PLAN ADMINISTERED BY DELTA DENTAL

CODE DENTAL PROCEDURE	<u>CLASS</u>	
DIAGNOSTIC		
Clinical Oral Examinations (Not more than one examination of eit in a 6 consecutive month period)	ner type	
0120 PERIODIC ORAL EXAMINATION	1	\$29.00
	1	•
0140 LIMITED ORAL EXAM - PROBLEM FOCUSED	-	\$29.00
0150 COMPHRENSIVE ORAL EVALUATION	1	\$38.65
<u>Radiographs</u> (includes examination and diagnosis)		
0210 INTRAORAL FMS & BITEWINGS - limited to	1	\$58.00
one series in a 36 conseacutive month period		
0220 INTRAORAL SINGLE FIRST FILM	1	\$6.44
0230 INTRAORAL EACH ADDITIONAL FILM	1	\$6.44
0240 INTRAORAL, OCCLUSAL, SGL FILM	1	\$19.33
0250 EXTRAORAL, SGL, FIRST FILM	1	\$12.88
0260 EXTRAORAL EACH ADDITIONAL FILM	1	\$12.88
0270 BITEWING - SINGLE FILM **	1	\$11.27
0272 XRAYS-BITEWINGS-2 FILMS**	1	\$19.33
0274 X-RAYS-BITEWINGS-4 FILMS**	1	\$35.43
** Bitewings are limited to one service in a	_	•••••
6 consecutive month period.		
0290 POSTERIOR-ANTERIOR OR LATERAL SKULL/FACI	1	\$58.00
0321 TMJ JOINT SINGLE FILM/PER FILM	1	\$58.00
0330 PANOREX-MAX/MAND SINGLE FILM - limited	1	\$58.00
	•	φ30.00
to one service in a 36 consecutive month period.		.
0340 CEPHALOMETRIC FILM SERIES	1	\$48.32
PREVENTATIVE		
Dental Prophylaxis, not more than one in a 6 consecutive month period)		

Dental Prophylaxis, not more than one in a 6 consecutive month period)

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6530 INLAY-METALLIC-THREE OR MORE SURFACES	3	\$193.26
6543 ONLAY-METALLIC-THREE SURFACES	3	\$116.00
6545 RETAINER-CAST METAL FOR ACID ETCH FIXED	3	\$116.00
Crowns		
6720 CROWN - RESIN W/HIGH NOBLE METAL	3	\$318.88
6721 CROWN - RESIN W/PREDOMINANTLY BASE METAL	3	\$289.89
6722 CROWN - RESIN W/NOBLE METAL	3	\$289.89
6750 CROWN - PROCELAIN FUSED TO HIGH NOBLE METAL	3	\$367.20
6751 CROWN - PORCELAIN FUSED TO PREDOM BASE METAL	3	\$289.89
6752 CROWN-PORCELAIN FUSED TO NOBLE METAL	3	\$289.89
6780 CROWN - 3/4 CAST HIGH NOBLE METAL	3	\$212.59
6790 CROWN - FULL CAST HIGH NOBLE METAL	3	\$289.89
6791 CROWN FULL CAST PREDOMINANTLY BASE METAL	3	\$289.89
6792 CROWN FULL CAST NOBLE METAL	3	\$289.89
Other Prosthetic Services		
6930 RECEMENT BRIDGE	3	\$58.00
6950 PRECISION ATTACHMENT	3	\$193.26
ORAL SURGERY		
Simple extractions (includes local anesthesia and routine		
postoperative care)		
7110 SINGLE TOOTH	2	\$58.00
7120 EXTRACTION SIMPLE EACH ADDITIONAL	2	\$58.00
7210 SURGICAL REMOVAL ERUPTED TOOTH	2	\$96.63
7220 REMOVAL OF IMPACTED TOOTH - SOFT TISSUE	2	\$193.26
7230 REMOVAL IMPACTED TOOTH PARTIALLY BONY	2	\$241.58
7240 REMOVAL OF IMPACTED TOOTH - COMPLETELY BONY	2	\$289.89
7241 REMOVAL OF IMPACTED TOOTH COMPLETELY BONY	2	\$328.54
7250 SURGICAL REMOVAL OF RESIDUAL TOOTH ROOTS	2	\$96.63
7260 ORAL ANTRAL FISTULA CLOS &/OR ROOT REC	2	\$386.52
Other Surgical Procdures		

CODE	DENTAL PROCEDURE	CLASS	
9220	ANESTHESIA-GENERAL FIRST 30 MINUTES	2	\$193.26
Misce	<u>llaneous Procedures</u>		
9410	VISIT-HOUSE CALL	1	\$38.65
9420	HOSPITAL CALL	2	\$38.65