

# 2023 FEE SCHEDULE

## Diagnostic Services (Performed by a General Dentist)

| ADA Code | Procedure Description   | Non-Member | SmilePlus Member | SAVE        |
|----------|---|------------|------------------|-------------|
| D0120    | Periodic oral exam  | \$59       | \$0              | <b>100%</b> |
| D0140    | Limited oral exam, problem-focused or emergency exam                    | \$87       | \$25             | <b>71%</b>  |
| D0150    | Comprehensive oral evaluation, new or established patient               | \$102      | \$0              | <b>100%</b> |
| D0160    | Detailed and extensive evaluation                                       | \$178      | \$90             | <b>49%</b>  |
| D0170    | Re-evaluation limited, problem-focused exam                             | \$86       | \$40             | <b>53%</b>  |
| D0180    | Comprehensive periodontal exam  | \$114      | \$55             | <b>52%</b>  |
| D0191    | Assessment of patient   | \$92       | \$15             | <b>84%</b>  |
| D0210    | Intraoral x-rays, complete series including bitewings, 1x every 3 years | \$155      | \$0              | <b>100%</b> |
| D0220    | Intraoral x-ray, periapical, first film                                 | \$35       | \$19             | <b>46%</b>  |
| D0230    | Intraoral x-ray, periapical, each additional film                       | \$30       | \$17             | <b>43%</b>  |
| D0240    | Intraoral x-ray, occlusal film  | \$48       | \$18             | <b>63%</b>  |
| D0250    | Extraoral x-ray, first film   | \$76       | \$24             | <b>68%</b>  |
| D0260    | Extraoral x-ray, each additional film                                   | \$66       | \$22             | <b>67%</b>  |
| D0270    | Bitewing x-ray, single film   | \$35       | \$18             | <b>49%</b>  |
| D0272    | Bitewing x-rays, two films  | \$54       | \$20             | <b>63%</b>  |
| D0273    | Bitewing x-rays, three films  | \$64       | \$32             | <b>50%</b>  |
| D0274    | Bitewing x-rays, four films   | \$77       | \$38             | <b>51%</b>  |
| D0277    | Vertical bitewing x-rays, 7 to 8 films                                  | \$116      | \$45             | <b>61%</b>  |
| D0290    | Posterior/Anterior or lateral skull and facial x-ray film               | \$152      | \$80             | <b>47%</b>  |
| D0330    | Panoramic x-ray film  | \$131      | \$45             | <b>66%</b>  |
| D0350    | Oral/Facial photographic images   | \$83       | \$41             | <b>51%</b>  |
| D0416    | Viral culture   | \$187      | \$89             | <b>52%</b>  |
| D0421    | Genetic test for susceptibility to oral diseases                        | \$146      | \$74             | <b>49%</b>  |
| D0425    | Caries susceptibility test  | \$99       | \$68             | <b>31%</b>  |
| D0460    | Pulp vitality test  | \$66       | \$37             | <b>44%</b>  |
| D0470    | Diagnostic cast   | \$138      | \$68             | <b>51%</b>  |

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## Preventive Services (Performed by a General Dentist)

| ADA Code | Procedure Description  | Non-Member | SmilePlus Member | SAVE |
|----------|--|------------|------------------|------|
| D1110    | Adult cleaning, above the gum line <i>(Two free per year with SmilePlus Silver)</i>    | \$107      | \$107            | 0%   |
| D1120    | Child cleaning, above the gum line <i>(Or two free per year with SmilePlus Silver)</i> | \$83       | \$83             | 0%   |
| D1206    | Topical application of fluoride <i>(One free per year with SmilePlus Gold)</i>         | \$54       | \$54             | 0%   |
| D1351    | Sealant, per tooth   | \$69       | \$26             | 62%  |
| D1510    | Space maintainer, fixed, unilateral  | \$361      | \$210            | 42%  |
| D1515    | Space maintainer, fixed, bilateral   | \$478      | \$315            | 34%  |
| D1550    | Recementation of space maintainer  | \$99       | \$58             | 41%  |
| D1555    | Removal of space maintainer  | \$97       | \$58             | 40%  |

## Restorative Services (Performed by a General Dentist)

| ADA Code | Procedure Description                               | Non-Member | SmilePlus Member | SAVE |
|----------|---|------------|------------------|------|
| D2330    | Resin/Composite filling, one surface, anterior      | \$197      | \$83             | 58%  |
| D2331    | Resin/Composite filling, two surfaces, anterior     | \$239      | \$142            | 41%  |
| D2332    | Resin/Composite filling, three surfaces, anterior   | \$294      | \$194            | 34%  |
| D2335    | Resin/Composite filling, four + surfaces, anterior  | \$367      | \$236            | 36%  |
| D2390    | Resin/Composite crown, anterior                     | \$543      | \$341            | 37%  |
| D2391    | Resin/Composite filling, one surface, posterior     | \$212      | \$131            | 38%  |
| D2392    | Resin/Composite filling, two surfaces, posterior    | \$271      | \$179            | 34%  |
| D2393    | Resin/Composite filling, three surfaces, posterior  | \$333      | \$226            | 32%  |
| D2394    | Resin/Composite filling, four + surfaces, posterior | \$398      | \$263            | 34%  |
| D2510    | Inlay, metallic, one surface                        | \$1,060    | \$578            | 45%  |
| D2520    | Inlay, metallic, two surfaces                       | \$1,116    | \$630            | 44%  |
| D2530    | Inlay, metallic, three surfaces                     | \$1,165    | \$709            | 39%  |
| D2542    | Onlay, metallic, two surfaces                       | \$1,177    | \$735            | 38%  |
| D2543    | Onlay, metallic, three surfaces                     | \$1,220    | \$788            | 35%  |

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| Restorative Services (Performed by a General Dentist) |  |            |                  |            |
|---|--|------------|------------------|------------|
| ADA Code  | Procedure Description                              | Non-Member | SmilePlus Member | SAVE       |
| D2544   | Onlay, metallic, four + surfaces                   | \$1,263    | \$814            | <b>36%</b> |
| D2610   | Inlay, porcelain/ceramic, one surface              | \$1,123    | \$551            | <b>51%</b> |
| D2620   | Inlay, porcelain/ceramic, two surfaces             | \$1,145    | \$578            | <b>50%</b> |
| D2630   | Inlay, porcelain/ceramic, three surfaces           | \$1,216    | \$604            | <b>50%</b> |
| D2642   | Onlay, porcelain/ceramic, two surfaces             | \$1,205    | \$735            | <b>39%</b> |
| D2643   | Onlay, porcelain/ceramic, three surfaces           | \$1,234    | \$761            | <b>38%</b> |
| D2644   | Onlay, porcelain/ceramic, four + surfaces          | \$1,284    | \$814            | <b>37%</b> |
| D2740   | Crown, porcelain/ceramic, Zirconia                 | \$1,454    | \$799            | <b>45%</b> |
| D2750   | Crown, porcelain fused to high noble metal         | \$1,319    | \$785            | <b>40%</b> |
| D2751   | Crown, porcelain fused to predominantly base metal | \$1,127    | \$578            | <b>49%</b> |
| D2752   | Crown, porcelain fused to noble metal              | \$1,174    | \$630            | <b>46%</b> |
| D2780   | Crown, 3/4 cast high noble metal                   | \$1,284    | \$788            | <b>39%</b> |
| D2783   | Crown, 3/4 porcelain/ceramic                       | \$1,284    | \$814            | <b>37%</b> |
| D2790   | Crown, full cast high noble metal                  | \$1,269    | \$814            | <b>36%</b> |
| D2791   | Crown, full cast predominantly base metal          | \$1,113    | \$551            | <b>50%</b> |
| D2792   | Crown, full cast noble metal                       | \$1,170    | \$656            | <b>44%</b> |
| D2794   | Crown, titanium                                    | \$1,291    | \$814            | <b>37%</b> |
| D2799   | Provisional crown                                  | \$519      | \$210            | <b>60%</b> |
| D2910   | Recement inlays/onlays                             | \$136      | \$79             | <b>42%</b> |
| D2915   | Recement cast or prefabricated post & core         | \$138      | \$79             | <b>43%</b> |
| D2920   | Recement crowns                                    | \$133      | \$79             | <b>41%</b> |
| D2930   | Prefabricated stainless steel crown, primary       | \$311      | \$184            | <b>41%</b> |
| D2931   | Prefabricated stainless steel crown, permanent     | \$359      | \$236            | <b>34%</b> |
| D2932   | Prefabricated resin crown                          | \$411      | \$236            | <b>43%</b> |
| D2950   | Core buildup, including any pins                   | \$309      | \$158            | <b>49%</b> |

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## Restorative Services (Performed by a General Dentist)

| ADA Code | Procedure Description                                | Non-Member | SmilePlus Member | SAVE       |
|----------|--|------------|------------------|------------|
| D2951    | Pin retention, per tooth, in addition to restoration | \$91       | \$47             | <b>48%</b> |
| D2952    | Post & core, in addition to crown                    | \$476      | \$315            | <b>34%</b> |
| D2954    | Prefabricated post & core, in addition to crown      | \$387      | \$210            | <b>46%</b> |
| D2955    | Post removal, not in conjunction with endo therapy   | \$341      | \$228            | <b>33%</b> |
| D2962    | Labial veneer, porcelain laminate, laboratory        | \$1,347    | \$814            | <b>40%</b> |
| D2971    | Crown construction under partial                     | \$286      | \$79             | <b>72%</b> |
| D2980    | Crown repair   | \$339      | \$184            | <b>46%</b> |

## Endodontic Services (Performed by a General Dentist)

| ADA Code | Procedure Description   | Non-Member | SmilePlus Member | SAVE       |
|----------|---|------------|------------------|------------|
| D3110    | Pulp cap, direct, excluding final restoration                   | \$98       | \$53             | <b>46%</b> |
| D3120    | Pulp cap, indirect, excluding final restoration                 | \$98       | \$53             | <b>46%</b> |
| D3220    | Therapeutic pulpotomy, excluding final restoration              | \$242      | \$126            | <b>48%</b> |
| D3221    | Gross pulpal debridement, primary and permanent teeth           | \$272      | \$158            | <b>42%</b> |
| D3240    | Pulpal therapy, posterior, primary, excluding final restoration | \$352      | \$236            | <b>33%</b> |
| D3310    | Anterior root canal, excluding final restoration                | \$886      | \$509            | <b>43%</b> |
| D3320    | Bicuspid root canal, excluding final restoration                | \$999      | \$625            | <b>37%</b> |
| D3330    | Molar root canal, excluding final restoration                   | \$1,219    | \$709            | <b>42%</b> |
| D3331    | Treatment of root canal obstructions, non-surgical access       | \$754      | \$210            | <b>72%</b> |
| D3332    | Incomplete endo therapy, unrestorable tooth                     | \$523      | \$318            | <b>39%</b> |
| D3346    | Retreatment of root canal, anterior                             | \$1,007    | \$630            | <b>37%</b> |
| D3347    | Retreatment of root canal, bicuspid                             | \$1,138    | \$683            | <b>40%</b> |
| D3348    | Retreatment of root canal, molar                                | \$1,382    | \$840            | <b>39%</b> |
| D3920    | Hemisection, including any root removal                         | \$543      | \$373            | <b>31%</b> |

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## Periodontic Services (Performed by a General Dentist)

| ADA Code | Procedure Description  | Non-Member | SmilePlus Member | SAVE       |
|----------|--|------------|------------------|------------|
| D4210    | Gingivectomy or gingivoplasty, 4 + bound teeth per quadrant                        | \$736      | \$473            | <b>36%</b> |
| D4211    | Gingivectomy or gingivoplasty, 1 to 3 teeth  | \$385      | \$168            | <b>56%</b> |
| D4212    | Gingivectomy or gingivoplasty to allow access for restorative procedure, per tooth | \$346      | \$100            | <b>71%</b> |
| D4230    | Anatomical crown exposure, 4 + bound teeth per quadrant                            | \$985      | \$368            | <b>63%</b> |
| D4231    | Anatomical crown exposure, 1 to 3 teeth  | \$696      | \$341            | <b>51%</b> |
| D4240    | Gingival flap procedure, 4 + bound teeth per quadrant                              | \$858      | \$572            | <b>33%</b> |
| D4241    | Gingival flap procedure, including root planing, 1 to 3 teeth                      | \$702      | \$499            | <b>29%</b> |
| D4245    | Apically positioned flap   | \$938      | \$625            | <b>33%</b> |
| D4249    | Crown lengthening, hard and soft tissue  | \$902      | \$525            | <b>42%</b> |
| D4260    | Osseous surgery, 4 + teeth per quadrant  | \$1,311    | \$840            | <b>36%</b> |
| D4261    | Osseous surgery, 1 to 3 teeth  | \$1,058    | \$656            | <b>38%</b> |
| D4263    | Bone replacement, first site   | \$785      | \$473            | <b>40%</b> |
| D4264    | Bone replacement graft, each additional site in quadrant                           | \$636      | \$341            | <b>46%</b> |
| D4266    | Guided tissue regeneration, resorbable barrier                                     | \$889      | \$630            | <b>29%</b> |
| D4267    | Guided tissue regeneration, nonresorbable barrier                                  | \$1,024    | \$772            | <b>25%</b> |
| D4268    | Surgical revision procedure, per tooth   | \$941      | \$630            | <b>33%</b> |
| D4270    | Pedicle soft tissue graft  | \$988      | \$630            | <b>36%</b> |
| D4271    | Free soft tissue graft   | \$865      | \$630            | <b>27%</b> |
| D4274    | Distal or proximal wedge procedure   | \$773      | \$536            | <b>31%</b> |
| D4276    | Combined connective tissue and double pedicle graft                                | \$1,300    | \$893            | <b>31%</b> |
| D4277    | Free soft tissue graft procedure   | \$1,160    | \$630            | <b>46%</b> |
| D4320    | Provisional splinting, intracoronal  | \$607      | \$368            | <b>39%</b> |
| D4321    | Provisional splinting, extracoronal  | \$548      | \$341            | <b>38%</b> |
| D4341    | Periodontal scaling and root planing, 4 + teeth per quadrant                       | \$296      | \$135            | <b>54%</b> |
| D4342    | Periodontal scaling and root planing, 1 to 3 teeth                                 | \$222      | \$93             | <b>58%</b> |

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## Periodontic Services (Performed by a General Dentist)

| ADA Code | Procedure Description   | Non-Member | SmilePlus Member | SAVE |
|----------|---|------------|------------------|------|
| D4355    | Full mouth debridement to enable evaluation and diagnosis         | \$210      | \$104            | 50%  |
| D4910    | Periodontal maintenance (Three free per year with SmilePlus Gold) | \$159      | \$159            | 0%   |
| D4381    | Initial Minocycline, localized delivery                           | \$151      | \$121            | 20%  |
| D4381    | Minocycline, additional site, same tooth                          | \$20       | \$20             | 0%   |

## Removable Prosthodontic Services (Performed by a General Dentist)

| ADA Code | Procedure Description            | Non-Member | SmilePlus Member | SAVE |
|----------|----------------------------------|------------|------------------|------|
| D5110    | Deluxe denture, upper            | \$2,271    | \$699            | 69%  |
| D5110    | Elite denture, upper             | \$2,271    | \$799            | 65%  |
| D5110    | Premier denture, upper           | \$999      | \$899            | 10%  |
| D5120    | Deluxe denture, lower            | \$2,272    | \$699            | 69%  |
| D5120    | Elite denture, lower             | \$2,272    | \$799            | 65%  |
| D5120    | Premier denture, lower           | \$999      | \$899            | 10%  |
| D5130    | Immediate Premier denture, upper | \$1,099    | \$999            | 9%   |
| D5130    | Immediate Deluxe denture, upper  | \$2,385    | \$799            | 66%  |
| D5130    | Immediate Elite denture, upper   | \$2,385    | \$899            | 62%  |
| D5140    | Immediate Premier denture, lower | \$1,099    | \$999            | 9%   |
| D5140    | Immediate Deluxe denture, lower  | \$2,419    | \$799            | 67%  |
| D5140    | Immediate Elite denture, lower   | \$2,419    | \$899            | 63%  |
| D5211    | Partial, upper, resin base       | \$899      | \$650            | 28%  |
| D5212    | Partial, lower, resin base       | \$1,629    | \$650            | 60%  |
| D5213    | Deluxe partial, upper            | \$2,320    | \$656            | 72%  |
| D5214    | Deluxe partial, lower            | \$2,320    | \$656            | 72%  |
| D5213    | Elite partial, upper             | \$2,121    | \$998            | 53%  |
| D5214    | Elite partial, lower             | \$2,128    | \$998            | 53%  |

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| <b>Removable Prosthodontic Services</b> (Performed by a General Dentist) |  |            |                  |            |
|--|--|------------|------------------|------------|
| ADA Code   | Procedure Description  | Non-Member | SmilePlus Member | SAVE       |
| D5213  | Premier partial, upper                                       | \$2,121    | \$1,155          | <b>46%</b> |
| D5214  | Premier partial, lower                                       | \$2,128    | \$1,155          | <b>46%</b> |
| D5225  | Partial denture with flexible base, upper                    | \$1,827    | \$866            | <b>53%</b> |
| D5226  | Partial denture with flexible base, lower                    | \$1,820    | \$866            | <b>52%</b> |
| D5213  | Immediate Deluxe partial, upper                              | \$2,121    | \$839            | <b>60%</b> |
| D5214  | Immediate Deluxe partial, lower                              | \$2,128    | \$839            | <b>61%</b> |
| D5225  | Cosmetic partial, Valplast®, upper                           | \$1,851    | \$1,103          | <b>40%</b> |
| D5226  | Cosmetic partial, Valplast®, lower                           | \$1,825    | \$1,103          | <b>40%</b> |
| D5213  | Combination partial, upper, metal base and clear clasp       | \$2,121    | \$1,313          | <b>38%</b> |
| D5214  | Combination partial, lower, metal base and clear clasp       | \$2,128    | \$1,313          | <b>38%</b> |
| D5281  | Removable unilateral partial denture, one piece              | \$1,201    | \$814            | <b>32%</b> |
| D5410  | Adjust complete denture, upper                               | \$107      | \$53             | <b>50%</b> |
| D5411  | Adjust complete denture, lower                               | \$106      | \$53             | <b>50%</b> |
| D5421  | Adjust partial denture, upper                                | \$106      | \$53             | <b>50%</b> |
| D5422  | Adjust partial denture, lower                                | \$106      | \$53             | <b>50%</b> |
| D5510  | Repair broken complete denture base                          | \$259      | \$142            | <b>45%</b> |
| D5520  | Replace missing or broken teeth, complete denture            | \$226      | \$104            | <b>54%</b> |
| D5610  | Repair acrylic saddle or base                                | \$245      | \$142            | <b>42%</b> |
| D5620  | Repair cast framework  | \$343      | \$179            | <b>48%</b> |
| D5630  | Repair or replace broken clasp                               | \$317      | \$168            | <b>47%</b> |
| D5640  | Replace broken teeth, per tooth                              | \$231      | \$104            | <b>55%</b> |
| D5650  | Add tooth to existing partial denture                        | \$272      | \$135            | <b>50%</b> |
| D5660  | Add clasp to existing partial denture                        | \$319      | \$188            | <b>41%</b> |
| D5670  | Replace all teeth and acrylic on cast metal framework, upper | \$871      | \$499            | <b>43%</b> |
| D5671  | Replace all teeth and acrylic on cast metal framework, lower | \$884      | \$499            | <b>44%</b> |

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| <b>Removable Prosthodontic Services</b> (Performed by a General Dentist) |   |                   |                         |             |
|--|---|-------------------|-------------------------|-------------|
| <b>ADA Code</b>  | <b>Procedure Description</b>                          | <b>Non-Member</b> | <b>SmilePlus Member</b> | <b>SAVE</b> |
| D5710  | Rebase, complete upper denture                        | \$692             | \$378                   | <b>45%</b>  |
| D5711  | Rebase, complete lower denture                        | \$691             | \$378                   | <b>45%</b>  |
| D5720  | Rebase, upper partial denture                         | \$666             | \$378                   | <b>43%</b>  |
| D5721  | Rebase, lower partial denture                         | \$666             | \$378                   | <b>43%</b>  |
| D5730  | Reline, upper complete denture, chairside             | \$444             | \$221                   | <b>50%</b>  |
| D5731  | Reline, lower complete denture, chairside             | \$444             | \$221                   | <b>50%</b>  |
| D5740  | Reline, upper partial denture, chairside              | \$434             | \$221                   | <b>49%</b>  |
| D5741  | Reline, lower partial denture, chairside              | \$440             | \$221                   | <b>50%</b>  |
| D5750  | Reline, upper complete denture, laboratory            | \$543             | \$289                   | <b>47%</b>  |
| D5751  | Reline, lower complete denture, laboratory            | \$558             | \$289                   | <b>48%</b>  |
| D5760  | Reline, upper partial denture, laboratory             | \$545             | \$289                   | <b>47%</b>  |
| D5761  | Reline, lower partial denture, laboratory             | \$548             | \$289                   | <b>47%</b>  |
| D5810  | Denture, temporary, complete upper                    | \$1,029           | \$499                   | <b>52%</b>  |
| D5811  | Denture, temporary, complete lower                    | \$1,037           | \$499                   | <b>52%</b>  |
| D5820  | Interim partial denture (flipper), upper              | \$839             | \$419                   | <b>50%</b>  |
| D5821  | Interim partial denture (flipper), lower              | \$839             | \$419                   | <b>50%</b>  |
| D5850  | Tissue conditioning, upper denture                    | \$247             | \$137                   | <b>45%</b>  |
| D5851  | Tissue conditioning, lower denture                    | \$247             | \$137                   | <b>45%</b>  |
| D5860  | Overdenture complete                                  | \$2,048           | \$1,260                 | <b>38%</b>  |
| D5861  | Overdenture partial                                   | \$1,997           | \$1,260                 | <b>37%</b>  |
| D5862  | Precision attachment                                  | \$838             | \$420                   | <b>50%</b>  |
| D5867  | Replacement of semi-precision or precision attachment | \$469             | \$105                   | <b>78%</b>  |
| D5982  | Surgical stent  | \$528             | \$294                   | <b>44%</b>  |



# 2023 FEE SCHEDULE

## Implant Services (Performed by a General Dentist)

| ADA Code | Procedure Description  | Non-Member | SmilePlus Member | SAVE       |
|----------|--|------------|------------------|------------|
| D6010    | Surgical placement of implant body, endosteal implant                    | \$2,271    | \$1,260          | <b>45%</b> |
| D6012    | Surgical placement of interim implant                                    | \$1,955    | \$1,181          | <b>40%</b> |
| D6050    | Surgical placement, transosteal implant                                  | \$6,297    | \$4,410          | <b>30%</b> |
| D6053    | Implant/abutment supported removable denture, fully edentulous           | \$2,953    | \$1,155          | <b>61%</b> |
| D6054    | Implant/abutment supported removable denture, partially edentulous       | \$2,894    | \$1,260          | <b>56%</b> |
| D6055    | Dental implant supported connection bar                                  | \$3,508    | \$1,785          | <b>49%</b> |
| D6056    | Prefabricated abutment, includes placement                               | \$879      | \$525            | <b>40%</b> |
| D6057    | Custom abutment, includes placement                                      | \$1,037    | \$709            | <b>32%</b> |
| D6058    | Abutment supported porcelain/ceramic crown                               | \$1,629    | \$1,045          | <b>36%</b> |
| D6059    | Abutment supported PFM high noble crown                                  | \$1,654    | \$998            | <b>40%</b> |
| D6065    | Implant supported porcelain/ceramic crown                                | \$1,768    | \$1,103          | <b>38%</b> |
| D6066    | Implant supported PFM (titanium, titanium alloy, high noble metal) crown | \$1,728    | \$1,076          | <b>38%</b> |
| D6069    | Abutment supported retainer for PFM to high noble metal FPD              | \$1,659    | \$1,076          | <b>35%</b> |
| D6070    | Abutment supported retainer for PFM base metal FPD                       | \$1,580    | \$998            | <b>37%</b> |
| D6078    | Implant/abutment supported fixed denture for fully edentulous arch       | \$5,233    | \$3,150          | <b>40%</b> |
| D6091    | Replacement of semi/precision attachment                                 | \$671      | \$420            | <b>37%</b> |
| D6092    | Recement implant/abutment supported crown                                | \$180      | \$105            | <b>42%</b> |
| D6093    | Recement implant/abutment fixed partial                                  | \$214      | \$105            | <b>51%</b> |

## Fixed Prosthodontic Services (Performed by a General Dentist)

| ADA Code | Procedure Description                 | Non-Member | SmilePlus Member | SAVE       |
|----------|---------------------------------------|------------|------------------|------------|
| D6210    | Pontic, cast high noble metal         | \$1,203    | \$735            | <b>39%</b> |
| D6211    | Pontic, cast predominantly base metal | \$1,126    | \$551            | <b>51%</b> |

# 2023 FEE SCHEDULE

## Fixed Prosthodontic Services (Performed by a General Dentist)

| ADA Code | Procedure Description  | Non-Member | SmilePlus Member | SAVE       |
|----------|--|------------|------------------|------------|
| D6212    | Pontic, cast noble metal                                       | \$1,137    | \$656            | <b>42%</b> |
| D6214    | Pontic, titanium   | \$1,286    | \$788            | <b>39%</b> |
| D6240    | Pontic, porcelain fused to high noble metal                    | \$1,233    | \$709            | <b>42%</b> |
| D6241    | Pontic, porcelain fused to predominantly base metal            | \$1,126    | \$578            | <b>49%</b> |
| D6242    | Pontic, porcelain fused noble metal                            | \$1,179    | \$630            | <b>47%</b> |
| D6245    | Pontic, porcelain/ceramic, Zirconia                            | \$1,384    | \$761            | <b>45%</b> |
| D6250    | Pontic, resin with high noble metal                            | \$1,249    | \$709            | <b>43%</b> |
| D6251    | Pontic, resin with predominantly base metal                    | \$1,234    | \$656            | <b>47%</b> |
| D6252    | Pontic, resin with noble metal                                 | \$1,234    | \$683            | <b>45%</b> |
| D6545    | Cast metal retainer for acid etch bridge                       | \$1,036    | \$478            | <b>54%</b> |
| D6548    | Retainer, porcelain/ceramic for resin bonded fixed prosthetics | \$1,154    | \$656            | <b>43%</b> |
| D6600    | Inlay, porcelain/ceramic, 2 surfaces                           | \$1,185    | \$839            | <b>29%</b> |
| D6601    | Inlay, porcelain/ceramic, 3 + surfaces                         | \$1,195    | \$893            | <b>25%</b> |
| D6602    | Inlay, cast high noble, 2 surfaces                             | \$1,149    | \$814            | <b>29%</b> |
| D6603    | Inlay, cast high noble, 3 + surfaces                           | \$1,180    | \$840            | <b>29%</b> |
| D6609    | Onlay, porcelain/ceramic, 3 + surfaces                         | \$1,278    | \$940            | <b>26%</b> |
| D6611    | Onlay, cast high noble metal, 3 + surfaces                     | \$1,284    | \$940            | <b>27%</b> |
| D6614    | Onlay, cast noble metal, 2 surfaces                            | \$1,185    | \$929            | <b>22%</b> |
| D6615    | Onlay, cast noble metal, 3 + surfaces                          | \$1,245    | \$935            | <b>25%</b> |
| D6720    | Crown, resin with high noble metal                             | \$1,248    | \$709            | <b>43%</b> |
| D6740    | Crown, porcelain/ceramic, Zirconia                             | \$1,391    | \$799            | <b>43%</b> |
| D6750    | Crown, porcelain fused to high noble metal                     | \$1,234    | \$734            | <b>41%</b> |
| D6751    | Crown, porcelain fused to predominantly base metal             | \$1,144    | \$604            | <b>47%</b> |
| D6752    | Crown, porcelain fused to noble metal                          | \$1,177    | \$656            | <b>44%</b> |
| D6790    | Crown, full cast high noble metal                              | \$1,234    | \$814            | <b>34%</b> |

# 2023 FEE SCHEDULE

## Fixed Prosthodontic Services (Performed by a General Dentist)

| ADA Code | Procedure Description                           | Non-Member | SmilePlus Member | SAVE |
|----------|---|------------|------------------|------|
| D6792    | Crown, full cast noble metal                    | \$1,173    | \$709            | 40%  |
| D6793    | Provisional retainer crown                      | \$670      | \$210            | 69%  |
| D6810    | Additional charge, per unit for multiple crowns | \$295      | \$104            | 65%  |
| D6920    | Connection bar                                  | \$1,236    | \$788            | 36%  |
| D6930    | Recement fixed partial denture                  | \$204      | \$105            | 49%  |
| D6950    | Precision attachment                            | \$763      | \$441            | 42%  |
| D6973    | Core buildup for retainer, including any pins   | \$288      | \$200            | 31%  |
| D6975    | Coping, metal                                   | \$742      | \$525            | 29%  |
| D6980    | Bridge repair                                   | \$468      | \$289            | 38%  |

## Oral & Maxillofacial Surgery Services (Performed by a General Dentist)

| ADA Code | Procedure Description                                    | Non-Member | SmilePlus Member | SAVE |
|----------|--|------------|------------------|------|
| D7111    | Extraction, coronal remnants, deciduous teeth            | \$160      | \$95             | 41%  |
| D7140    | Extraction, erupted tooth or exposed root                | \$217      | \$100            | 54%  |
| D7210    | Surgical extraction of erupted tooth requiring elevation | \$329      | \$189            | 43%  |
| D7220    | Removal of impacted tooth, soft tissue                   | \$369      | \$210            | 43%  |
| D7230    | Removal of impacted tooth, partially bony                | \$464      | \$242            | 48%  |
| D7240    | Removal of impacted tooth, completely bony               | \$572      | \$331            | 42%  |
| D7241    | Removal of impacted tooth, completely bony               | \$671      | \$394            | 41%  |
| D7250    | Surgical removal of residual tooth roots                 | \$360      | \$210            | 42%  |
| D7260    | Oroantral fistula closure                                | \$1,410    | \$551            | 61%  |
| D7280    | Surgical access of erupted tooth                         | \$562      | \$341            | 39%  |
| D7285    | Biopsy of oral tissue (hard)                             | \$579      | \$263            | 55%  |
| D7286    | Biopsy of oral tissue (soft)                             | \$400      | \$163            | 59%  |
| D7288    | Brush biopsy, transepithelial sample collection          | \$247      | \$105            | 57%  |

# 2023 FEE SCHEDULE

## Adjunctive General Services (Performed by a General Dentist)

| ADA Code | Procedure Description   | Non-Member | SmilePlus Member | SAVE       |
|----------|---|------------|------------------|------------|
| D9110    | Palliative (emergency) treatment of dental pain                         | \$154      | \$79             | <b>49%</b> |
| D9120    | Fixed partial denture sectioning  | \$272      | \$152            | <b>44%</b> |
| D9210    | Local anesthesia not in conjunction with operational/surgical procedure | \$88       | \$32             | <b>64%</b> |
| D9211    | Regional block anesthesia   | \$107      | \$79             | <b>26%</b> |
| D9215    | Local anesthesia  | \$76       | \$12             | <b>84%</b> |
| D9220    | General anesthesia, first 30 minutes                                    | \$400      | \$236            | <b>41%</b> |
| D9221    | General anesthesia, each additional 15 minutes                          | \$175      | \$104            | <b>41%</b> |
| D9230    | Inhalation of nitrous oxide, analgesia, anxiolysis                      | \$97       | \$47             | <b>52%</b> |
| D9241    | Intravenous sedation/analgesia, first 30 minutes                        | \$420      | \$257            | <b>39%</b> |
| D9242    | Intravenous sedation/analgesia, each additional 15 minutes              | \$165      | \$104            | <b>37%</b> |
| D9248    | Non-intravenous conscious sedation                                      | \$370      | \$209            | <b>44%</b> |
| D9440    | Emergency office visit, after regularly scheduled hours                 | \$218      | \$89             | <b>59%</b> |
| D9910    | Application of desensitizing medicaments                                | \$74       | \$21             | <b>72%</b> |
| D9911    | Application of desensitizing resin, per tooth                           | \$94       | \$42             | <b>55%</b> |
| D9940    | Occlusal guards, by report, hard  | \$686      | \$394            | <b>43%</b> |
| D9941    | Fabrication of athletic mouthguards                                     | \$316      | \$168            | <b>47%</b> |