

Effective: January 2013 GENERAL PRACTICE FEE SCHEDULE 402 of Series 400

DIAGNOSTIC & PREVENTATIVE SERVICES		MEMBER'S
ADA CODE	PROCEDURE	FEE
	Office Visits	No Charge
1330	Oral Hygiene Instruction	No Charge
0120	Periodic Oral Exam	14.00
0140	Limited Oral Exam Problem Focused	19.00
0150	Comprehensive Oral Exam	22.00
0220	X-ray Single Image	10.00
0230	Each Additional Image	7.00
0270	Bitewing X-ray Single Image	10.00
0272	Bitewing X-ray. Two Images	13.00
0273	Bitewing X-ray. Three Images	19.00
0274	Bitewing X-ray. Four Images	22.00
0330	Panoramic X-ray	45.00
0210	Full Mouth X-ray	45.00
Dental office may require full mouth or panoramic X-rays on initial visit.		
1110	Prophylaxis Adult Cleaning	33.00
1120	Prophylaxis Child Cleaning	23.00
1351	Sealants (per tooth)	22.00
1203/1204	Fluoride Treatment	18.00
Routine Cleaning does not apply to patients with periodontal disease.		
RESTORATIVE		
Amalgam Fillings		
2140	1 Surface	44.00
2150	2 Surfaces	55.00
2160	3 Surfaces	67.00
2161	4 Surfaces	79.00
Composite Restoration		
2330	Anterior 1 Surface	55.00
2331	2 Surfaces	68.00
2332	3 Surfaces	86.00
2335	4 Surfaces	105.00
2391	Posterior 1 Surface	74.00
2392	2 Surfaces	108.00
2393	3 Surfaces	133.00
2394	4 Surfaces	153.00
CROWNS & BRIDGES:		
2750	Porcelain Fused to High Noble Metal	530.00
2751	Porcelain Fused to Base Metal	475.00
2752	Porcelain Fused to Noble Metal	500.00
2790	Full Cast High Noble Metal	520.00
2791	Full Cast-Predominately Base Metal	485.00
2930	PreFab Stainless Steel-Primary	105.00
2931	PreFab Stainless Steel-Permanent	120.00
2950	Core Build-up Including Pins	105.00
2951	Pin Retention/Tooth Add. to Crown	25.00
2952	Cast Post & Core Add. to Crown	160.00
2954	PreFab Post & Core Add. to Crown	125.00
2962	Labial Veneer (Porc. Laminate) Lab	495.00
*ENDODONTICS: (Root Canals)		
(EXCLUDING FINAL RESTORATION)		
3110-20	Pulp cap	23.00
3220	Therapeutic Pulpotomy	55.00
3310	Root canal Anterior	305.00
3320	Root canal Bicuspid	360.00
3330	Root canal Molar	450.00

MEMBER'S		FEE
*PERIODONTICS: (Gum Disease)		
0180	Perio Evaluation	20.00
4210	Gingivectomy Plasty (per quad)	310.00
4220	Subgingival Curretage (per quad)	85.00
4341	Scaling & Root Planing (per quad)	104.00
4355	Full Mouth Debridement	75.00
4910	Periodontal Maintenance	70.00
9630	Medicinal Irrigation (per quad)	20.00
*PROSTHETICS: (Dentures & Partials)		
5110	Complete Upper Denture	665.00
5120	Complete Lower Denture	665.00
5130	Immediate Upper Denture	690.00
5140	Immediate Lower Denture	690.00
5213-14	Partial U/L Acrylic w/Chrome	750.00
5410-11	Denture Adjustment	33.00
5510	Denture Repair, No Teeth	60.00
5520	Replace Missing or Broken Teeth	53.00
5650	Add Tooth to Existing Partial	55.00
5660	Add Clasp to Existing Partial	70.00
5730-41	Office Reline	135.00
5750-61	Laboratory Reline	175.00
*ORAL SURGERY:		
7140	Single Tooth Extraction-Simple, Local	50.00
7210	Removal-Surgical/Erupted Tooth	135.00
7220	Removal Impacted Tooth/Soft Tissue	115.00
7230	Removal Impacted Tooth/Partial Bony	150.00
7240	Removal Impacted Tooth/Total Bony	200.00
7310	Aveoloplasty (per quad) w/Extraction	105.00
7320	Aveoloplasty (per quad) w/o Extraction	135.00

ALL OF THE ABOVE CHARGES ARE REDUCED FEES FOR SERVICES PERFORMED BY A PARTICIPATING *GENERAL DENTIST*

Some providers may charge for missed appointments if no prior notice is given.

Any procedure not listed is available at a 20% reduction in the usual and customary price for the procedure.

Payment is required at the time of service.

*Fees do not include lab costs. Lab fees are to be paid directly to the dental office by the member.

Fees subject to change periodically without notification.

SPECIALISTS

Any treatment provided by a participating Specialist, if available, in Endodontics, Periodontics, Oral Surgery, Orthodontics, or Pedodontics (Pediatrics) will be charged at 20% off the Specialist's normal fee for that procedure.

While all participating providers are professionally licensed in the state in which they practice, Dental Care Rx does not guarantee the quality of service of any provider.

****Membership Verification Required****
Please Call (877) 579-9696

Membership ID Should be presented upon Check-In