure Code Description	2023 Fee Schedule
120	Periodic oral evaluation - established patient	29
140	Limited oral evaluation - problem focused	41
145	Oral evaluation for a patient under three years of age and counseling with primary caregiver	27
150	Comprehensive oral evaluation - new or established patient	41
160	Detailed and extensive oral evaluation - problem focused, by report	49
170	Re-evaluation - limited, problem focused (established patient; not post-operative visit)	38
171	Re-evaluation - post operative office visit	38
180	Comprehensive periodontal evaluation - new or established patient	44
190	Screening of a patient	9
191	Assessment of a patient	9
210	Intraoral - complete series (including bitewing images)	81
220	Intraoral - periapical first image	15
230	Intraoral - periapical each additional image	7
240	Intraoral - occlusal image	26
250	Extraoral - first image	50
251	Extra-oral posterior dental radiographic image	50
270	Bitewings - single image	16
272	Bitewings - two image	25
273	Bitewings - three images	33
274	Bitewings - four images	34
277	Vertical bitewings - 7 to 8 radiographic images	39
310	Sialography	101
320	Temporomandibular joint arthrogram, including injection	228
321	Other TMJ image, by report	114
322	Tomographic survey	232
330	Panoramic image	68
340	Cephalometric image	77
350	2D oral/facial photographic image obtained intra-orally or extra-orally	38
364	Cone beam CT capture and interpretation with limited field of view - less than one whole jaw	355
365	Cone beam CT capture and interpretation with limited field of view of one full dental - mandible	355
366	Cone beam CT capture and interpretation with field of view of one full dental arch - maxilla, with or without cranium	355

367	Cone beam CT capture and interpretation with field of view of both jaws, with or without cranium	355
368	Cone beam Ct capture and interpretation for TMJ series including two or more exposures	355
369	Maxillofacial MRI capture and interpretation	355
370	Maxillofacial ultrasound capture and interpretation	355
371	Sialoendoscopy capture and interpretation	355
380	Cone beam CT image capture with limited field of view - less than one whole jaw	355
381	Cone beam CT image capture with field of view of one full dental arch - mandible	355
382	Cone beam CT image capture with field of view of one full dental arch - maxilla, with or without cranium	355
383	Cone beam CT image capture with field of view of both jaws, with or without cranium	355
384	Cone beam CT capture images for TMJ series including two or more exposures	355
385	Maxillofacial MRI image capture	355
386	Maxillofacial ultrasound image capture	355
391	Interpretation of diagnostic Image capture performed by a practitioner not associated with interpretation and report	20
393	Treatment simulation using 3D image volume	30
394	Digital subtraction of two or more images or image volumes of the same modality	29
395	Fusion of two or more 3D image volumes of one or more modalities	29
415	Bacteriologic studies for determination of pathologic agents	41
417	Collection and preparation of saliva sample for laboratory diagnostic testing	35
422	Collection and preparation of genetic sample material for laboratory analysis and report	20
423	Genetic test for susceptibility to diseases -specimen analysis	20
425	Caries susceptibility tests	32
431	Adjunctive pre-diagnostic test	51
460	Pulp vitality tests	32
470	Diagnostic casts	68
601	Caries risk assessment and documentation, with a finding of low risk	9
602	Caries risk assessment and documentation, with a finding of moderate risk	9
603	Caries risk assessment and documentation, with a finding of high risk	9
1110	Prophylaxis - adult	61
1120	Prophylaxis - child	46
1206	Topical application of fluoride varnish	42
1208	Topical application of fluoride - excluding varnish	27
1310	Nutritional counseling for the control of dental disease	21
1320	Tobacco counseling for the control of oral disease	25
1330	Oral hygiene instructions	32
1351	Sealant - per tooth	27

1352	Preventive resin restoration in a moderate to high caries risk patient - permanent tooth	27
1353	Sealant repair - per tooth	7
1354	Application of caries arresting medicament application - per tooth	14
1355	Caries preventive medicament application – per tooth	14
1510	Space maintainer - fixed - unilateral per quadrant	266
1516	Space maintainer – fixed – bilateral, maxillary	369
1517	Space maintainer – fixed – bilateral, mandibular	369
1520	Space maintainer - removable - unilateral - per quadrant	260
1526	Space maintainer – removable – bilateral, maxillary	470
1527	Space maintainer – removable – bilateral, mandibular	470
1551	Recement or re-bond space maintainer - maxillary	40
1552	Recement or re-bond space maintainer - mandibular	40
1553	Recement or re-bond space maintainer - per quadrant	40
1575	Distal shoe space maintainer - fixed - unilateral per quadrant	266
2140	Amalgam - one surface, primary or permanent	76
2150	Amalgam - two surfaces, primary or permanent	92
2160	Amalgam - three surfaces, primary or permanent	118
2161	Amalgam - four or more surfaces, primary or permanent	142
2330	Resin-based composite - one surface, anterior	85
2331	Resin-based composite - two surfaces, anterior	114
2332	Resin-based composite - three surfaces, anterior	138
2335	Resin-based composite - four or more surfaces or involving incisal angle (anterior)	155
2390	Resin-based composite crown, anterior	173
2391	Resin-based composite - one surface, posterior	92
2392	Resin-based composite - two surfaces, posterior	128
2393	Resin-based composite - three surfaces, posterior	151
2394	Resin-based composite - four or more surfaces, posterior	159
2410	Gold foil - one surface	213
2420	Gold foil - two surfaces	294
2430	Gold foil - three surfaces	351
2510	Inlay - metallic - one surface	442
2520	Inlay - metallic - two surfaces	527
2530	Inlay - metallic - three or more surfaces	570
2542	Onlay - metallic - two surfaces	654
2543	Onlay - metallic - three surfaces	671
2544	Onlay - metallic - four or more surfaces	697
2610	Inlay - porcelain/ceramic - one surface	491
2620	Inlay - porcelain/ceramic - two surfaces	539
2630	Inlay - porcelain/ceramic - three or more surfaces	667
2642	Onlay - porcelain/ceramic - two surfaces	770
2643	Onlay - porcelain/ceramic - three surfaces	791
2644	Onlay - porcelain/ceramic - four or more surfaces	810
2650	Inlay - composite/resin one surface	371
2651	Inlay - composite/resin two surfaces	445

2652	Inlay - composite/resin - three or more surfaces	497
2662	Onlay - composite/resin - two surfaces	651
2663	Onlay - composite/resin - three surfaces	622
2664	Onlay - composite/resin - four or more surfaces	646
2710	Crown - resin-based composite (indirect)	273
2712	Crown - 3/4 resin-based composite (indirect)	267
2720	Crown - resin with high noble metal	735
2721	Crown - resin with predominantly base metal	543
2722	Crown - resin with noble metal	622
2740	Crown - porcelain/ceramic substrate	777
2750	Crown - porcelain fused to high noble metal	760
2751	Crown - porcelain fused to predominantly base metal	696
2752	Crown - porcelain fused to noble metal	713
2753	Crown - porcelain fused to titanium and titanium alloys	760
2780	Crown - 3/4 cast high noble metal	755
2781	Crown - 3/4 cast predominately base metal	678
2782	Crown - 3/4 cast noble metal	697
2783	Crown - 3/4 cast porcelain/ceramic	778
2790	Crown - full cast high noble metal	704
2791	Crown - full cast predominantly base metal	625
2792	Crown - full cast noble metal	649
2794	Crown - Titanium and titanium alloys	684
2799	Interim crown - further treatment or completion of diagnosis necessary prior to final impression	249
2910	Recement or re-bond inlay, onlay, veneer or partial coverage restoration	46
2915	Recement or re-bond indirectly fabricated or prefabricated post and core	46
2920	Recement or re-bond crown	46
2921	Reattachment of tooth fragment, incisal edge or cusp	65
2928	Prefabricated porcelain/ceramic crown – permanent tooth	381
2929	Prefabricated Porcelain/ceramic crown - primary tooth	158
2930	Prefabricated stainless steel crown, primary tooth	139
2931	Prefabricated stainless steel crown, permanent tooth	144
2932	Prefabricated resin crown	152
2933	Prefabricated stainless steel crown with resin window	205
2934	Prefabricated esthetic coated stainless steel crown - primary tooth	144
2940	Protective restoration	41
2941	Interim therapeutic restoration - primary dentition	41
2949	Restorative foundation for an indirect restoration	60
2950	Core buildup, including any pins	118
2951	Pin retention - per tooth, in addition to restoration	32
2952	Cast post and core in addition to crown	269
2953	Cast post and core each additional - same tooth	28
2954	Prefabricated post and core in addition to crown	175
2955	Post removal	123
2957	Each additional prefabricated post - same tooth	16

2960	Labial veneer (resin laminate) - direct	306
2961	Labial veneer (resin laminate) - indirect	463
2962	Labial veneer (porcelain laminate) - indirect	612
2971	Construct new crown - additional procedure	124
2975	Coping	280
2980	Crown repair, by report	122
2981	Inlay repair necessitated by restorative material failure	122
2982	Onlay repair necessitated by restorative material failure	122
2983	Veneer repair necessitated by restorative material failure	118
2990	Resin infiltration of incipient smooth surface lesions	27
3110	Pulp cap - direct (excluding final restoration)	38
3120	Pulp cap - indirect (excluding final restoration)	38
3220	Therapeutic pulpotomy (excluding final restoration)	77
3221	Pulpal debridement, primary and permanent teeth	46
3222	partial pulpotomy for apexogenesis - permanent tooth with incomplete root development	77
3230	Pulpal therapy - anterior, primary tooth	181
3240	Pulpal therapy - posterior, primary tooth	215
3310	Endodontic therapy, anterior tooth (excluding final restoration)	423
3320	Endodontic therapy, premolar tooth (excluding final restoration)	504
3330	Endodontic therapy, molar tooth (excluding final restoration)	682
3331	Treatment of root canal obstruction; non-surgical access	125
3332	Incomplete endodontic therapy; inoperable, unrestorable or fractured tooth	205
3333	Internal root repair of perforation defects	106
3346	Retreatment of previous root canal therapy – anterior	532
3347	Retreatment of previous root canal therapy – premolar	605
3348	Retreatment of previous root canal therapy - molar	786
3351	Apexification/recalcification -initial visit (apical closure/calcific repair of perforations, root resorption, wtc)	187
3352	Apexification/recalcification -interim	96
3353	Apexification/recalcification - final visit	275
3355	Pulpal regeneration - initial visit	96
3356	Pulpal regeneration - interim medication replacement	48
3357	Pulpal regeneration - completion of treatment	96
3410	Apicoectomy/periradicular surgery - anterior	376
3421	Apicoectomy/periarticular surgery - bicuspid (1st Root)	436
3425	Apicoectomy/periarticular surgery - molar (1st Root)	499
3426	Apicoectomy/periarticular surgery (each add'l root)	189
3428	Bone graft in conjunction with periarticular surgery - per tooth, single site	265
3429	Bone graft in conjunction with periarticular surgery - each additional contiguous tooth in the same surgical site	198
3430	Retrograde filling - per root	116
3431	Biologic materials to aid in soft and osseous tissue regeneration in conjunction with periarticular surgery	164
3432	Guided tissue regeneration, resorbable barrier, per site, in conjunction with periarticular surgery	260

3450	Root amputation - per root	284
3460	Endodontic endosseous implant	157
3470	Intentional reimplantation (including necessary splinting)	370
3471	Surgical repair of root resorption - anterior	282
3472	Surgical repair of root resorption – premolar	327
3473	Surgical repair of root resorption – molar	374
3501	Surgical exposure of root surface without apicoectomy or repair of root resorption – anterior	292
3502	Surgical exposure of root surface without apicoectomy or repair of root resorption – premolar	292
3503	Surgical exposure of root surface without apicoectomy or repair of root resorption – molar	292
3910	Surgical procedure for isolation of tooth with rubber dam	119
3911	Intraorifice barrier - not to be used as a final restoration	32
3920	Hemisection (including any root removal), not including root canal therapy	245
3921	Decoronation or submergence of an erupted tooth	219
3950	Canal preparation and fitting of preformed dowel or post	93
4210	Gingivectomy or gingivoplasty - four or more contiguous teeth or bounded teeth spaces per quadrant	338
4211	Gingivectomy or gingivoplasty - one to three teeth, per quadrant	165
4212	Gingivectomy or gingivoplasty to allow access for restorative procedure, per tooth	51
4230	Anatomical crown exposure - 4 or more teeth	560
4231	Anatomical crown exposure - 1 to 3 teeth	325
4240	Gingival flap procedure, including root planing – four or more contiguous teeth or tooth bound spaces per quadrant	348
4241	Gingival flap procedure, including root planing – one to three contiguous teeth or tooth bound spaces per quadrant	215
4245	Apically positioned flap	183
4249	Clinical crown lengthening - hard tissue	541
4260	Osseous surgery (incl. flap entry & closure) - four or more contiguous teeth or bounded teeth spaces per quadrant	749
4261	Osseous surgery (incl. flap entry & closure) - one to three teeth per quadrant	475
4263	Bone replacement graft - retained natural tooth - first site in quadrant	265
4264	Bone replacement graft - retained natural tooth - each add'l tooth in quadrant	198
4265	Biologic materials to aid in soft and osseous tissue regeneration	169
4266	Guided tissue regeneration, natural teeth – resorbable barrier, per site	262
4267	Guided tissue regeneration, natural teeth – non-resorbable barrier, per site	333
4268	Surgical revision procedure, per tooth	84
4270	Pedicle soft tissue graft procedure	387

4273	Autogenous connective tissue graft procedure (including donor and recipient surgical sites) first tooth, implant or edentulous tooth position in graft	656
4274	Mesial/distal wedge procedure, single tooth (when not performed in conjunction with surgical procedures in the same anatomical area)	208
4275	Non-autogenous connective tissue graft (including recipient site and donor material) first tooth, implant, or edentulous tooth position in graft	625
4276	Combined connective tissue and pedicle graft, per tooth	641
4277	Free soft tissue graft procedure (including recipient and donor surgical sites) first tooth, implant, or edentulous tooth position in graft	527
4278	Free soft tissue graft procedure (including recipient and donor surgical sites) each additional contiguous tooth, implant, or edentulous tooth position in same graft site	272
4283	Autogenous connective tissue graft procedure (including donor and recipient surgical sites) - each additional contiguous tooth, implant or edentulous tooth position in same graft site	328
4285	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	313
4322	Splint intra-coronal; natural teeth or prosthetic crowns	191
4323	Splint extra-coronal; natural teeth or prosthetic crowns	150
4341	Periodontal scaling and root planning - four or more contiguous teeth or bounded teeth spaces per quadrant	128
4342	Periodontal scaling and root planning - one to three teeth, per quadrant	84
4346	Scaling in presence of generalized moderate or severe gingival inflammation - full mouth, after oral evaluation	60
4355	Full mouth debridement to enable a comprehensive periodontal evaluation and diagnosis on a subsequent visit	63
4381	Delivery of Antimicrobial Agents	61
4910	Periodontal maintenance	77
4920	Unscheduled dressing change, other than treating dentist	37
4921	Gingival irrigation with a medicinal agent – per quadrant	14
5110	Complete denture, maxillary (upper)	874
5120	Complete denture, mandibular (lower)	874
5130	Immediate denture, maxillary (upper)	956
5140	Immediate denture, mandibular (lower)	956
5211	Maxillary partial denture - resin base (incl. clasps, rests, & teeth)	668
5212	Mandibular partial denture - resin base (incl. clasps, rests, & teeth)	668
5213	Maxillary (Upper) partial denture -cast metal framework with resin denture bases (including retentive/clasping materials, rests and teeth)	1012
5214	Mandibular (Lower) partial denture -cast metal framework with resin denture bases (including retentive/clasping materials, rests and teeth)	1012

5221	Immediate maxillary partial denture - resin base (including retentive/clasping materials, rests and teeth)	668
5222	Immediate mandibular partial denture - resin base (including retentive/clasping materials, rests and teeth)	668
5223	Immediate maxillary partial denture - cast base (including retentive/clasping materials, rests and teeth)	1012
5224	Immediate mandibular partial denture - cast base (including retentive/clasping materials, rests and teeth)	1012
5225	Maxillary (Upper) Partial Denture	792
5226	Mandibular (Lower) Partial Denture	792
5227	Immediate maxillary partial denture - flexible base (including any clasps, rests and teeth)	701
5228	Immediate mandibular partial denture - flexible base (including any clasps, rests and teeth)	701
5282	Removable unilateral partial denture – one piece cast metal (including clasps and teeth), maxillary	376
5283	Removable unilateral partial denture – one piece cast metal (including clasps and teeth), mandibular	376
5284	Removable unilateral partial denture – one piece flexible base (including clasps and teeth), per quadrant	188
5286	Removable unilateral partial denture - one piece resin (including retentive/clasping materials, rests, and teeth) - per quadrant	188
5410	Adjust complete denture - upper	39
5411	Adjust complete denture - lower	39
5421	Adjust partial denture - upper	39
5422	Adjust partial denture - lower	39
5511	Repair broken complete denture base, mandibular	126
5512	Repair broken complete denture base, maxillary	126
5520	Replace missing/broken teeth complete denture per tooth	108
5611	Repair resin denture base, mandibular	95
5612	Repair resin denture base, maxillary	95
5621	Repair cast partial framework, mandibular	107
5622	Repair cast partial framework, maxillary	107
5630	Repair or replace broken retentive clasping materials - per tooth	99
5640	Replace broken teeth - per tooth	108
5650	Add tooth to existing partial denture	116
5660	Add clasp to existing partial denture	147
5670	Replace all teeth and acrylic on cast metal framework (maxillary)	291
5671	Replace all teeth and acrylic on cast metal framework (mandibular)	297
5710	Rebase complete upper denture	331
5711	Rebase complete lower denture	323
5720	Rebase upper partial denture	295
5721	Rebase lower partial denture	295
5725	Rebase hybrid prosthesis- Replacing the base material connected to the framework	348
5730	Reline complete upper denture (chairside)	187

5731	Reline complete lower denture (chairside)	187
5740	Reline upper partial denture (chairside)	150
5741	Reline lower partial denture (chairside)	150
5750	Reline upper complete denture (laboratory)	278
5751	Reline lower complete denture (laboratory)	278
5760	Reline upper partial denture (laboratory)	242
5761	Reline lower partial denture (laboratory)	242
5765	Soft liner for complete or partial removable denture - indirect	292
5810	Interim complete denture (upper)	425
5811	Interim complete denture (lower)	425
5820	Interim partial denture (upper)	336
5821	Interim partial denture (lower)	326
5850	Tissue conditioning, upper	88
5851	Tissue conditioning, lower	88
5862	Precision attachment by report	294
5863	Overdenture - complete maxillary	1121
5864	Overdenture - partial maxillary	1047
5865	Overdenture - complete mandibular	1132
5866	Overdenture - partial mandibular	1047
5867	Replacement of replaceable part of semi-precision or precision attachment, per attachment	121
5875	Modification of removable prosthesis following implant surgery	144
6010	Surgical placement of implant body: endosteal implant	1392
6011	Second stage implant surgery	145
6012	Surgical placement of interim implant body for transitional prosthesis: endosteal implant	1352
6013	Surgical placement of mini implant	1378
6040	Surgical placement: eposteal implant	2519
6050	Surgical placement: transosteal implant	3079
6051	Interim implant abutment placement	237
6055	Connecting bar-implant or abutment supported	608
6056	Prefabricated abutment	479
6057	Custom abutment	618
6058	Abutment supported porcelain/ceramic crown	917
6059	Abutment supported porcelain fused to metal crown (hi noble metal)	868
6060	Abutment supported porcelain fused to metal crown (pred. base metal)	780
6061	Abutment supported porcelain fused to metal crown (noble metal)	834
6062	Abutment supported cast metal crown (hi noble metal)	836
6063	Abutment supported cast metal crown (pred. base metal)	724
6064	Abutment supported cast metal crown (noble metal)	781
6065	Implant supported porcelain/ceramic crown	893
6066	Implant supported crown - porcelain fused to high noble alloys	860
6067	Implant supported crown - high noble alloys	843
6068	Abutment supported retainer for porcelain/ceramic FPD	891

6069	Abutment supported retainer for porcelain fused to metal FPD(hi noble metal)	850
6070	Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal)	770
6071	Abutment supported retainer for porcelain fused to metal FPD (noble metal)	827
6072	Abutment supported retainer for cast metal FPD (high noble metal)	814
6073	Abutment supported retainer for cast metal FPD (predominantly base metal)	669
6074	Abutment supported retainer for cast metal FPD (noble metal)	746
6075	Implant supported retainer for ceramic FPD	850
6076	Implant supported retainer for FPD - porcelain fused to high noble alloys	852
6077	Implant supported retainer for metal FPD - alloys	791
6080	Implant maintenance procedures, including: removal of prosthesis, cleansing of prosthesis and abutments, reinsertion of prosthesis	68
6082	Implant supported crown - porcelain fused to predominantly base alloys	780
6083	Implant supported crown - porcelain fused to noble alloys	834
6084	Implant supported crown - porcelain fused to titanium and titanium alloys	791
6085	Interim implant crown	252
6086	Implant supported crown - predominantly base alloys	724
6087	Implant supported crown - noble alloys	781
6088	Implant supported crown - titanium and titanium alloys	791
6090	Repair implant supported prosthesis, by report	165
6091	Replace semi-precision or precision attachment	280
6092	Recementor re-bond implant/abutment supported supported crown	44
6093	Recement or re-bond implant/abutment supported fixed partial denture	77
6094	Abutment Supported Crown - titanium and titanium alloys	791
6095	Repair implant abutment, by report	186
6097	Abutment supported crown porcelain fused to titanium and titanium alloys	860
6098	implant supported retainer - porcelain fused to predominantly base alloys	770
6099	Implant supported retainer for FPD - porcelain fused to noble alloys	827
6100	Surgical removal of implant body	223
6101	Debridement of a peri-implant defect or defects surrounding a single implant and surface cleaning of the exposed implant surfaces, including flap entry and closure	65
6102	Debridement and osseous contouring of a peri-implant defect or defects surrounding a single implant and includes surface cleaning of the exposed implant surfaces, including flap entry and closure	143

6103	Bone graft for repair of peri-implant defect - does not including flap entry and closure. Placement of a barrier membrane or biologic materials to aid in osseous regeneration are reported separately	300
6104	Bone graft at time of implant placement - placement of a barrier membrane, or biologic materials to aid in osseous regeneration are reported separately.	300
6106	Guided tissue regeneration - resorbable barrier, per implant	262
6107	Guided tissue regeneration - non-resorbable barrier, per implant	333
6110	Implant/abutment supported removable denture for edentulous arch - maxillary	1677
6111	Implant/abutment supported removable denture for edentulous arch - mandibular	1677
6112	Implant/abutment supported removable denture for partially edentulous arch - maxillary	1556
6113	Implant/abutment supported removable denture for partially edentulous arch - mandibular	1556
6114	Implant/abutment supported fixed denture for edentulous arch - maxillary	2922
6115	Implant/abutment supported fixed denture for edentulous arch - mandibular	2922
6116	Implant/abutment supported fixed denture for partially edentulous arch - maxillary	2983
6117	Implant/abutment supported fixed denture for partially edentulous arch - mandibular	2983
6118	Implant/abutment supported interim fixed denture for edentulous arch - maxillary	425
6119	Implant/abutment supported interim fixed denture for edentulous arch - mandibular	425
6120	implant supported retainer - porcelain fused to titanium and titanium alloys	760
6121	Implant supported retainers for metal FPD - predominantly base alloys	669
6122	Implant supported retainers for metal FPD - noble alloys	746
6123	Implant supported retainer for metal FPD - titanium and titanium alloys	760
6190	Radiographic / Surgical Implant Index	165
6191	Semi-precision abutment – placement	618
6192	Semi-precision attachment – placement	464
6194	Abutment Support Retainer Crown for FPD titanium and titanium alloys	760
6195	Abutment supported retainer - porcelain fused to titanium and titanium alloys	791
6197	Replacement of restorative material used to close an access opening of a screw-retained implant supported prosthesis, per implant	92
6198	Remove interim implant component	59
6205	Pontic - indirect resin based composite	488
6210	Pontic - cast high noble metal	658
6211	Pontic - cast predominantly base metal	587
6212	Pontic - cast noble metal	615

6214	Pontic - Titanium and titanium alloys	612
6240	Pontic - porcelain fused to high noble metal	685
6241	Pontic - porcelain fused to predominantly base metal	642
6242	Pontic - porcelain fused to noble metal	670
6243	Pontic - porcelain fused to titanium and titanium alloys	670
6245	Pontic - porcelain/ ceramic	723
6250	Pontic - resin with high noble metal	693
6251	Pontic - resin with predominantly base metal	510
6252	Pontic - resin with noble metal	570
6253	Interim pontic - further treatment or completion of diagnosis necessary prior to final impression	240
6545	Retainer - cast metal for resin bonded fixed prosthesis	283
6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	321
6549	Resin retainer for resin bonded fixed prosthesis	241
6600	Inlay - porcelain/ceramic, two surfaces	661
6601	Inlay - porcelain/ceramic, three or more surfaces	678
6602	Inlay - cast high noble metal, two surfaces	486
6603	Inlay - cast high noble metal, three or more surfaces	530
6604	Inlay - cast predominantly base metal, two surfaces	481
6605	Inlay - cast predominantly base metal, three or more surfaces	491
6606	Inlay - cast noble medal, two surfaces	472
6607	Inlay - cast noble medal, three or more surfaces	541
6608	Onlay - porcelain/ceramic, two surfaces	671
6609	Onlay - porcelain/ceramic, three or more surfaces	698
6610	Onlay - cast high noble metal, two surfaces	531
6611	Onlay - cast high noble metal, three or more surfaces	633
6612	Onlay - cast predominantly base metal, two surfaces	504
6613	Onlay - cast predominantly base metal, three or more surfaces	613
6614	Onlay - cast noble medal, two surfaces	512
6615	Onlay - cast noble medal, three or more surfaces	619
6624	Inlay - Titanium	452
6634	Onlay - Titanium	507
6710	Crown - Indirect resin based composite	483
6720	Crown - resin with high noble metal	693
6721	Crown - resin with predominantly base metal	524
6722	Crown - resin with noble metal	580
6740	Crown - porcelain/ ceramic	747
6750	Crown - porcelain fused to high noble metal	724
6751	Crown - porcelain fused to predominantly base metal	663
6752	Crown - porcelain fused to noble metal	679
6753	Retainer crown – porcelain fused to titanium and titanium alloys	679
6780	Crown - 3/4 cast high noble metal	685
6781	Crown - 3/4 cast predominantly base metal	597
6782	Crown - 3/4 cast noble metal	644
6783	Crown - 3/4 cast porcelain/ ceramic	727
6784	Retainer crown $\frac{3}{4}$ – titanium and titanium alloys	644

6790	Crown - full cast high noble metal	673
6791	Crown - full cast predominantly base metal	589
6792	Crown - full cast noble metal	623
6793	Interim retainer crown - further treatment or completion of diagnosis necessary prior to final impression	226
6794	Crown titanium and titanium alloys	645
6920	Connector bar	440
6930	Recement or re-bond fixed partial denture	74
6940	Stress breaker	178
6950	Precision attachment	294
6980	Bridge repair, by report	117
7111	Coronal remnants, deciduous tooth	69
7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	79
7210	Extraction, erupted tooth requiring removal of bone/or sectioning of tooth and including elevation of mucoperiosteal flap if indicated	136
7220	Removal of impacted tooth - soft tissue	176
7230	Removal of impacted tooth - partially bony	216
7240	Removal of impacted tooth - completely bony	284
7241	Removal of impacted tooth - completely bony, with unusual surgical complications	318
7250	Removal of residual tooth roots (cutting proc)	146
7251	Coronectomy - intentional partial tooth removal, impacted teeth only	284
7260	Oral antral fistula closure	483
7261	Primary closure of a sinus perforation	503
7270	Tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth	260
7272	Tooth transplantation (includes reimplantation from one site to another and splinting and/or stabilization)	250
7280	Exposure of an unerupted tooth	282
7282	Mobilization of erupted or malpositioned tooth to aid eruption	256
7283	Placement of an attachment on an unerupted tooth, after its exposure, to aid in its eruption.	105
7285	Incisional biopsy of oral tissue - hard (bone, tooth)	215
7286	Incisional biopsy of oral tissue - (soft)	214
7287	Cytology sample collection	55
7288	Brush Biopsy	56
7290	Surgical repositioning of teeth	272
7291	Transseptal fiberotomy, by report	77
7292	Placement of temporary anchorage device (screw retained plate) requiring flap; includes device removal	2400
7293	Placement of temporary anchorage device requiring flap; includes device removal	1800
7294	Placement of temporary anchorage device without surgical flap; includes device removal	1500
7298	Removal of temporary anchorage device [screw retained plate], requiring flap	1260
7299	Removal of temporary anchorage device requiring flap	945

7300	Removal of temporary anchorage device without flap	788
7310	Alveoloplasty in conjunction with extractions - four or more teeth or tooth spaces, per quadrant	133
7311	Alveoloplasty in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	81
7320	Alveoloplasty not in conjunction with extractions, per quadrant	207
7321	Alveoloplasty without extractions	127
7340	Vestibuloplasty-ridge extension (secondary epithelialization)	654
7350	Vestibuloplasty-ridge extension (including soft tissue grafts, muscle reattachments, revision of soft tissue attachment, and management of hypertrophied and hyperplastic tissue)	1745
7450	Removal of benign odontogenic cyst or tumor - lesion diameter up to 1.25 cm	253
7451	Removal of benign odontogenic cyst or tumor - lesion diameter greater than 1.25 cm	611
7471	Removal of lateral exostosis (maxilla or mandible)	373
7472	Removal of torus palatinus	377
7473	Removal of torus mandibularis	387
7485	Reduction of osseous tuberosity	208
7510	Incision and drainage of abscess - intraoral soft tissue	99
7511	Incision and drainage - intraoral	99
7520	Incision and drainage of abscess - extraoral soft tissue	175
7521	Incision and drainage - extraoral	168
7880	Occlusal orthotic device, by report	486
7881	Occlusal orthotic device adjustment	49
7921	Collection and application of autologous blood concentrate product	163
7950	Osseous, osteoperiosteal/cartilage graft of the mandible or facial bones-autogenous or nonautogenous, by rpt	1200
7951	Sinus augmentation	1700
7952	Sinus augmentation via a vertical approach	1700
7953	Bone replacement graft - per site	300
7961	Buccal / labial frenectomy (frenulectomy)	204
7962	Lingual frenectomy (frenulectomy)	204
7963	Frenuloplasty	189
7970	Excision of hyperplastic tissue, per arch	238
7971	Excision of pericoronal gingiva	99
7972	Surgical reduction of fibrous tuberosity	231
7998	Intraoral placement of a fixation device not in conjunction with a fracture	2400
8010	Limited orthodontic treatment of the primary dentition	4300
8020	Limited orthodontic treatment of transitional dentition	4300
8030	Limited orthodontic treatment of adolescent dentition	4300
8040	Limited orthodontic treatment of the adult Dentition	4300
8070	Comprehensive orthodontic treatment - transitional dentition	4700
8080	Comprehensive orthodontic treatment – adolescent dentition	4700
8090	Comprehensive orthodontic treatment – adult dentition	4700
8210	Removable appliance therapy	601
8220	Fixed appliance therapy	601

8660	Pre-orthodontic treatment examination to monitor growth and development	39
8670	Periodic orthodontic treatment visit	78
8680	Orthodontic retention (removal of appliances, construction and placement of retainer(s))	307
8681	Removable Orthodontic retainer adjustment	44
8696	Repair of orthodontic appliance - maxillary	87
8697	Repair of orthodontic appliance - mandibular	87
8698	Recement or rebond fixed retainer - maxillary	44
8699	Recement or rebond fixed retainer - mandibular	44
8701	Repair of fixed retainer, includes reattachment - maxillary	44
8702	Repair of fixed retainer, includes reattachment - mandibular	44
9110	Palliative treatment of dental pain per visit	52
9120	Fixed partial denture sectioning	86
9210	Local anesthesia not in conjunction with operative or surgical procedures	19
9211	Regional block anesthesia	20
9212	Trigeminal division block anesthesia	18
9219	Evaluation for moderate sedation, deep sedation or general anesthesia	39
9222	Deep sedation/general anesthesia - first 15 minutes	119
9223	Deep sedation/general anesthesia - each subsequent 15 minute increment	119
9230	Analgesia, anxiolysis, inhalation of nitrous oxide	40
9239	Intravenous moderate (conscious) sedation/analgesia - first 15 minutes	100
9243	Intravenous moderate (conscious) sedation/analgesia - each subsequent 15 minute increment	100
9248	Non-intravenous moderate (conscious) sedation	150
9310	Consultation, (diagnostic service provided by dentist or physician other than practitioner providing treatment)	78
9410	House/ extended care facility call	57
9420	Hospital call	190
9430	Office visit for observation (during regular office hours) - no other services performed	40
9440	Office visit - after regular office hours	54
9610	Therapeutic drug injection, by report	38
9612	Therapeutic parenteral drugs, 2 or more, different medications	67
9613	Infiltration of sustained release therapeutic drug, per quadrant	200
9630	Other drugs and/or medicaments, dispensed in the office for home use	28
9910	Application of desensitizing medicaments	34
9911	Application of desensitizing resin for cervical and/or root surface, per tooth	33
9912	Pre-visit patient screening - document patient health status	3
9920	Behavior management, by report	38
9930	Treatment of complications (post surgical) - unusual circumstances, by report	60
9932	Cleaning and inspection of removable complete denture, maxillary	71

9933	Cleaning and inspection of a removable appliance, mandibular	71
9934	Cleaning and inspection of removable partial denture, maxillary	71
9935	Cleaning and inspection of removable partial denture, mandibular	71
9941	Fabrication of athletic mouth guards	96
9943	Occlusal guard adjustment	30
9944	Occlusal guard – hard appliance, full arch Removable dental appliance designed to minimize the effects of bruxism or other occlusal factors. Not to be reported for any type of sleep apnea, snoring or TMD appliances.	385
9945	Occlusal guard – soft appliance, full arch Removable dental appliance designed to minimize the effects of bruxism or other occlusal factors. Not to be reported for any type of sleep apnea, snoring or TMD appliances.	385
9946	Occlusal guard - hard appliance, partial arch	289
9947	Custom sleep apnea appliance fabrication and placement	1021
9948	Adjustment of custom sleep apnea appliance	78
9949	Repair of custom sleep apnea appliance	365
9950	Occlusion analysis -mounted case	119
9951	Occlusal adjustment - limited	63
9952	Occlusal adjustment - complete	277
9970	Enamel micro abrasion	38
9971	Odontoplasty - per tooth	38
9972	External bleaching - per arch	225
9973	External bleaching - per tooth	60
9974	Internal bleaching - per tooth	172
9975	External bleaching for home application, per arch; includes materials and fabrication of custom trays	112
9986	Missed appointment	25
9987	Cancelled appointment	25



MetLife

**PACIFIC DENTAL SERVICES
CENTRAL FLORIDA SPECIALISTS ONLY
ZIP CODES: 335, 336, 337 and 346**

Procedure Code	Procedure Code Description	2023 Fee Schedule
120	Periodic oral evaluation - established patient	30
140	Limited oral evaluation - problem focused	45
145	Oral evaluation for a patient under three years of age and counseling with primary caregiver	29
150	Comprehensive oral evaluation - new or established patient	42
160	Detailed and extensive oral evaluation - problem focused, by report	53
170	Re-evaluation - limited, problem focused (established patient; not post-operative visit)	41
171	Re-evaluation - post operative office visit	41
180	Comprehensive periodontal evaluation - new or established patient	48
190	Screening of a patient	10
191	Assessment of a patient	10
210	Intraoral - complete series (including bitewing images)	82
220	Intraoral - periapical first image	15
230	Intraoral - periapical each additional image	7
240	Intraoral - occlusal image	27
250	Extraoral - first image	51
251	Extra-oral posterior dental radiographic image	51
270	Bitewings - single image	16
272	Bitewings - two image	25
273	Bitewings - three images	33
274	Bitewings - four images	34
277	Vertical bitewings - 7 to 8 radiographic images	39
310	Sialography	102
320	Temporomandibular joint arthrogram, including injection	230
321	Other TMJ image, by report	116
322	Tomographic survey	234
330	Panoramic image	69
340	Cephalometric image	77
350	2D oral/facial photographic image obtained intra-orally or extra-orally	38
364	Cone beam CT capture and interpretation with limited field of view - less than one whole jaw	355
365	Cone beam CT capture and interpretation with limited field of view of one full dental - mandible	355
366	Cone beam CT capture and interpretation with field of view of one full dental arch - maxilla, with or without cranium	355

367	Cone beam CT capture and interpretation with field of view of both jaws, with or without cranium	355
368	Cone beam Ct capture and interpretation for TMJ series including two or more exposures	355
369	Maxillofacial MRI capture and interpretation	355
370	Maxillofacial ultrasound capture and interpretation	355
371	Sialoendoscopy capture and interpretation	355
380	Cone beam CT image capture with limited field of view - less than one whole jaw	355
381	Cone beam CT image capture with field of view of one full dental arch - mandible	355
382	Cone beam CT image capture with field of view of one full dental arch - maxilla, with or without cranium	355
383	Cone beam CT image capture with field of view of both jaws, with or without cranium	355
384	Cone beam CT capture images for TMJ series including two or more exposures	355
385	Maxillofacial MRI image capture	355
386	Maxillofacial ultrasound image capture	355
391	Interpretation of diagnostic Image capture performed by a practitioner not associated with interpretation and report	20
393	Treatment simulation using 3D image volume	31
394	Digital subtraction of two or more images or image volumes of the same modality	30
395	Fusion of two or more 3D image volumes of one or more modalities	30
415	Bacteriologic studies for determination of pathologic agents	41
417	Collection and preparation of saliva sample for laboratory diagnostic testing	35
422	Collection and preparation of genetic sample material for laboratory analysis and report	20
423	Genetic test for susceptibility to diseases -specimen analysis	20
425	Caries susceptibility tests	32
431	Adjunctive pre-diagnostic test	52
460	Pulp vitality tests	32
470	Diagnostic casts	69
601	Caries risk assessment and documentation, with a finding of low risk	10
602	Caries risk assessment and documentation, with a finding of moderate risk	10
603	Caries risk assessment and documentation, with a finding of high risk	10
1110	Prophylaxis - adult	60
1120	Prophylaxis - child	47
1206	Topical application of fluoride varnish	42
1208	Topical application of fluoride - excluding varnish	27
1310	Nutritional counseling for the control of dental disease	21
1320	Tobacco counseling for the control of oral disease	25
1330	Oral hygiene instructions	32
1351	Sealant - per tooth	28

1352	Preventive resin restoration in a moderate to high caries risk patient - permanent tooth	28
1353	Sealant repair - per tooth	7
1354	Application of caries arresting medicament application - per tooth	14
1355	Caries preventive medicament application – per tooth	14
1510	Space maintainer - fixed - unilateral per quadrant	268
1516	Space maintainer – fixed – bilateral, maxillary	372
1517	Space maintainer – fixed – bilateral, mandibular	372
1520	Space maintainer - removable - unilateral - per quadrant	263
1526	Space maintainer – removable – bilateral, maxillary	475
1527	Space maintainer – removable – bilateral, mandibular	475
1551	Recement or re-bond space maintainer - maxillary	40
1552	Recement or re-bond space maintainer - mandibular	40
1553	Recement or re-bond space maintainer - per quadrant	40
1575	Distal shoe space maintainer - fixed - unilateral per quadrant	268
2140	Amalgam - one surface, primary or permanent	76
2150	Amalgam - two surfaces, primary or permanent	93
2160	Amalgam - three surfaces, primary or permanent	119
2161	Amalgam - four or more surfaces, primary or permanent	143
2330	Resin-based composite - one surface, anterior	86
2331	Resin-based composite - two surfaces, anterior	110
2332	Resin-based composite - three surfaces, anterior	133
2335	Resin-based composite - four or more surfaces or involving incisal angle (anterior)	157
2390	Resin-based composite crown, anterior	175
2391	Resin-based composite - one surface, posterior	91
2392	Resin-based composite - two surfaces, posterior	123
2393	Resin-based composite - three surfaces, posterior	153
2394	Resin-based composite - four or more surfaces, posterior	160
2410	Gold foil - one surface	215
2420	Gold foil - two surfaces	297
2430	Gold foil - three surfaces	354
2510	Inlay - metallic - one surface	446
2520	Inlay - metallic - two surfaces	532
2530	Inlay - metallic - three or more surfaces	576
2542	Onlay - metallic - two surfaces	660
2543	Onlay - metallic - three surfaces	677
2544	Onlay - metallic - four or more surfaces	704
2610	Inlay - porcelain/ceramic - one surface	496
2620	Inlay - porcelain/ceramic - two surfaces	544
2630	Inlay - porcelain/ceramic - three or more surfaces	673
2642	Onlay - porcelain/ceramic - two surfaces	777
2643	Onlay - porcelain/ceramic - three surfaces	798
2644	Onlay - porcelain/ceramic - four or more surfaces	817
2650	Inlay - composite/resin one surface	374
2651	Inlay - composite/resin two surfaces	449

2652	Inlay - composite/resin - three or more surfaces	501
2662	Onlay - composite/resin - two surfaces	657
2663	Onlay - composite/resin - three surfaces	628
2664	Onlay - composite/resin - four or more surfaces	652
2710	Crown - resin-based composite (indirect)	276
2712	Crown - 3/4 resin-based composite (indirect)	269
2720	Crown - resin with high noble metal	742
2721	Crown - resin with predominantly base metal	548
2722	Crown - resin with noble metal	628
2740	Crown - porcelain/ceramic substrate	770
2750	Crown - porcelain fused to high noble metal	767
2751	Crown - porcelain fused to predominantly base metal	703
2752	Crown - porcelain fused to noble metal	720
2753	Crown - porcelain fused to titanium and titanium alloys	767
2780	Crown - 3/4 cast high noble metal	762
2781	Crown - 3/4 cast predominately base metal	685
2782	Crown - 3/4 cast noble metal	704
2783	Crown - 3/4 cast porcelain/ceramic	785
2790	Crown - full cast high noble metal	710
2791	Crown - full cast predominantly base metal	631
2792	Crown - full cast noble metal	655
2794	Crown - Titanium and titanium alloys	690
2799	Interim crown - further treatment or completion of diagnosis necessary prior to final impression	251
2910	Recement or re-bond inlay, onlay, veneer or partial coverage restoration	47
2915	Recement or re-bond indirectly fabricated or prefabricated post and core	47
2920	Recement or re-bond crown	47
2921	Reattachment of tooth fragment, incisal edge or cusp	66
2928	Prefabricated porcelain/ceramic crown – permanent tooth	385
2929	Prefabricated Porcelain/ceramic crown - primary tooth	159
2930	Prefabricated stainless steel crown, primary tooth	140
2931	Prefabricated stainless steel crown, permanent tooth	145
2932	Prefabricated resin crown	154
2933	Prefabricated stainless steel crown with resin window	207
2934	Prefabricated esthetic coated stainless steel crown - primary tooth	145
2940	Protective restoration	41
2941	Interim therapeutic restoration - primary dentition	41
2949	Restorative foundation for an indirect restoration	60
2950	Core buildup, including any pins	119
2951	Pin retention - per tooth, in addition to restoration	32
2952	Cast post and core in addition to crown	271
2953	Cast post and core each additional - same tooth	29
2954	Prefabricated post and core in addition to crown	177
2955	Post removal	124
2957	Each additional prefabricated post - same tooth	16

2960	Labial veneer (resin laminate) - direct	308
2961	Labial veneer (resin laminate) - indirect	467
2962	Labial veneer (porcelain laminate) - indirect	618
2971	Construct new crown - additional procedure	125
2975	Coping	283
2980	Crown repair, by report	123
2981	Inlay repair necessitated by restorative material failure	123
2982	Onlay repair necessitated by restorative material failure	123
2983	Veneer repair necessitated by restorative material failure	119
2990	Resin infiltration of incipient smooth surface lesions	28
3110	Pulp cap - direct (excluding final restoration)	41
3120	Pulp cap - indirect (excluding final restoration)	41
3220	Therapeutic pulpotomy (excluding final restoration)	83
3221	Pulpal debridement, primary and permanent teeth	50
3222	partial pulpotomy for apexogenesis - permanent tooth with incomplete root development	83
3230	Pulpal therapy - anterior, primary tooth	195
3240	Pulpal therapy - posterior, primary tooth	232
3310	Endodontic therapy, anterior tooth (excluding final restoration)	535
3320	Endodontic therapy, premolar tooth (excluding final restoration)	618
3330	Endodontic therapy, molar tooth (excluding final restoration)	777
3331	Treatment of root canal obstruction; non-surgical access	135
3332	Incomplete endodontic therapy; inoperable, unrestorable or fractured tooth	221
3333	Internal root repair of perforation defects	114
3346	Retreatment of previous root canal therapy – anterior	664
3347	Retreatment of previous root canal therapy – premolar	801
3348	Retreatment of previous root canal therapy - molar	921
3351	Apexification/recalcification -initial visit (apical closure/calcific repair of perforations, root resorption, wtc)	202
3352	Apexification/recalcification -interim	104
3353	Apexification/recalcification - final visit	297
3355	Pulpal regeneration - initial visit	104
3356	Pulpal regeneration - interim medication replacement	52
3357	Pulpal regeneration - completion of treatment	104
3410	Apicoectomy/periradicular surgery - anterior	406
3421	Apicoectomy/periarticular surgery - bicuspid (1st Root)	471
3425	Apicoectomy/periarticular surgery - molar (1st Root)	539
3426	Apicoectomy/periarticular surgery (each add'l root)	204
3428	Bone graft in conjunction with periarticular surgery - per tooth, single site	286
3429	Bone graft in conjunction with periarticular surgery - each additional contiguous tooth in the same surgical site	214
3430	Retrograde filling - per root	125
3431	Biologic materials to aid in soft and osseous tissue regeneration in conjunction with periarticular surgery	177
3432	Guided tissue regeneration, resorbable barrier, per site, in conjunction with periarticular surgery	281

3450	Root amputation - per root	307
3460	Endodontic endosseous implant	170
3470	Intentional reimplantation (including necessary splinting)	400
3471	Surgical repair of root resorption - anterior	305
3472	Surgical repair of root resorption – premolar	353
3473	Surgical repair of root resorption – molar	404
3501	Surgical exposure of root surface without apicoectomy or repair of root resorption – anterior	278
3502	Surgical exposure of root surface without apicoectomy or repair of root resorption – premolar	278
3503	Surgical exposure of root surface without apicoectomy or repair of root resorption – molar	278
3910	Surgical procedure for isolation of tooth with rubber dam	129
3911	Intraorifice barrier - not to be used as a final restoration	30
3920	Hemisection (including any root removal), not including root canal therapy	265
3921	Decoronation or submergence of an erupted tooth	209
3950	Canal preparation and fitting of preformed dowel or post	100
4210	Gingivectomy or gingivoplasty - four or more contiguous teeth or bounded teeth spaces per quadrant	365
4211	Gingivectomy or gingivoplasty - one to three teeth, per quadrant	178
4212	Gingivectomy or gingivoplasty to allow access for restorative procedure, per tooth	55
4230	Anatomical crown exposure - 4 or more teeth	605
4231	Anatomical crown exposure - 1 to 3 teeth	351
4240	Gingival flap procedure, including root planing – four or more contiguous teeth or tooth bound spaces per quadrant	376
4241	Gingival flap procedure, including root planing – one to three contiguous teeth or tooth bound spaces per quadrant	232
4245	Apically positioned flap	198
4249	Clinical crown lengthening - hard tissue	584
4260	Osseous surgery (incl. flap entry & closure) - four or more contiguous teeth or bounded teeth spaces per quadrant	896
4261	Osseous surgery (incl. flap entry & closure) - one to three teeth per quadrant	513
4263	Bone replacement graft - retained natural tooth - first site in quadrant	286
4264	Bone replacement graft - retained natural tooth - each add'l tooth in quadrant	214
4265	Biologic materials to aid in soft and osseous tissue regeneration	183
4266	Guided tissue regeneration, natural teeth – resorbable barrier, per site	283
4267	Guided tissue regeneration, natural teeth – non-resorbable barrier, per site	360
4268	Surgical revision procedure, per tooth	91
4270	Pedicle soft tissue graft procedure	418

4273	Autogenous connective tissue graft procedure (including donor and recipient surgical sites) first tooth, implant or edentulous tooth position in graft	708
4274	Mesial/distal wedge procedure, single tooth (when not performed in conjunction with surgical procedures in the same anatomical area)	225
4275	Non-autogenous connective tissue graft (including recipient site and donor material) first tooth, implant, or edentulous tooth position in graft	675
4276	Combined connective tissue and pedicle graft, per tooth	692
4277	Free soft tissue graft procedure (including recipient and donor surgical sites) first tooth, implant, or edentulous tooth position in graft	569
4278	Free soft tissue graft procedure (including recipient and donor surgical sites) each additional contiguous tooth, implant, or edentulous tooth position in same graft site	294
4283	Autogenous connective tissue graft procedure (including donor and recipient surgical sites) - each additional contiguous tooth, implant or edentulous tooth position in same graft site	354
4285	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	338
4322	Splint intra-coronal; natural teeth or prosthetic crowns	182
4323	Splint extra-coronal; natural teeth or prosthetic crowns	143
4341	Periodontal scaling and root planning - four or more contiguous teeth or bounded teeth spaces per quadrant	132
4342	Periodontal scaling and root planning - one to three teeth, per quadrant	86
4346	Scaling in presence of generalized moderate or severe gingival inflammation - full mouth, after oral evaluation	60
4355	Full mouth debridement to enable a comprehensive periodontal evaluation and diagnosis on a subsequent visit	68
4381	Delivery of Antimicrobial Agents	66
4910	Periodontal maintenance	81
4920	Unscheduled dressing change, other than treating dentist	40
4921	Gingival irrigation with a medicinal agent – per quadrant	15
5110	Complete denture, maxillary (upper)	944
5120	Complete denture, mandibular (lower)	944
5130	Immediate denture, maxillary (upper)	1032
5140	Immediate denture, mandibular (lower)	1032
5211	Maxillary partial denture - resin base (incl. clasps, rests, & teeth)	721
5212	Mandibular partial denture - resin base (incl. clasps, rests, & teeth)	721
5213	Maxillary (Upper) partial denture -cast metal framework with resin denture bases (including retentive/clasping materials, rests and teeth)	1093
5214	Mandibular (Lower) partial denture -cast metal framework with resin denture bases (including retentive/clasping materials, rests and teeth)	1093

5221	Immediate maxillary partial denture - resin base (including retentive/clasping materials, rests and teeth)	721
5222	Immediate mandibular partial denture - resin base (including retentive/clasping materials, rests and teeth)	721
5223	Immediate maxillary partial denture - cast base (including retentive/clasping materials, rests and teeth)	1093
5224	Immediate mandibular partial denture - cast base (including retentive/clasping materials, rests and teeth)	1093
5225	Maxillary (Upper) Partial Denture	855
5226	Mandibular (Lower) Partial Denture	855
5227	Immediate maxillary partial denture - flexible base (including any clasps, rests and teeth)	668
5228	Immediate mandibular partial denture - flexible base (including any clasps, rests and teeth)	668
5282	Removable unilateral partial denture – one piece cast metal (including clasps and teeth), maxillary	406
5283	Removable unilateral partial denture – one piece cast metal (including clasps and teeth), mandibular	406
5284	Removable unilateral partial denture – one piece flexible base (including clasps and teeth), per quadrant	203
5286	Removable unilateral partial denture - one piece resin (including retentive/clasping materials, rests, and teeth) - per quadrant	203
5410	Adjust complete denture - upper	42
5411	Adjust complete denture - lower	42
5421	Adjust partial denture - upper	42
5422	Adjust partial denture - lower	42
5511	Repair broken complete denture base, mandibular	136
5512	Repair broken complete denture base, maxillary	136
5520	Replace missing/broken teeth complete denture per tooth	117
5611	Repair resin denture base, mandibular	103
5612	Repair resin denture base, maxillary	103
5621	Repair cast partial framework, mandibular	116
5622	Repair cast partial framework, maxillary	116
5630	Repair or replace broken retentive clasping materials - per tooth	107
5640	Replace broken teeth - per tooth	117
5650	Add tooth to existing partial denture	125
5660	Add clasp to existing partial denture	159
5670	Replace all teeth and acrylic on cast metal framework (maxillary)	314
5671	Replace all teeth and acrylic on cast metal framework (mandibular)	321
5710	Rebase complete upper denture	357
5711	Rebase complete lower denture	349
5720	Rebase upper partial denture	319
5721	Rebase lower partial denture	319
5725	Rebase hybrid prosthesis- Replacing the base material connected to the framework	331
5730	Reline complete upper denture (chairside)	202
5731	Reline complete lower denture (chairside)	202
5740	Reline upper partial denture (chairside)	162

5741	Reline lower partial denture (chairside)	162
5750	Reline upper complete denture (laboratory)	300
5751	Reline lower complete denture (laboratory)	300
5760	Reline upper partial denture (laboratory)	261
5761	Reline lower partial denture (laboratory)	261
5765	Soft liner for complete or partial removable denture - indirect	278
5810	Interim complete denture (upper)	459
5811	Interim complete denture (lower)	459
5820	Interim partial denture (upper)	363
5821	Interim partial denture (lower)	352
5850	Tissue conditioning, upper	95
5851	Tissue conditioning, lower	95
5862	Precision attachment by report	318
5863	Overdenture - complete maxillary	1211
5864	Overdenture - partial maxillary	1131
5865	Overdenture - complete mandibular	1223
5866	Overdenture - partial mandibular	1131
5867	Replacement of replaceable part of semi-precision or precision attachment, per attachment	131
5875	Modification of removable prosthesis following implant surgery	156
6010	Surgical placement of implant body: endosteal implant	1503
6011	Second stage implant surgery	157
6012	Surgical placement of interim implant body for transitional prosthesis: endosteal implant	1460
6013	Surgical placement of mini implant	1488
6040	Surgical placement: eposteal implant	2519
6050	Surgical placement: transosteal implant	3079
6051	Interim implant abutment placement	256
6055	Connecting bar-implant or abutment supported	657
6056	Prefabricated abutment	517
6057	Custom abutment	667
6058	Abutment supported porcelain/ceramic crown	990
6059	Abutment supported porcelain fused to metal crown (hi noble metal)	937
6060	Abutment supported porcelain fused to metal crown (pred. base metal)	842
6061	Abutment supported porcelain fused to metal crown (noble metal)	901
6062	Abutment supported cast metal crown (hi noble metal)	903
6063	Abutment supported cast metal crown (pred. base metal)	782
6064	Abutment supported cast metal crown (noble metal)	843
6065	Implant supported porcelain/ceramic crown	964
6066	Implant supported crown - porcelain fused to high noble alloys	929
6067	Implant supported crown - high noble alloys	910
6068	Abutment supported retainer for porcelain/ceramic FPD	962
6069	Abutment supported retainer for porcelain fused to metal FPD(hi noble metal)	918

6070	Abutment supported retainer for porcelain fused to metal FPD (predominantly base metal)	832
6071	Abutment supported retainer for porcelain fused to metal FPD (noble metal)	893
6072	Abutment supported retainer for cast metal FPD (high noble metal)	879
6073	Abutment supported retainer for cast metal FPD (predominantly base metal)	723
6074	Abutment supported retainer for cast metal FPD (noble metal)	806
6075	Implant supported retainer for ceramic FPD	918
6076	Implant supported retainer for FPD - porcelain fused to high noble alloys	920
6077	Implant supported retainer for metal FPD - alloys	854
6080	Implant maintenance procedures, including: removal of prosthesis, cleansing of prosthesis and abutments, reinsertion of prosthesis	73
6082	Implant supported crown - porcelain fused to predominantly base alloys	842
6083	Implant supported crown - porcelain fused to noble alloys	901
6084	Implant supported crown - porcelain fused to titanium and titanium alloys	854
6085	Interim implant crown	240
6086	Implant supported crown - predominantly base alloys	782
6087	Implant supported crown - noble alloys	843
6088	Implant supported crown - titanium and titanium alloys	854
6090	Repair implant supported prosthesis, by report	178
6091	Replace semi-precision or precision attachment	302
6092	Recementor re-bond implant/abutment supported supported crown	48
6093	Recement or re-bond implant/abutment supported fixed partial denture	83
6094	Abutment Supported Crown - titanium and titanium alloys	854
6095	Repair implant abutment, by report	201
6097	Abutment supported crown porcelain fused to titanium and titanium alloys	929
6098	implant supported retainer - porcelain fused to predominantly base alloys	832
6099	Implant supported retainer for FPD - porcelain fused to noble alloys	893
6100	Surgical removal of implant body	241
6101	Debridement of a peri-implant defect or defects surrounding a single implant and surface cleaning of the exposed implant surfaces, including flap entry and closure	70
6102	Debridement and osseous contouring of a peri-implant defect or defects surrounding a single implant and includes surface cleaning of the exposed implant surfaces, including flap entry and closure	154
6103	Bone graft for repair of peri-implant defect - does not including flap entry and closure. Placement of a barrier membrane or biologic materials to aid in osseous regeneration are reported separately	324

6104	Bone graft at time of implant placement - placement of a barrier membrane, or biologic materials to aid in osseous regeneration are reported separately.	324
6106	Guided tissue regeneration - resorbable barrier, per implant	283
6107	Guided tissue regeneration - non-resorbable barrier, per implant	360
6110	Implant/abutment supported removable denture for edentulous arch - maxillary	1811
6111	Implant/abutment supported removable denture for edentulous arch - mandibular	1811
6112	Implant/abutment supported removable denture for partially edentulous arch - maxillary	1680
6113	Implant/abutment supported removable denture for partially edentulous arch - mandibular	1680
6114	Implant/abutment supported fixed denture for edentulous arch - maxillary	3156
6115	Implant/abutment supported fixed denture for edentulous arch - mandibular	3156
6116	Implant/abutment supported fixed denture for partially edentulous arch - maxillary	3222
6117	Implant/abutment supported fixed denture for partially edentulous arch - mandibular	3222
6118	Implant/abutment supported interim fixed denture for edentulous arch - maxillary	459
6119	Implant/abutment supported interim fixed denture for edentulous arch - mandibular	459
6120	implant supported retainer - porcelain fused to titanium and titanium alloys	821
6121	Implant supported retaine for metal FPD - predominantly base alloys	723
6122	Implant supported retaine for metal FPD - noble alloys	806
6123	Implant supported retainer for metal FPD - titanium and titanium alloys	821
6190	Radiographic / Surgical Implant Index	178
6191	Semi-precision abutment – placement	667
6192	Semi-precision attachment – placement	501
6194	Abutment Support Retainer Crown for FPD titanium and titanium alloys	821
6195	Abutment supported retainer - porcelain fused to titanium and titanium alloys	854
6197	Replacement of restorative material used to close an access opening of a screw-retained implant supported prosthesis, per implant	91
6198	Remove interim implant component	56
6205	Pontic - indirect resin based composite	527
6210	Pontic - cast high noble metal	711
6211	Pontic - cast predominantly base metal	634
6212	Pontic - cast noble metal	664
6214	Pontic - Titanium and titanium alloys	661
6240	Pontic - porcelain fused to high noble metal	740
6241	Pontic - porcelain fused to predominantly base metal	693
6242	Pontic - porcelain fused to noble metal	724

6243	Pontic - porcelain fused to titanium and titanium alloys	724
6245	Pontic - porcelain/ ceramic	781
6250	Pontic - resin with high noble metal	748
6251	Pontic - resin with predominantly base metal	551
6252	Pontic - resin with noble metal	616
6253	Interim pontic - further treatment or completion of diagnosis necessary prior to final impression	259
6545	Retainer - cast metal for resin bonded fixed prosthesis	306
6548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	347
6549	Resin retainer for resin bonded fixed prosthesis	260
6600	Inlay - porcelain/ceramic, two surfaces	708
6601	Inlay - porcelain/ceramic, three or more surfaces	732
6602	Inlay - cast high noble metal, two surfaces	525
6603	Inlay - cast high noble metal, three or more surfaces	572
6604	Inlay - cast predominantly base metal, two surfaces	495
6605	Inlay - cast predominantly base metal, three or more surfaces	491
6606	Inlay - cast noble medal, two surfaces	510
6607	Inlay - cast noble medal, three or more surfaces	584
6608	Onlay - porcelain/ceramic, two surfaces	725
6609	Onlay - porcelain/ceramic, three or more surfaces	754
6610	Onlay - cast high noble metal, two surfaces	573
6611	Onlay - cast high noble metal, three or more surfaces	684
6612	Onlay - cast predominantly base metal, two surfaces	544
6613	Onlay - cast predominantly base metal, three or more surfaces	662
6614	Onlay - cast noble medal, two surfaces	553
6615	Onlay - cast noble medal, three or more surfaces	619
6624	Inlay - Titanium	488
6634	Onlay - Titanium	548
6710	Crown - Indirect resin based composite	522
6720	Crown - resin with high noble metal	748
6721	Crown - resin with predominantly base metal	566
6722	Crown - resin with noble metal	626
6740	Crown - porcelain/ ceramic	807
6750	Crown - porcelain fused to high noble metal	782
6751	Crown - porcelain fused to predominantly base metal	716
6752	Crown - porcelain fused to noble metal	733
6753	Retainer crown – porcelain fused to titanium and titanium alloys	733
6780	Crown - 3/4 cast high noble metal	740
6781	Crown - 3/4 cast predominantly base metal	645
6782	Crown - 3/4 cast noble metal	696
6783	Crown - 3/4 cast porcelain/ ceramic	785
6784	Retainer crown $\frac{3}{4}$ – titanium and titanium alloys	696
6790	Crown - full cast high noble metal	727
6791	Crown - full cast predominantly base metal	636
6792	Crown - full cast noble metal	673
6793	Interim retainer crown - further treatment or completion of diagnosis necessary prior to final impression	244

6794	Crown titanium and titanium alloys	697
6920	Connector bar	475
6930	Recement or re-bond fixed partial denture	80
6940	Stress breaker	192
6950	Precision attachment	318
6980	Bridge repair, by report	126
7111	Coronal remnants, deciduous tooth	75
7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	81
7210	Extraction, erupted tooth requiring removal of bone/or sectioning of tooth and including elevation of mucoperiosteal flap if indicated	166
7220	Removal of impacted tooth - soft tissue	208
7230	Removal of impacted tooth - partially bony	267
7240	Removal of impacted tooth - completely bony	314
7241	Removal of impacted tooth - completely bony, with unusual surgical complications	343
7250	Removal of residual tooth roots (cutting proc)	191
7251	Coronectomy - intentional partial tooth removal, impacted teeth only	307
7260	Oral antral fistula closure	522
7261	Primary closure of a sinus perforation	543
7270	Tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth	281
7272	Tooth transplantation (includes reimplantation from one site to another and splinting and/or stabilization)	270
7280	Exposure of an unerupted tooth	305
7282	Mobilization of erupted or malposistioned tooth to aid eruption	276
7283	Placement of an attachment on an unerupted tooth, after its exposure, to aid in its eruption.	113
7285	Incisional biopsy of oral tissue - hard (bone, tooth)	232
7286	Incisional biopsy of oral tissue - (soft)	231
7287	Cytology sample collection	59
7288	Brush Biopsy	60
7290	Surgical repositioning of teeth	294
7291	Transseptal fiberotomy, by report	83
7292	Placement of temporary anchorage device (screw retained plate) requiring flap; includes device removal	2592
7293	Placement of temporary anchorage device requiring flap; includes device removal	1944
7294	Placement of temporary anchorage device without surgical flap; includes device removal	1620
7298	Removal of temporary anchorage device [screw retained plate], requiring flap	1200
7299	Removal of temporary anchorage device requiring flap	900
7300	Removal of temporary anchorage device without flap	750
7310	Alveoloplasty in conjunction with extractions - four or more teeth or tooth spaces, per quadrant	144
7311	Alveoloplasty in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	87

7320	Alveoloplasty not in conjunction with extractions, per quadrant	224
7321	Alveoloplasty without extractions	137
7340	Vestibuloplasty-ridge extension (secondary epithelialization)	706
7350	Vestibuloplasty-ridge extension (including soft tissue grafts, muscle reattachments, revision of soft tissue attachment, and management of hypertrophied and hyperplastic tissue)	1745
7450	Removal of benign odontogenic cyst or tumor - lesion diameter up to 1.25 cm	273
7451	Removal of benign odontogenic cyst or tumor - lesion diameter greater than 1.25 cm	660
7471	Removal of lateral exostosis (maxilla or mandible)	403
7472	Removal of torus palatinus	407
7473	Removal of torus mandibularis	418
7485	Reduction of osseous tuberosity	225
7510	Incision and drainage of abscess - intraoral soft tissue	107
7511	Incision and drainage - intraoral	107
7520	Incision and drainage of abscess - extraoral soft tissue	189
7521	Incision and drainage - extraoral	181
7880	Occlusal orthotic device, by report	525
7881	Occlusal orthotic device adjustment	53
7921	Collection and application of autologous blood concentrate product	176
7950	Osseous, osteoperiosteal/cartilage graft of the mandible or facial bones-autogenous or nonautogenous, by rpt	1296
7951	Sinus augmentation	1836
7952	Sinus augmentation via a vertical approach	1836
7953	Bone replacement graft - per site	324
7961	Buccal / labial frenectomy (frenulectomy)	194
7962	Lingual frenectomy (frenulectomy)	194
7963	Frenuloplasty	204
7970	Excision of hyperplastic tissue, per arch	257
7971	Excision of pericoronal gingiva	107
7972	Surgical reduction of fibrous tuberosity	249
7998	Intraoral placement of a fixation device not in conjunction with a fracture	2592
8010	Limited orthodontic treatment of the primary dentition	4300
8020	Limited orthodontic treatment of transitional dentition	4300
8030	Limited orthodontic treatment of adolescent dentition	4300
8040	Limited orthodontic treatment of the adult Dentition	4300
8070	Comprehensive orthodontic treatment - transitional dentition	4700
8080	Comprehensive orthodontic treatment – adolescent dentition	4700
8090	Comprehensive orthodontic treatment – adult dentition	4700
8210	Removable appliance therapy	572
8220	Fixed appliance therapy	572
8660	Pre-orthodontic treatment examination to monitor growth and development	37
8670	Periodic orthodontic treatment visit	74
8680	Orthodontic retention (removal of appliances, construction and placement of retainer(s))	292

8681	Removable Orthodontic retainer adjustment	42
8696	Repair of orthodontic appliance - maxillary	83
8697	Repair of orthodontic appliance - mandibular	83
8698	Recement or rebond fixed retainer - maxillary	42
8699	Recement or rebond fixed retainer - mandibular	42
8701	Repair of fixed retainer, includes reattachment - maxillary	42
8702	Repair of fixed retainer, includes reattachment - mandibular	42
9110	Palliative treatment of dental pain per visit	46
9120	Fixed partial denture sectioning	82
9210	Local anesthesia not in conjunction with operative or surgical procedures	18
9211	Regional block anesthesia	19
9212	Trigeminal division block anesthesia	17
9219	Evaluation for moderate sedation, deep sedation or general anesthesia	37
9222	Deep sedation/general anesthesia - first 15 minutes	129
9223	Deep sedation/general anesthesia - each subsequent 15 minute increment	129
9230	Analgesia, anxiolysis, inhalation of nitrous oxide	43
9239	Intravenous moderate (conscious) sedation/analgesia - first 15 minutes	108
9243	Intravenous moderate (conscious) sedation/analgesia - each subsequent 15 minute increment	108
9248	Non-intravenous moderate (conscious) sedation	162
9310	Consultation, (diagnostic service provided by dentist or physician other than practitioner providing treatment)	76
9410	House/ extended care facility call	54
9420	Hospital call	181
9430	Office visit for observation (during regular office hours) - no other services performed	38
9440	Office visit - after regular office hours	51
9610	Therapeutic drug injection, by report	38
9612	Therapeutic parenteral drugs, 2 or more, different medications	64
9613	Infiltration of sustained release therapeutic drug, per quadrant	200
9630	Other drugs and/or medicaments, dispensed in the office for home use	27
9910	Application of desensitizing medicaments	32
9911	Application of desensitizing resin for cervical and/or root surface, per tooth	31
9912	Pre-visit patient screening - document patient health status	3
9920	Behavior management, by report	36
9930	Treatment of complications (post surgical) - unusual circumstances, by report	57
9932	Cleaning and inspection of removable complete denture, maxillary	68
9933	Cleaning and inspection of a removable appliance, mandibular	68
9934	Cleaning and inspection of removable partial denture, maxillary	68
9935	Cleaning and inspection of removable partial denture, mandibular	68
9941	Fabrication of athletic mouth guards	91

9943	Occlusal guard adjustment	29
9944	Occlusal guard – hard appliance, full arch Removable dental appliance designed to minimize the effects of bruxism or other occlusal factors. Not to be reported for any type of sleep apnea, snoring or TMD appliances.	367
9945	Occlusal guard – soft appliance, full arch Removable dental appliance designed to minimize the effects of bruxism or other occlusal factors. Not to be reported for any type of sleep apnea, snoring or TMD appliances.	367
9946	Occlusal guard - hard appliance, partial arch	275
9947	Custom sleep apnea appliance fabrication and placement	972
9948	Adjustment of custom sleep apnea appliance	74
9949	Repair of custom sleep apnea appliance	348
9950	Occlusion analysis -mounted case	113
9951	Occlusal adjustment - limited	60
9952	Occlusal adjustment - complete	264
9970	Enamel micro abrasion	36
9971	Odontoplasty - per tooth	36
9972	External bleaching - per arch	214
9973	External bleaching - per tooth	57
9974	Internal bleaching - per tooth	164
9975	External bleaching for home application, per arch; includes materials and fabrication of custom trays	107
9986	Missed appointment	25
9987	Cancelled appointment	25