

TABLE I. — OUTPATIENT DENTAL PROFESSIONAL NATIONWIDE CHARGES BY HCPCS CODE

HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D0120	PERIODIC ORAL EVALUATION	\$63.65	I
D0140	LIMIT ORAL EVAL PROBLM FOCUS	\$95.14	I
D0145	ORAL EVALUATION, PT < 3YRS	\$92.33	I
D0150	COMPREHENSVE ORAL EVALUATION	\$106.87	I
D0160	EXTENSV ORAL EVAL PROB FOCUS	\$206.20	I
D0170	RE-EVAL,EST PT,PROBLEM FOCUS	\$82.16	I
D0171	RE-EVAL POST-OP VISIT	\$76.93	I
D0180	COMP PERIODONTAL EVALUATION	\$120.96	I
D0190	SCREENING OF A PATIENT	\$80.40	I
D0191	ASSESSMENT OF A PATIENT	\$71.37	I
D0210	INTRAOR COMPLETE FILM SERIES	\$164.20	I
D0220	INTRAORAL PERIAPICAL FIRST	\$36.19	I
D0230	INTRAORAL PERIAPICAL EA ADD	\$30.94	I
D0240	INTRAORAL OCCLUSAL FILM	\$51.75	I
D0250	EXTRAORAL 2D PROJECT IMAGE	\$71.25	I
D0251	EXTRAORAL POSTERIOR IMAGE	\$58.97	I
D0270	DENTAL BITEWING SINGLE IMAGE	\$35.14	I
D0272	DENTAL BITEWINGS TWO IMAGES	\$55.77	I
D0273	BITEWINGS - THREE IMAGES	\$66.82	I
D0274	BITEWINGS FOUR IMAGES	\$79.21	I
D0277	VERT BITEWINGS 7 TO 8 IMAGES	\$116.85	I
D0310	DENTAL SALIOGRAPHY	\$455.81	I
D0320	DENTAL TMJ ARTHROGRAM INCL I	\$746.83	I
D0321	OTHER TMJ IMAGES BY REPORT	\$254.23	I
D0322	DENTAL TOMOGRAPHIC SURVEY	\$620.01	I
D0330	PANORAMIC IMAGE	\$137.77	I
D0340	2D CEPHALOMETRIC IMAGE	\$151.45	I
D0350	ORAL/FACIAL PHOTO IMAGES	\$81.98	I
D0351	3D PHOTOGRAPHIC IMAGE	\$74.01	I
D0364	CONE BEAM CT CAPT & INTERP	\$554.78	I
D0365	CONE BEAM CT INTERPRETE MAN	\$559.54	I
D0366	CONE BEAM CT INTERPRETE MAX	\$551.86	I
D0367	CONE BEAM CT INTERP BOTH JAW	\$561.00	I
D0368	CONE BEAM CT INTERPRETE TMJ	\$747.01	I
D0369	MAX MRI CAPTURE & INTERPRETE	\$1,518.14	I
D0370	MAX ULTRASOUND CAPT & INTERP	\$583.46	I
D0371	SIALOENDOSCOPY CAPT & INTERP	\$580.64	I
D0380	CONE BEAM CT CAPTURE LIMITED	\$519.74	I
D0381	CONE BEAM CT CAPT MANDIBLE	\$530.47	I
D0382	CONE BEAM CT CAPT MAXILLA	\$531.20	I
D0383	CONE BEAM CT BOTH JAWS	\$546.37	I
D0384	CONE BEAM CT CAPTURE TMJ	\$722.31	I
D0385	MAX MRI IMAGE CAPTURE	\$1,418.29	I
D0386	MAX ULTRASOUND IMAGE CAPTURE	\$554.58	I
D0391	IMTERPRETE DIAGNOSTIC IMAGE	\$428.39	I
D0393	TRTMNT SIMULATION 3D IMAGE	\$558.33	I
D0394	DIGITAL SUB 2 OR MORE IMAGES	\$442.88	I
D0395	FUSION 2 OR MORE 3D IMAGES	\$471.27	I
D0415	COLLECTION OF MICROORGANISMS	\$134.67	I
D0416	VIRAL CULTURE	\$136.21	I
D0417	COLLECT & PREP SALIVA SAMPLE	\$153.85	I
D0418	ANALYSIS OF SALIVA SAMPLE	\$130.61	I
D0422	COLLECT & PREP GENETIC SAMP	\$82.13	I
D0423	GENETIC TEST SPEC ANALYSIS	\$116.72	I

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HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D0425	CARIES SUSCEPTIBILITY TEST	\$74.90	I
D0431	DIAG TST DETECT MUCOS ABNORM	\$77.25	I
D0460	PULP VITALITY TEST	\$69.41	I
D0470	DIAGNOSTIC CASTS	\$145.37	I
D0472	GROSS EXAM, PREP & REPORT	\$122.50	I
D0473	MICRO EXAM, PREP & REPORT	\$196.57	I
D0474	MICRO W EXAM OF SURG MARGINS	\$238.39	I
D0475	DECALCIFICATION PROCEDURE	\$182.40	I
D0476	SPEC STAINS FOR MICROORGANIS	\$234.12	I
D0477	SPEC STAINS NOT FOR MICROORG	\$253.57	I
D0478	IMMUNOHISTOCHEMICAL STAINS	\$172.21	I
D0479	TISSUE IN-SITU HYBRIDIZATION	\$242.57	I
D0480	CYTOPATH SMEAR PREP & REPORT	\$172.82	I
D0481	ELECTRON MICROSCOPY	\$380.88	I
D0482	DIRECT IMMUNOFUORESCENCE	\$147.89	I
D0483	INDIRECT IMMUNOFUORESCENCE	\$158.87	I
D0484	CONSULT SLIDES PREP ELSEWHER	\$227.06	I
D0485	CONSULT INC PREP OF SLIDES	\$292.09	I
D0486	ACCESS OF TRANSEP CYTOL SAMP	\$176.52	I
D0502	OTHER ORAL PATHOLOGY PROCEDU	\$200.87	I
D0601	CARIES RISK ASSESS LOW RISK	\$98.88	I
D0602	CARIES RISK ASSESS MOD RISK	\$92.60	I
D0603	CARIES RISK ASSESS HIGH RISK	\$96.26	I
D0999	UNSPECIFIED DIAGNOSTIC PROCE	\$79.21	I
D1110	DENTAL PROPHYLAXIS ADULT	\$111.10	I
D1120	DENTAL PROPHYLAXIS CHILD	\$85.77	I
D1206	TOPICAL FLUORIDE VARNISH	\$54.86	I
D1208	TOPICAL APP FLUORID EX VRNSH	\$47.53	I
D1310	NUTRI COUNSEL-CONTROL CARIES	\$69.75	I
D1320	TOBACCO COUNSELING	\$80.12	I
D1330	ORAL HYGIENE INSTRUCTION	\$74.94	I
D1351	DENTAL SEALANT PER TOOTH	\$68.39	I
D1352	PREV RESIN REST, PERM TOOTH	\$111.67	I
D1353	SEALANT REPAIR PER TOOTH	\$79.76	I
D1354	INTERIM CARIES MED APP	\$65.67	I
D1510	SPACE MAINTAINER FXD UNILAT	\$399.48	II
D1515	FIXED BILAT SPACE MAINTAINER	\$546.93	II
D1520	REMOVE UNILAT SPACE MAINTAIN	\$462.24	II
D1525	REMOVE BILAT SPACE MAINTAIN	\$643.66	II
D1550	RECEMENT SPACE MAINTAINER	\$97.91	II
D1555	REMOVE FIX SPACE MAINTAINER	\$96.28	II
D1999	UNSPECIFIED PREVENTIVE PROC	\$74.94	II
D2140	AMALGAM ONE SURFACE PERMANEN	\$173.96	II
D2150	AMALGAM TWO SURFACES PERMANE	\$222.11	II
D2160	AMALGAM THREE SURFACES PERMA	\$270.42	II
D2161	AMALGAM 4 OR > SURFACES PERM	\$326.08	II
D2330	RESIN ONE SURFACE-ANTERIOR	\$203.17	II
D2331	RESIN TWO SURFACES-ANTERIOR	\$245.91	II
D2332	RESIN THREE SURFACES-ANTERIO	\$296.25	II
D2335	RESIN 4/> SURF OR W INCIS AN	\$359.11	II
D2390	ANT RESIN-BASED CMPST CROWN	\$466.20	II
D2391	POST 1 SRFC RESINBASED CMPST	\$219.75	II
D2392	POST 2 SRFC RESINBASED CMPST	\$278.33	II
D2393	POST 3 SRFC RESINBASED CMPST	\$343.21	II

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HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D2394	POST >=4SRFC RESINBASE CMPST	\$420.26	II
D2410	DENTAL GOLD FOIL ONE SURFACE	\$569.96	III
D2420	DENTAL GOLD FOIL TWO SURFACE	\$767.72	III
D2430	DENTAL GOLD FOIL THREE SURFA	\$1,040.04	III
D2510	DENTAL INLAY METALIC 1 SURF	\$1,008.91	III
D2520	DENTAL INLAY METALLIC 2 SURF	\$1,110.40	III
D2530	DENTAL INLAY METL 3/MORE SUR	\$1,215.82	III
D2542	DENTAL ONLAY METALLIC 2 SURF	\$1,220.27	III
D2543	DENTAL ONLAY METALLIC 3 SURF	\$1,266.57	III
D2544	DENTAL ONLAY METL 4/MORE SUR	\$1,316.27	III
D2610	INLAY PORCELAIN/CERAMIC 1 SU	\$1,157.22	III
D2620	INLAY PORCELAIN/CERAMIC 2 SU	\$1,183.65	III
D2630	DENTAL ONLAY PORC 3/MORE SUR	\$1,242.76	III
D2642	DENTAL ONLAY PORCELIN 2 SURF	\$1,235.44	III
D2643	DENTAL ONLAY PORCELIN 3 SURF	\$1,298.74	III
D2644	DENTAL ONLAY PORC 4/MORE SUR	\$1,371.46	III
D2650	INLAY COMPOSITE/RESIN ONE SU	\$945.85	III
D2651	INLAY COMPOSITE/RESIN TWO SU	\$990.33	III
D2652	DENTAL INLAY RESIN 3/MRE SUR	\$1,041.07	III
D2662	DENTAL ONLAY RESIN 2 SURFACE	\$989.27	III
D2663	DENTAL ONLAY RESIN 3 SURFACE	\$1,068.80	III
D2664	DENTAL ONLAY RESIN 4/MRE SUR	\$1,129.49	III
D2710	CROWN RESIN-BASED INDIRECT	\$856.43	III
D2712	CROWN 3/4 RESIN-BASED COMPOS	\$895.13	III
D2720	CROWN RESIN W/ HIGH NOBLE ME	\$1,314.15	III
D2721	CROWN RESIN W/ BASE METAL	\$1,242.86	III
D2722	CROWN RESIN W/ NOBLE METAL	\$1,271.43	III
D2740	CROWN PORCELAIN/CERAMIC SUBS	\$1,398.91	III
D2750	CROWN PORCELAIN W/ H NOBLE M	\$1,371.51	III
D2751	CROWN PORCELAIN FUSED BASE M	\$1,275.36	III
D2752	CROWN PORCELAIN W/ NOBLE MET	\$1,310.12	III
D2780	CROWN 3/4 CAST HI NOBLE MET	\$1,324.31	III
D2781	CROWN 3/4 CAST BASE METAL	\$1,246.81	III
D2782	CROWN 3/4 CAST NOBLE METAL	\$1,293.36	III
D2783	CROWN 3/4 PORCELAIN/CERAMIC	\$1,348.45	III
D2790	CROWN FULL CAST HIGH NOBLE M	\$1,377.20	III
D2791	CROWN FULL CAST BASE METAL	\$1,245.88	III
D2792	CROWN FULL CAST NOBLE METAL	\$1,295.76	III
D2794	CROWN-TITANIUM	\$1,323.56	III
D2799	PROVISIONAL CROWN	\$543.61	III
D2910	RECEMENT INLAY ONLAY OR PART	\$134.85	III
D2915	RECEMENT CAST OR PREFAB POST	\$133.28	III
D2920	RE-CEMENT OR RE-BOND CROWN	\$133.59	III
D2921	REATTACH TOOTH FRAGMENT	\$245.55	III
D2929	PREFAB PORC/CERAM CROWN PRI	\$460.73	III
D2930	PREFAB STNLSS STEEL CRWN PRI	\$333.88	III
D2931	PREFAB STNLSS STEEL CROWN PE	\$385.39	III
D2932	PREFABRICATED RESIN CROWN	\$417.77	III
D2933	PREFAB STAINLESS STEEL CROWN	\$454.81	III
D2934	PREFAB STEEL CROWN PRIMARY	\$457.43	III
D2940	PROTECTIVE RESTORATION	\$144.99	III
D2941	INT THERAPEUTIC RESTORATION	\$177.42	III
D2949	RESTORATIVE FOUNDATION	\$197.30	III
D2950	CORE BUILD-UP INCL ANY PINS	\$327.07	III

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HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D2951	TOOTH PIN RETENTION	\$88.17	III
D2952	POST AND CORE CAST + CROWN	\$508.62	III
D2953	EACH ADDTNL CAST POST	\$328.07	III
D2954	PREFAB POST/CORE + CROWN	\$413.07	III
D2955	POST REMOVAL	\$338.95	III
D2957	EACH ADDTNL PREFAB POST	\$234.52	III
D2960	LAMINATE LABIAL VENEER	\$912.15	III
D2961	LAB LABIAL VENEER RESIN	\$1,172.84	III
D2962	LAB LABIAL VENEER PORCELAIN	\$1,329.19	III
D2971	ADD PROC CONSTRUCT NEW CROWN	\$253.37	III
D2975	COPING	\$664.35	III
D2980	CROWN REPAIR	\$298.28	III
D2981	INLAY REPAIR	\$289.91	III
D2982	ONLAY REPAIR	\$289.91	III
D2983	VENEER REPAIR	\$292.52	III
D2990	RESIN INFILTRATION OF LESION	\$149.46	III
D2999	DENTAL UNSPEC RESTORATIVE PR	\$270.42	III
D3110	PULP CAP DIRECT	\$109.97	II
D3120	PULP CAP INDIRECT	\$98.64	II
D3220	THERAPEUTIC PULPOTOMY	\$244.73	II
D3221	GROSS PULPAL DEBRIDEMENT	\$270.70	II
D3222	PART PULP FOR APEXOGENESIS	\$302.59	II
D3230	PULPAL THERAPY ANTERIOR PRIM	\$282.21	II
D3240	PULPAL THERAPY POSTERIOR PRI	\$328.62	II
D3310	END THXPY, ANTERIOR TOOTH	\$917.19	II
D3320	END THXPY, BICUSPID TOOTH	\$1,076.01	II
D3330	END THXPY, MOLAR	\$1,323.25	II
D3331	NON-SURG TX ROOT CANAL OBS	\$594.51	II
D3332	INCOMPLETE ENDODONTIC TX	\$617.20	II
D3333	INTERNAL ROOT REPAIR	\$371.44	II
D3346	RETREAT ROOT CANAL ANTERIOR	\$1,126.84	II
D3347	RETREAT ROOT CANAL BICUSPID	\$1,296.80	II
D3348	RETREAT ROOT CANAL MOLAR	\$1,579.24	II
D3351	APEXIFICATION/RECALC INITIAL	\$493.57	II
D3352	APEXIFICATION/RECALC INTERIM	\$286.63	II
D3353	APEXIFICATION/RECALC FINAL	\$702.54	II
D3355	PULPAL REGENERATION INITIAL	\$530.71	II
D3356	PULPAL REGENERATION INTERIM	\$286.63	II
D3357	PULPAL REGENERATION COMPLETE	\$610.98	II
D3410	APICOECTOMY - ANTERIOR	\$960.67	II
D3421	ROOT SURGERY BICUSPID	\$1,064.23	II
D3425	ROOT SURGERY MOLAR	\$1,193.65	II
D3426	ROOT SURGERY EA ADD ROOT	\$492.26	II
D3427	PERIRADICULAR SURGERY	\$897.51	II
D3428	BONE GRAFT PERI PER TOOTH	\$1,070.64	II
D3429	BONE GRAFT PERI EACH ADDL	\$994.12	II
D3430	RETROGRADE FILLING	\$344.24	II
D3431	BIOLOGICAL MATERIALS	\$1,136.75	II
D3432	GUIDED TISSUE REGENERATION	\$1,061.78	II
D3450	ROOT AMPUTATION	\$659.09	II
D3460	ENDODONTIC ENDOSSEOUS IMPLAN	\$2,258.55	II
D3470	INTENTIONAL REPLANTATION	\$1,144.89	II
D3910	ISOLATION- TOOTH W RUBB DAM	\$235.01	II
D3920	TOOTH SPLITTING	\$552.89	II

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HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D3950	CANAL PREP/FITTING OF DOWEL	\$284.53	II
D3999	ENDODONTIC PROCEDURE	\$1,076.01	II
D4210	GINGIVECTOMY/PLASTY 4 OR MOR	\$823.42	II
D4211	GINGIVECTOMY/PLASTY 1 TO 3	\$401.83	II
D4212	GINGIVECTOMY/PLASTY REST	\$329.83	II
D4230	ANA CROWN EXP 4 OR> PER QUAD	\$1,091.17	II
D4231	ANA CROWN EXP 1-3 PER QUAD	\$657.40	II
D4240	GINGIVAL FLAP PROC W/ PLANIN	\$1,011.16	II
D4241	GNGLV FLAP W ROOTPLAN 1-3 TH	\$693.22	II
D4245	APICALLY POSITIONED FLAP	\$890.13	II
D4249	CROWN LENGTHEN HARD TISSUE	\$1,082.23	II
D4260	OSSEOUS SURGERY 4 OR MORE	\$1,608.02	II
D4261	OSSEOUS SURG 1 TO 3 TEETH	\$1,037.34	II
D4263	BONE REPLCE GRAFT FIRST SITE	\$754.51	II
D4264	BONE REPLCE GRAFT EACH ADD	\$624.37	II
D4265	BIO MTRLS TO AID SOFT/OS REG	\$738.62	II
D4266	GUIDED TISS REGEN RESORBLE	\$820.50	II
D4267	GUIDED TISS REGEN NONRESORB	\$994.47	II
D4268	SURGICAL REVISION PROCEDURE	\$987.62	II
D4270	PEDICLE SOFT TISSUE GRAFT PR	\$1,171.57	II
D4273	AUTO TISSUE GRAFT 1ST TOOTH	\$1,453.20	II
D4274	MESIAL/DISTAL WEDGE PROC	\$859.87	II
D4275	NON-AUTO GRAFT 1ST TOOTH	\$1,208.26	II
D4276	CON TISSUE W DBLE PED GRAFT	\$1,556.55	II
D4277	SOFT TISSUE GRAFT FIRSTTOOTH	\$1,265.94	II
D4278	SOFT TISSUE GRAFT ADDL TOOTH	\$688.21	II
D4283	AUTO TISSUE GRAFT ADDL TOOTH	\$1,335.48	II
D4285	NON-AUTO GRAFT ADDL TOOTH	\$1,004.94	II
D4320	PROVISION SPLNT INTRACORONAL	\$580.63	II
D4321	PROVISIONAL SPLINT EXTRACORO	\$528.85	II
D4341	PERIODONTAL SCALING & ROOT	\$309.73	II
D4342	PERIODONTAL SCALING 1-3TEETH	\$206.27	II
D4355	FULL MOUTH DEBRIDEMENT	\$213.77	II
D4381	LOCALIZED DELIVERY ANTIMICRO	\$170.53	II
D4910	PERIODONTAL MAINT PROCEDURES	\$169.23	II
D4920	UNSCHEDULED DRESSING CHANGE	\$137.92	II
D4921	GINGIVAL IRRIGATION PER QUAD	\$108.81	II
D4999	UNSPECIFIED PERIODONTAL PROC	\$206.27	II
D5110	DENTURES COMPLETE MAXILLARY	\$2,044.00	III
D5120	DENTURES COMPLETE MANDIBLE	\$2,050.28	III
D5130	DENTURES IMMEDIAT MAXILLARY	\$2,189.24	III
D5140	DENTURES IMMEDIAT MANDIBLE	\$2,202.32	III
D5211	DENTURES MAXILL PART RESIN	\$1,683.71	III
D5212	DENTURES MAND PART RESIN	\$1,791.94	III
D5213	DENTURES MAXILL PART METAL	\$2,172.93	III
D5214	DENTURES MANDIBL PART METAL	\$2,176.59	III
D5221	IMMED MAX PART DENTURE RESIN	\$1,702.35	III
D5222	IMMED MAN PART DENTURE RESIN	\$1,977.35	III
D5223	IMMED MAX PART DENT METAL	\$2,227.05	III
D5224	IMMED MAND PART DENT METAL	\$2,227.05	III
D5225	MAXILLARY PART DENTURE FLEX	\$1,784.67	III
D5226	MANDIBULAR PART DENTURE FLEX	\$1,897.08	III
D5281	REMOVABLE PARTIAL DENTURE	\$1,272.46	III
D5410	DENTURES ADJUST CMPLT MAXIL	\$108.68	III

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HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D5411	DENTURES ADJUST CMPLT MAND	\$107.63	III
D5421	DENTURES ADJUST PART MAXILL	\$107.63	III
D5422	DENTURES ADJUST PART MANDBL	\$107.63	III
D5510	DENTUR REPR BROKEN COMPL BAS	\$239.85	III
D5520	REPLACE DENTURE TEETH COMPLT	\$206.24	III
D5610	DENTURES REPAIR RESIN BASE	\$244.10	III
D5620	REP PART DENTURE CAST FRAME	\$303.28	III
D5630	REP PARTIAL DENTURE CLASP	\$314.99	III
D5640	REPLACE PART DENTURE TEETH	\$219.91	III
D5650	ADD TOOTH TO PARTIAL DENTURE	\$273.01	III
D5660	ADD CLASP TO PARTIAL DENTURE	\$320.28	III
D5670	REPLC TTH&ACRLC ON MTL FRMWK	\$832.03	III
D5671	REPLC TTH&ACRLC MANDIBULAR	\$840.92	III
D5710	DENTURES REBASE CMPLT MAXIL	\$746.27	III
D5711	DENTURES REBASE CMPLT MAND	\$729.92	III
D5720	DENTURES REBASE PART MAXILL	\$711.58	III
D5721	DENTURES REBASE PART MANDBL	\$706.88	III
D5730	DENTURE RELN CMPLT MAXIL CH	\$454.98	III
D5731	DENTURE RELN CMPLT MAND CHR	\$450.80	III
D5740	DENTURE RELN PART MAXIL CHR	\$424.71	III
D5741	DENTURE RELN PART MAND CHR	\$424.71	III
D5750	DENTURE RELN CMPLT MAX LAB	\$578.15	III
D5751	DENTURE RELN CMPLT MAND LAB	\$581.81	III
D5760	DENTURE RELN PART MAXIL LAB	\$571.84	III
D5761	DENTURE RELN PART MAND LAB	\$571.84	III
D5810	DENTURE INTERM CMPLT MAXILL	\$995.31	III
D5811	DENTURE INTERM CMPLT MANDBL	\$1,050.50	III
D5820	DENTURE INTERM PART MAXILL	\$807.24	III
D5821	DENTURE INTERM PART MANDBL	\$825.72	III
D5850	DENTURE TISS CONDITN MAXILL	\$224.06	III
D5851	DENTURE TISS CONDITN MANDBL	\$220.40	III
D5862	PRECISION ATTACHMENT	\$903.92	III
D5863	OVERDENTURE COMPLETE MAX	\$2,384.65	III
D5864	OVERDENTURE PARTIAL MAX	\$2,711.95	III
D5865	OVERDENTURE COMPLETE MANDIB	\$2,470.97	III
D5866	OVERDENTURE PARTIAL MANDIB	\$2,781.92	III
D5867	REPLACEMENT OF PRECISION ATT	\$512.64	III
D5875	PROSTHESIS MODIFICATION	\$577.51	III
D5899	REMOVABLE PROSTHODONTIC PROC	\$578.15	III
D5911	FACIAL MOULAGE SECTIONAL	\$558.84	III
D5912	FACIAL MOULAGE COMPLETE	\$562.50	III
D5913	NASAL PROSTHESIS	\$8,541.98	III
D5914	AURICULAR PROSTHESIS	\$8,282.52	III
D5915	ORBITAL PROSTHESIS	\$13,365.70	III
D5916	OCULAR PROSTHESIS	\$3,564.97	III
D5919	FACIAL PROSTHESIS	\$1,534.89	III
D5922	NASAL SEPTAL PROSTHESIS	\$1,534.89	III
D5923	OCULAR PROSTHESIS INTERIM	\$1,534.89	III
D5924	CRANIAL PROSTHESIS	\$1,169.20	III
D5925	FACIAL AUGMENTATION IMPLANT	\$376.12	III
D5926	REPLACEMENT NASAL PROSTHESIS	\$1,534.89	III
D5927	AURICULAR REPLACEMENT	\$1,534.89	III
D5928	ORBITAL REPLACEMENT	\$1,534.89	III
D5929	FACIAL REPLACEMENT	\$1,534.89	III

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D5931	SURGICAL OBTURATOR	\$5,317.93	III
D5932	POSTSURGICAL OBTURATOR	\$9,945.82	III
D5933	REFITTING OF OBTURATOR	\$306.32	III
D5934	MANDIBULAR FLANGE PROSTHESIS	\$9,065.12	III
D5935	MANDIBULAR DENTURE PROSTH	\$7,887.48	III
D5936	TEMP OBTURATOR PROSTHESIS	\$8,859.29	III
D5937	TRISMUS APPLIANCE	\$1,006.11	III
D5951	FEEDING AID	\$1,350.99	III
D5952	PEDIATRIC SPEECH AID	\$4,700.43	III
D5953	ADULT SPEECH AID	\$8,926.77	III
D5954	SUPERIMPOSED PROSTHESIS	\$8,272.15	III
D5955	PALATAL LIFT PROSTHESIS	\$7,651.28	III
D5958	INTRAORAL CON DEF INTER PLT	\$1,534.89	III
D5959	INTRAORAL CON DEF MOD PALAT	\$1,534.89	III
D5960	MODIFY SPEECH AID PROSTHESIS	\$553.62	III
D5982	SURGICAL STENT	\$665.19	III
D5983	RADIATION APPLICATOR	\$1,687.16	III
D5984	RADIATION SHIELD	\$1,687.16	III
D5985	RADIATION CONE LOCATOR	\$1,687.16	III
D5986	FLUORIDE APPLICATOR	\$219.32	III
D5987	COMMISSURE SPLINT	\$1,914.54	III
D5988	SURGICAL SPLINT	\$740.61	III
D5991	VESICULOBULLOUS DISEASE CARR	\$252.90	III
D5992	ADJUST MAX PROST APPLIANCE	\$590.64	III
D5993	MAIN/CLEAN MAX PROSTHESIS	\$590.64	III
D5994	PERIODONTAL MEDICAMENT	\$217.98	III
D5999	MAXILLOFACIAL PROSTHESIS	\$8,926.77	III
D6010	ODONTICS ENDOSTEAL IMPLANT	\$2,791.67	III
D6011	SECOND STAGE IMPLANT SURGERY	\$1,446.26	III
D6012	ENDOSTEAL IMPLANT	\$2,592.43	III
D6013	SURGICAL PLACE MINI IMPLANT	\$2,224.63	III
D6040	ODONTICS EPOSTEAL IMPLANT	\$10,005.74	III
D6050	ODONTICS TRANSOSTEAL IMPLNT	\$7,255.67	III
D6051	INTERIM ABUTMENT	\$670.62	III
D6052	SEMI PRECISION ATTACH ABUT	\$1,197.60	III
D6055	IMPLANT CONNECTING BAR	\$2,414.10	III
D6056	PREFABRICATED ABUTMENT	\$795.54	III
D6057	CUSTOM ABUTMENT	\$951.49	III
D6058	ABUTMENT SUPPORTED CROWN	\$1,785.73	III
D6059	ABUTMENT SUPPORTED MTL CROWN	\$1,781.77	III
D6060	ABUTMENT SUPPORTED MTL CROWN	\$1,676.14	III
D6061	ABUTMENT SUPPORTED MTL CROWN	\$1,683.08	III
D6062	ABUTMENT SUPPORTED MTL CROWN	\$1,711.09	III
D6063	ABUTMENT SUPPORTED MTL CROWN	\$1,599.13	III
D6064	ABUTMENT SUPPORTED MTL CROWN	\$1,608.81	III
D6065	IMPLANT SUPPORTED CROWN	\$1,846.72	III
D6066	IMPLANT SUPPORTED MTL CROWN	\$1,801.97	III
D6067	IMPLANT SUPPORTED MTL CROWN	\$1,789.22	III
D6068	ABUTMENT SUPPORTED RETAINER	\$1,777.09	III
D6069	ABUTMENT SUPPORTED RETAINER	\$1,787.00	III
D6070	ABUTMENT SUPPORTED RETAINER	\$1,695.50	III
D6071	ABUTMENT SUPPORTED RETAINER	\$1,700.86	III
D6072	ABUTMENT SUPPORTED RETAINER	\$1,781.60	III
D6073	ABUTMENT SUPPORTED RETAINER	\$1,659.24	III

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TABLE I. — OUTPATIENT DENTAL PROFESSIONAL NATIONWIDE CHARGES BY HCPCS CODE

HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D6074	ABUTMENT SUPPORTED RETAINER	\$1,672.08	III
D6075	IMPLANT SUPPORTED RETAINER	\$1,819.52	III
D6076	IMPLANT SUPPORTED RETAINER	\$1,803.02	III
D6077	IMPLANT SUPPORTED RETAINER	\$1,810.14	III
D6080	IMPLANT MAINTENANCE	\$262.43	III
D6090	REPAIR IMPLANT	\$915.43	III
D6091	REPL SEMI/PRECISION ATTACH	\$716.26	III
D6092	RECEMENT SUPP CROWN	\$165.10	III
D6093	RECEMENT SUPP PART DENTURE	\$222.22	III
D6094	ABUT SUPPORT CROWN TITANIUM	\$1,514.61	III
D6095	ODONTICS REPR ABUTMENT	\$878.81	III
D6100	REMOVAL OF IMPLANT	\$936.35	III
D6101	DEBRIDEMENT OF A PERIMPLANT	\$677.92	III
D6102	DEBRIDEMENT & CONTOURING	\$916.46	III
D6103	BONE GRAFT REPAIR PERIMPLANT	\$747.15	III
D6104	BONE GRAFT TIME OF IMPLANT	\$728.84	III
D6110	IMPLNT/ABUT REMOV DENT MAX	\$2,971.48	III
D6111	IMPLNT/ABUT REMOV DENT MAND	\$2,952.12	III
D6112	IMP/ABUT REM DENT PART MAX	\$2,867.91	III
D6113	IMP/ABUT REM DENT PART MAND	\$2,889.88	III
D6114	IMPLNT/ABUT FIXED DENT MAX	\$7,229.63	III
D6115	IMPLNT/ABUT FIXED DENT MAND	\$7,001.56	III
D6116	IMP/ABUT FIXED DENT PART MAX	\$4,393.97	III
D6117	IMP/ABUT FIXED DENT PART MAN	\$4,533.64	III
D6190	RADIO/SURGICAL IMPLANT INDEX	\$443.77	III
D6194	ABUT SUPPORT RETAINER TITANI	\$1,570.22	III
D6199	IMPLANT PROCEDURE	\$1,197.60	III
D6205	PONTIC-INDIRECT RESIN BASED	\$1,048.91	III
D6210	PROSTHODONT HIGH NOBLE METAL	\$1,354.40	III
D6211	BRIDGE BASE METAL CAST	\$1,254.48	III
D6212	BRIDGE NOBLE METAL CAST	\$1,298.84	III
D6214	PONTIC TITANIUM	\$1,338.07	III
D6240	BRIDGE PORCELAIN HIGH NOBLE	\$1,346.24	III
D6241	BRIDGE PORCELAIN BASE METAL	\$1,250.72	III
D6242	BRIDGE PORCELAIN NOBEL METAL	\$1,302.71	III
D6245	BRIDGE PORCELAIN/CERAMIC	\$1,368.73	III
D6250	BRIDGE RESIN W/HIGH NOBLE	\$1,316.11	III
D6251	BRIDGE RESIN BASE METAL	\$1,234.71	III
D6252	BRIDGE RESIN W/NOBLE METAL	\$1,262.90	III
D6253	PROVISIONAL PONTIC	\$755.90	III
D6545	DENTAL RETAINR CAST METL	\$780.96	III
D6548	PORCELAIN/CERAMIC RETAINER	\$846.76	III
D6549	RESIN RETAINER	\$697.29	III
D6600	PORCELAIN/CERAMIC INLAY 2SRF	\$1,099.00	III
D6601	PORC/CERAM INLAY >= 3 SURFAC	\$1,149.96	III
D6602	CST HGH NBLE MTL INLAY 2 SRF	\$1,131.67	III
D6603	CST HGH NBLE MTL INLAY >=3SR	\$1,191.38	III
D6604	CST BSE MTL INLAY 2 SURFACES	\$1,103.20	III
D6605	CST BSE MTL INLAY >= 3 SURFA	\$1,137.67	III
D6606	CAST NOBLE METAL INLAY 2 SUR	\$1,099.92	III
D6607	CST NOBLE MTL INLAY >=3 SURF	\$1,171.95	III
D6608	ONLAY PORC/CRMC 2 SURFACES	\$1,182.23	III
D6609	ONLAY PORC/CRMC >=3 SURFACES	\$1,247.10	III
D6610	ONLAY CST HGH NBL MTL 2 SRFC	\$1,213.97	III

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TABLE I. — OUTPATIENT DENTAL PROFESSIONAL NATIONWIDE CHARGES BY HCPCS CODE

HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D6611	ONLAY CST HGH NBL MTL >=3SRF	\$1,314.68	III
D6612	ONLAY CST BASE MTL 2 SURFACE	\$1,184.38	III
D6613	ONLAY CST BASE MTL >=3 SURFA	\$1,229.99	III
D6614	ONLAY CST NBL MTL 2 SURFACES	\$1,163.35	III
D6615	ONLAY CST NBL MTL >=3 SURFAC	\$1,240.38	III
D6624	INLAY TITANIUM	\$1,154.16	III
D6634	ONLAY TITANIUM	\$1,213.05	III
D6710	CROWN-INDIRECT RESIN BASED	\$1,194.64	III
D6720	RETAIN CROWN RESIN W HI NBLE	\$1,297.41	III
D6721	CROWN RESIN W/BASE METAL	\$1,240.68	III
D6722	CROWN RESIN W/NOBLE METAL	\$1,264.65	III
D6740	CROWN PORCELAIN/CERAMIC	\$1,377.16	III
D6750	CROWN PORCELAIN HIGH NOBLE	\$1,369.67	III
D6751	CROWN PORCELAIN BASE METAL	\$1,260.73	III
D6752	CROWN PORCELAIN NOBLE METAL	\$1,299.84	III
D6780	CROWN 3/4 HIGH NOBLE METAL	\$1,310.68	III
D6781	CROWN 3/4 CAST BASED METAL	\$1,281.91	III
D6782	CROWN 3/4 CAST NOBLE METAL	\$1,243.59	III
D6783	CROWN 3/4 PORCELAIN/CERAMIC	\$1,310.00	III
D6790	CROWN FULL HIGH NOBLE METAL	\$1,333.57	III
D6791	CROWN FULL BASE METAL CAST	\$1,233.42	III
D6792	CROWN FULL NOBLE METAL CAST	\$1,295.48	III
D6793	PROVISIONAL RETAINER CROWN	\$625.96	III
D6794	CROWN TITANIUM	\$1,285.54	III
D6920	DENTAL CONNECTOR BAR	\$794.68	III
D6930	RECEMENT/BOND PART DENTURE	\$202.14	III
D6940	STRESS BREAKER	\$477.69	III
D6950	PRECISION ATTACHMENT	\$819.35	III
D6980	FIXED PARTIAL REPAIR	\$488.58	III
D6985	PEDIATRIC PARTIAL DENTURE FX	\$892.91	III
D6999	FIXED PROSTHODONTIC PROC	\$1,346.24	III
D7111	EXTRACTION CORONAL REMNANTS	\$164.70	II
D7140	EXTRACTION ERUPTED TOOTH/EXR	\$216.07	II
D7210	REM IMP TOOTH W MUCOPER FLP	\$343.95	II
D7220	IMPACT TOOTH REMOV SOFT TISS	\$398.40	II
D7230	IMPACT TOOTH REMOV PART BONY	\$515.99	II
D7240	IMPACT TOOTH REMOV COMP BONY	\$612.12	II
D7241	IMPACT TOOTH REM BONY W/COMP	\$742.25	II
D7250	TOOTH ROOT REMOVAL	\$365.84	II
D7251	CORONECTOMY	\$596.36	II
D7260	ORAL ANTRAL FISTULA CLOSURE	\$1,833.25	II
D7261	PRIMARY CLOSURE SINUS PERF	\$933.69	II
D7270	TOOTH REIMPLANTATION	\$696.60	II
D7272	TOOTH TRANSPLANTATION	\$915.90	II
D7280	EXPOSURE OF UNERUPTED TOOTH	\$623.45	II
D7282	MOBILIZE ERUPTED/MALPOS TOOT	\$469.70	II
D7283	PLACE DEVICE IMPACTED TOOTH	\$438.92	II
D7285	BIOPSY OF ORAL TISSUE HARD	\$956.06	II
D7286	BIOPSY OF ORAL TISSUE SOFT	\$492.31	II
D7287	EXFOLIATIVE CYTOLOG COLLECT	\$243.48	II
D7288	BRUSH BIOPSY	\$245.57	II
D7290	REPOSITIONING OF TEETH	\$588.56	II
D7291	TRANSSEPTAL FIBEROTOMY	\$379.77	II
D7292	SCREW RETAINED PLATE	\$2,283.25	II

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TABLE I. — OUTPATIENT DENTAL PROFESSIONAL NATIONWIDE CHARGES BY HCPCS CODE

HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D7293	TEMP ANCHORAGE DEV W FLAP	\$1,794.84	II
D7294	TEMP ANCHORAGE DEV W/O FLAP	\$1,201.80	II
D7295	BONE HARVEST,AUTO GRAFT PROC	\$1,135.13	II
D7310	ALVEOPLASTY W/ EXTRACTION	\$378.18	II
D7311	ALVEOLOPLASTY W/EXTRACT 1-3	\$360.40	II
D7320	ALVEOPLASTY W/O EXTRACTION	\$585.83	II
D7321	ALVEOLOPLASTY NOT W/EXTRACTS	\$520.45	II
D7340	VESTIBULOPLASTY RIDGE EXTENS	\$2,077.59	II
D7350	VESTIBULOPLASTY EXTEN GRAFT	\$5,192.34	II
D7410	RAD EXC LESION UP TO 1.25 CM	\$833.75	II
D7411	EXCISION BENIGN LESION>1.25C	\$1,289.33	II
D7412	EXCISION BENIGN LESION COMPL	\$1,567.61	II
D7413	EXCISION MALIG LESION<=1.25C	\$1,162.25	II
D7414	EXCISION MALIG LESION>1.25CM	\$1,741.80	II
D7415	EXCISION MALIG LES COMPLICAT	\$1,893.49	II
D7440	MALIG TUMOR EXC TO 1.25 CM	\$1,478.17	II
D7441	MALIG TUMOR > 1.25 CM	\$2,310.89	II
D7450	REM ODONTOGEN CYST TO 1.25CM	\$957.73	II
D7451	REM ODONTOGEN CYST > 1.25 CM	\$1,323.35	II
D7460	REM NONODONTO CYST TO 1.25CM	\$944.13	II
D7461	REM NONODONTO CYST > 1.25 CM	\$1,441.57	II
D7465	LESION DESTRUCTION	\$588.45	II
D7471	REM EXOSTOSIS ANY SITE	\$1,165.59	II
D7472	REMOVAL OF TORUS PALATINUS	\$1,371.67	II
D7473	REMOVE TORUS MANDIBULARIS	\$1,302.11	II
D7485	SURG REDUCT OSSEOUS TUBEROSIT	\$1,161.41	II
D7490	MAXILLA OR MANDIBLE RESECTIO	\$10,289.21	II
D7510	I&D ABSC INTRAORAL SOFT TISS	\$359.34	II
D7511	INCISION/DRAIN ABSCESS INTRA	\$523.06	II
D7520	I&D ABSCESS EXTRAORAL	\$1,264.84	II
D7521	INCISION/DRAIN ABSCESS EXTRA	\$1,458.27	II
D7530	REMOVAL FB SKIN/AREOLAR TISS	\$573.38	II
D7540	REMOVAL OF FB REACTION	\$789.94	II
D7550	REMOVAL OF SLOUGHED OFF BONE	\$616.71	II
D7560	MAXILLARY SINUSOTOMY	\$2,890.41	II
D7610	MAXILLA OPEN REDUCT SIMPLE	\$5,882.93	II
D7620	CLSD REDUCT SIMPL MAXILLA FX	\$4,447.53	II
D7630	OPEN RED SIMPL MANDIBLE FX	\$6,786.94	II
D7640	CLSD RED SIMPL MANDIBLE FX	\$4,636.24	II
D7650	OPEN RED SIMP MALAR/ZYGOM FX	\$4,259.16	II
D7660	CLSD RED SIMP MALAR/ZYGOM FX	\$3,070.25	II
D7670	CLOSD RDUCTN SPLINT ALVEOLUS	\$1,974.91	II
D7671	ALVEOLUS OPEN REDUCTION	\$2,634.13	II
D7680	REDUCT SIMPLE FACIAL BONE FX	\$9,982.55	II
D7710	MAXILLA OPEN REDUCT COMPOUND	\$6,355.32	II
D7720	CLSD REDUCT COMPD MAXILLA FX	\$4,638.85	II
D7730	OPEN REDUCT COMPD MANDBLE FX	\$8,341.44	II
D7740	CLSD REDUCT COMPD MANDBLE FX	\$4,766.17	II
D7750	OPEN RED COMP MALAR/ZYGMA FX	\$5,877.25	II
D7760	CLSD RED COMP MALAR/ZYGMA FX	\$4,935.72	II
D7770	OPEN REDUC COMPD ALVEOLUS FX	\$3,486.77	II
D7771	ALVEOLUS CLSD REDUC STBLZ TE	\$2,578.19	II
D7780	REDUCT COMPND FACIAL BONE FX	\$12,932.38	II
D7810	TMJ OPEN REDUCT-DISLOCATION	\$6,080.94	II

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TABLE I. — OUTPATIENT DENTAL PROFESSIONAL NATIONWIDE CHARGES BY HCPCS CODE

HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D7820	CLOSED TMP MANIPULATION	\$961.91	II
D7830	TMJ MANIPULATION UNDER ANEST	\$930.77	II
D7840	REMOVAL OF TMJ CONDYLE	\$8,022.22	II
D7850	TMJ MENISCECTOMY	\$7,248.63	II
D7852	TMJ REPAIR OF JOINT DISC	\$7,990.84	II
D7854	TMJ EXCISN OF JOINT MEMBRANE	\$8,078.18	II
D7856	TMJ CUTTING OF A MUSCLE	\$5,696.67	II
D7858	TMJ RECONSTRUCTION	\$21,802.59	II
D7860	TMJ CUTTING INTO JOINT	\$9,292.94	II
D7865	TMJ RESHAPING COMPONENTS	\$14,975.43	II
D7870	TMJ ASPIRATION JOINT FLUID	\$579.05	II
D7871	LYSIS + LAVAGE W CATHETERS	\$989.75	II
D7872	TMJ DIAGNOSTIC ARTHROSCOPY	\$5,282.28	II
D7873	TMJ ARTHROSCOPY LYSIS ADHESN	\$6,360.25	II
D7874	TMJ ARTHROSCOPY DISC REPOSIT	\$9,122.96	II
D7875	TMJ ARTHROSCOPY SYNOVECTOMY	\$9,994.38	II
D7876	TMJ ARTHROSCOPY DISCECTOMY	\$10,775.42	II
D7877	TMJ ARTHROSCOPY DEBRIDEMENT	\$9,510.26	II
D7880	OCCLUSAL ORTHOTIC APPLIANCE	\$1,172.00	II
D7881	OCC ORTHOTIC DEVICE ADJUST	\$862.76	II
D7899	TMJ UNSPECIFIED THERAPY	\$1,172.00	II
D7910	DENT SUTUR RECENT WND TO 5CM	\$506.53	II
D7911	DENTAL SUTURE WOUND TO 5 CM	\$1,095.90	II
D7912	SUTURE COMPLICATE WND > 5 CM	\$1,902.97	II
D7920	DENTAL SKIN GRAFT	\$4,029.16	II
D7921	COLLECT & APPL BLOOD PRODUCT	\$464.17	II
D7940	RESHAPING BONE ORTHOGNATHIC	\$4,940.18	II
D7941	BONE CUTTING RAMUS CLOSED	\$11,150.74	II
D7943	CUTTING RAMUS OPEN W/GRAFT	\$10,608.34	II
D7944	BONE CUTTING SEGMENTED	\$8,986.80	II
D7945	BONE CUTTING BODY MANDIBLE	\$10,742.65	II
D7946	RECONSTRUCTION MAXILLA TOTAL	\$13,180.11	II
D7947	RECONSTRUCT MAXILLA SEGMENT	\$11,808.70	II
D7948	RECONSTRUCT MIDFACE NO GRAFT	\$14,710.09	II
D7949	RECONSTRUCT MIDFACE W/GRAFT	\$18,519.51	II
D7950	MANDIBLE GRAFT	\$3,583.25	II
D7951	SINUS AUG W BONE OR BONE SUB	\$3,798.77	II
D7952	SINUS AUGMENTATION VERTICAL	\$2,556.92	II
D7953	BONE REPLACEMENT GRAFT	\$781.47	II
D7955	REPAIR MAXILLOFACIAL DEFECTS	\$4,218.30	II
D7960	FRENULECTOMY/FRENECTOMY	\$539.28	II
D7963	FRENULOPLASTY	\$739.09	II
D7970	EXCISION HYPERPLASTIC TISSUE	\$702.48	II
D7971	EXCISION PERICORONAL GINGIVA	\$315.41	II
D7972	SURG REDCT FIBROUS TUBEROSIT	\$968.72	II
D7980	SIALOLITHOTOMY	\$1,113.08	II
D7981	EXCISION OF SALIVARY GLAND	\$716.77	II
D7982	SIALODOCHOPLASTY	\$2,478.28	II
D7983	CLOSURE OF SALIVARY FISTULA	\$2,306.71	II
D7990	EMERGENCY TRACHEOTOMY	\$2,153.46	II
D7991	DENTAL CORONOIDECTOMY	\$5,334.23	II
D7995	SYNTHETIC GRAFT FACIAL BONES	\$539.11	II
D7996	IMPLANT MANDIBLE FOR AUGMENT	\$2,266.73	II
D7997	APPLIANCE REMOVAL	\$432.05	II

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TABLE I. — OUTPATIENT DENTAL PROFESSIONAL NATIONWIDE CHARGES BY HCPCS CODE

HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D7998	INTRAORAL PLACE OF FIX DEV	\$2,460.55	II
D7999	ORAL SURGERY PROCEDURE	\$781.47	II
D8010	LIMITED DENTAL TX PRIMARY	\$2,804.88	III
D8020	LIMITED DENTAL TX TRANSITION	\$3,148.03	III
D8030	LIMITED DENTAL TX ADOLESCENT	\$3,798.77	III
D8040	LIMITED DENTAL TX ADULT	\$4,204.70	III
D8050	INTERCEP DENTAL TX PRIMARY	\$3,246.37	III
D8060	INTERCEP DENTAL TX TRANSITN	\$3,475.49	III
D8070	COMPRES DENTAL TX TRANSITION	\$6,296.06	III
D8080	COMPRES DENTAL TX ADOLESCENT	\$6,403.82	III
D8090	COMPRES DENTAL TX ADULT	\$6,512.63	III
D8210	ORTHODONTIC REM APPLIANCE TX	\$1,082.82	III
D8220	FIXED APPLIANCE THERAPY HABT	\$1,179.07	III
D8660	PREORTHODONTIC TX VISIT	\$545.07	III
D8670	PERIODIC ORTHODONTIC TX VISIT	\$355.71	III
D8680	ORTHODONTIC RETENTION	\$646.55	III
D8681	REMOVABLE RETAINER ADJUST	\$1,082.82	III
D8690	ORTHODONTIC TREATMENT	\$431.04	III
D8691	REPAIR ORTHO APPLIANCE	\$272.01	III
D8692	REPLACEMENT RETAINER	\$412.20	III
D8693	REBOND/RECEMENT RETAINERS	\$402.79	III
D8694	REPAIR FIXED RETAINERS	\$378.73	III
D8999	ORTHODONTIC PROCEDURE	\$355.71	III
D9110	TX DENTAL PAIN MINOR PROC	\$158.88	II
D9120	FIX PARTIAL DENTURE SECTION	\$227.62	III
D9210	DENT ANESTHESIA W/O SURGERY	\$73.43	II
D9211	REGIONAL BLOCK ANESTHESIA	\$86.72	II
D9212	TRIGEMINAL BLOCK ANESTHESIA	\$204.16	II
D9215	LOCAL ANESTHESIA	\$63.47	II
D9219	EVAL FOR DEEP SED/GEN ANESTH	\$119.23	II
D9223	GENERAL ANESTHESIA EACH 15M	\$245.60	II
D9230	ANALGESIA	\$95.04	II
D9243	IV SEDATION EACH 15M	\$207.82	II
D9248	SEDATION (NON-IV)	\$260.72	II
D9310	DENTAL CONSULTATION	\$172.06	I
D9410	DENTAL HOUSE CALL	\$244.32	I
D9420	HOSPITAL/ASC CALL	\$345.62	I
D9430	OFFICE VISIT DURING HOURS	\$103.57	I
D9440	OFFICE VISIT AFTER HOURS	\$161.42	I
D9450	CASE PRESENTATION TX PLAN	\$130.40	I
D9610	DENT THERAPEUTIC DRUG INJECT	\$136.01	III
D9612	THERA PAR DRUGS 2 OR > ADMIN	\$219.70	III
D9630	DRUGS/MEDS DISP FOR HOME USE	\$54.40	III
D9910	DENT APPL DESENSITIZING MED	\$77.29	III
D9911	APPL DESENSITIZING RESIN	\$101.51	III
D9920	BEHAVIOR MANAGEMENT	\$190.41	III
D9930	TREATMENT OF COMPLICATIONS	\$161.12	III
D9932	CLEAN & INSPECT REM DENT MAX	\$181.90	III
D9933	CLEAN & INSPECT REM DENT MAN	\$181.90	III
D9934	CLEAN REM PART DENTURE MAX	\$181.90	III
D9935	CLEAN REM PART DENTURE MAND	\$181.90	III
D9940	DENTAL OCCLUSAL GUARD	\$679.13	III
D9941	FABRICATION ATHLETIC GUARD	\$279.42	III
D9942	REPAIR/RELINING OCCLUSAL GUARD	\$285.40	III

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TABLE I. — OUTPATIENT DENTAL PROFESSIONAL NATIONWIDE CHARGES BY HCPCS CODE

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HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D9943	OCCLUSAL GUARD ADJUSTMENT	\$205.14	III
D9950	OCCLUSION ANALYSIS	\$418.02	III
D9951	LIMITED OCCLUSAL ADJUSTMENT	\$211.77	III
D9952	COMPLETE OCCLUSAL ADJUSTMENT	\$850.39	III
D9970	ENAMEL MICROABRASION	\$178.36	III
D9971	ODONTOPLASTY 1-2 TEETH	\$170.14	III
D9972	EXTRNL BLEACHING PER ARCH	\$421.79	III
D9973	EXTRNL BLEACHING PER TOOTH	\$176.14	III
D9974	INTRNL BLEACHING PER TOOTH	\$362.40	III
D9975	EXTERNAL BLEACHING HOME APP	\$401.39	III
D9999	ADJUNCTIVE PROCEDURE	\$172.06	III