

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

v3.25 (January - December 2019)

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HCPCS Code	HCPCS Code Description	Charge	GAAP Category
D0120	PERIODIC ORAL EVALUATION	\$66.73	I
D0140	LIMIT ORAL EVAL PROBLM FOCUS	\$100.98	I
D0145	ORAL EVALUATION, PT < 3YRS	\$95.76	I
D0150	COMPREHENSVE ORAL EVALUATION	\$112.46	I
D0160	EXTENSV ORAL EVAL PROB FOCUS	\$215.70	I
D0170	RE-EVAL,EST PT,PROBLEM FOCUS	\$86.64	I
D0171	RE-EVAL POST-OP VISIT	\$84.17	I
D0180	COMP PERIODONTAL EVALUATION	\$126.30	I
D0190	SCREENING OF A PATIENT	\$84.22	I
D0191	ASSESSMENT OF A PATIENT	\$73.75	I
D0210	INTRAOR COMPLETE FILM SERIES	\$172.22	I
D0220	INTRAORAL PERIAPICAL FIRST	\$37.87	I
D0230	INTRAORAL PERIAPICAL EA ADD	\$32.30	I
D0240	INTRAORAL OCCLUSAL FILM	\$54.72	I
D0250	EXTRAORAL 2D PROJECT IMAGE	\$75.96	I
D0251	EXTRAORAL POSTERIOR IMAGE	\$75.56	I
D0270	DENTAL BITEWING SINGLE IMAGE	\$36.81	I
D0272	DENTAL BITEWINGS TWO IMAGES	\$58.79	I
D0273	BITEWINGS - THREE IMAGES	\$71.14	I
D0274	BITEWINGS FOUR IMAGES	\$83.41	I
D0277	VERT BITEWINGS 7 TO 8 IMAGES	\$125.12	I
D0310	DENTAL SALIOGRAPHY	\$473.47	I
D0320	DENTAL TMJ ARTHROGRAM INCL I	\$792.13	I
D0321	OTHER TMJ IMAGES BY REPORT	\$262.66	I
D0322	DENTAL TOMOGRAPHIC SURVEY	\$660.31	I
D0330	PANORAMIC IMAGE	\$145.45	I
D0340	2D CEPHALOMETRIC IMAGE	\$160.98	I
D0350	ORAL/FACIAL PHOTO IMAGES	\$85.72	I
D0351	3D PHOTOGRAPHIC IMAGE	\$96.10	I
D0364	CONE BEAM CT CAPT & INTERP	\$385.87	I
D0365	CONE BEAM CT INTERPRETE MAN	\$430.15	I
D0366	CONE BEAM CT INTERPRETE MAX	\$422.21	I
D0367	CONE BEAM CT INTERP BOTH JAW	\$446.80	I
D0368	CONE BEAM CT INTERPRETE TMJ	\$481.92	I
D0369	MAX MRI CAPTURE & INTERPRETE	\$822.53	I
D0370	MAX ULTRASOUND CAPT & INTERP	\$398.56	I
D0371	SIALOENDOSCOPY CAPT & INTERP	\$658.49	I
D0380	CONE BEAM CT CAPTURE LIMITED	\$369.73	I
D0381	CONE BEAM CT CAPT MANDIBLE	\$435.45	I
D0382	CONE BEAM CT CAPT MAXILLA	\$438.47	I
D0383	CONE BEAM CT BOTH JAWS	\$458.91	I
D0384	CONE BEAM CT CAPTURE TMJ	\$474.24	I
D0385	MAX MRI IMAGE CAPTURE	\$1,547.83	I
D0386	MAX ULTRASOUND IMAGE CAPTURE	\$598.91	I
D0391	IMTERPRETE DIAGNOSTIC IMAGE	\$362.03	I
D0393	TRTMNT SIMULATION 3D IMAGE	\$416.49	I
D0394	DIGITAL SUB 2 OR MORE IMAGES	\$379.86	I
D0395	FUSION 2 OR MORE 3D IMAGES	\$423.85	I
D0414	LAB PROCESS MICROBIAL SPEC	\$66.49	I
D0415	COLLECTION OF MICROORGANISMS	\$139.73	I
D0416	VIRAL CULTURE	\$141.55	I
D0417	COLLECT & PREP SALIVA SAMPLE	\$159.17	I
D0418	ANALYSIS OF SALIVA SAMPLE	\$133.41	I

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D0422	COLLECT & PREP GENETIC SAMP	\$118.47	I
D0423	GENETIC TEST SPEC ANALYSIS	\$195.73	I
D0425	CARIES SUSCEPTIBILITY TEST	\$77.22	I
D0431	DIAG TST DETECT MUCOS ABNORM	\$78.81	I
D0460	PULP VITALITY TEST	\$70.71	I
D0470	DIAGNOSTIC CASTS	\$150.74	I
D0472	GROSS EXAM, PREP & REPORT	\$127.43	I
D0473	MICRO EXAM, PREP & REPORT	\$201.57	I
D0474	MICRO W EXAM OF SURG MARGINS	\$239.85	I
D0475	DECALCIFICATION PROCEDURE	\$188.38	I
D0476	SPEC STAINS FOR MICROORGANIS	\$238.49	I
D0477	SPEC STAINS NOT FOR MICROORG	\$261.46	I
D0478	IMMUNOHISTOCHEMICAL STAINS	\$175.18	I
D0479	TISSUE IN-SITU HYBRIDIZATION	\$250.06	I
D0480	CYTOPATH SMEAR PREP & REPORT	\$176.65	I
D0481	ELECTRON MICROSCOPY	\$386.78	I
D0482	DIRECT IMMUNOFLUORESCENCE	\$151.06	I
D0483	INDIRECT IMMUNOFLUORESCENCE	\$160.92	I
D0484	CONSULT SLIDES PREP ELSEWHERE	\$230.29	I
D0485	CONSULT INC PREP OF SLIDES	\$306.55	I
D0486	ACCESS OF TRANSEP CYTOL SAMP	\$186.82	I
D0502	OTHER ORAL PATHOLOGY PROCEDU	\$203.47	I
D0601	CARIES RISK ASSESS LOW RISK	\$100.25	I
D0602	CARIES RISK ASSESS MOD RISK	\$98.31	I
D0603	CARIES RISK ASSESS HIGH RISK	\$97.96	I
D0999	UNSPECIFIED DIAGNOSTIC PROCE	\$83.41	I
D1110	DENTAL PROPHYLAXIS ADULT	\$116.47	I
D1120	DENTAL PROPHYLAXIS CHILD	\$89.31	I
D1206	TOPICAL FLUORIDE VARNISH	\$57.95	I
D1208	TOPICAL APP FLUORID EX VRNSH	\$50.98	I
D1310	NUTRI COUNSEL-CONTROL CARIES	\$74.46	I
D1320	TOBACCO COUNSELING	\$83.48	I
D1330	ORAL HYGIENE INSTRUCTION	\$78.34	I
D1351	DENTAL SEALANT PER TOOTH	\$73.11	I
D1352	PREV RESIN REST, PERM TOOTH	\$116.06	I
D1353	SEALANT REPAIR PER TOOTH	\$87.53	I
D1354	INT CARIES MED APP PER TOOTH	\$89.99	I
D1510	SPACE MAINTAINER FXD UNILAT	\$417.82	II
D1520	REMOVE UNILAT SPACE MAINTAIN	\$480.95	II
D1550	RECEMENT SPACE MAINTAINER	\$102.20	II
D1555	REMOVE FIX SPACE MAINTAINER	\$98.73	II
D1575	DIST SPACE MAINT, FIXED UNIL	\$483.91	II
D1999	UNSPECIFIED PREVENTIVE PROC	\$78.34	II
D2140	AMALGAM ONE SURFACE PERMANEN	\$180.94	II
D2150	AMALGAM TWO SURFACES PERMANE	\$230.89	II
D2160	AMALGAM THREE SURFACES PERMA	\$280.60	II
D2161	AMALGAM 4 OR > SURFACES PERM	\$335.94	II
D2330	RESIN ONE SURFACE-ANTERIOR	\$210.09	II
D2331	RESIN TWO SURFACES-ANTERIOR	\$256.79	II
D2332	RESIN THREE SURFACES-ANTERIO	\$309.63	II
D2335	RESIN 4/> SURF OR W INCIS AN	\$376.89	II
D2390	ANT RESIN-BASED CMPST CROWN	\$499.23	II
D2391	POST 1 SRFC RESINBASED CMPST	\$229.13	II

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D2392	POST 2 SRFC RESINBASED CMPST	\$290.17	II
D2393	POST 3 SRFC RESINBASED CMPST	\$357.97	II
D2394	POST >=4SRFC RESINBASE CMPST	\$438.98	II
D2410	DENTAL GOLD FOIL ONE SURFACE	\$635.35	III
D2420	DENTAL GOLD FOIL TWO SURFACE	\$803.66	III
D2430	DENTAL GOLD FOIL THREE SURFA	\$1,086.80	III
D2510	DENTAL INLAY METALIC 1 SURF	\$1,081.25	III
D2520	DENTAL INLAY METALLIC 2 SURF	\$1,173.74	III
D2530	DENTAL INLAY METL 3/MORE SUR	\$1,293.22	III
D2542	DENTAL ONLAY METALLIC 2 SURF	\$1,294.10	III
D2543	DENTAL ONLAY METALLIC 3 SURF	\$1,338.18	III
D2544	DENTAL ONLAY METL 4/MORE SUR	\$1,398.81	III
D2610	INLAY PORCELAIN/CERAMIC 1 SU	\$1,198.85	III
D2620	INLAY PORCELAIN/CERAMIC 2 SU	\$1,247.09	III
D2630	DENTAL ONLAY PORC 3/MORE SUR	\$1,321.75	III
D2642	DENTAL ONLAY PORCELIN 2 SURF	\$1,297.34	III
D2643	DENTAL ONLAY PORCELIN 3 SURF	\$1,366.52	III
D2644	DENTAL ONLAY PORC 4/MORE SUR	\$1,436.13	III
D2650	INLAY COMPOSITE/RESIN ONE SU	\$971.59	III
D2651	INLAY COMPOSITE/RESIN TWO SU	\$1,051.27	III
D2652	DENTAL INLAY RESIN 3/MRE SUR	\$1,096.11	III
D2662	DENTAL ONLAY RESIN 2 SURFACE	\$1,039.49	III
D2663	DENTAL ONLAY RESIN 3 SURFACE	\$1,133.44	III
D2664	DENTAL ONLAY RESIN 4/MRE SUR	\$1,190.84	III
D2710	CROWN RESIN-BASED INDIRECT	\$907.44	III
D2712	CROWN 3/4 RESIN-BASED COMPOS	\$950.41	III
D2720	CROWN RESIN W/ HIGH NOBLE ME	\$1,378.00	III
D2721	CROWN RESIN W/ BASE METAL	\$1,300.71	III
D2722	CROWN RESIN W/ NOBLE METAL	\$1,332.09	III
D2740	CROWN PORCELAIN/CERAMIC	\$1,453.39	III
D2750	CROWN PORCELAIN W/ H NOBLE M	\$1,427.84	III
D2751	CROWN PORCELAIN FUSED BASE M	\$1,335.63	III
D2752	CROWN PORCELAIN W/ NOBLE MET	\$1,368.75	III
D2780	CROWN 3/4 CAST HI NOBLE MET	\$1,388.34	III
D2781	CROWN 3/4 CAST BASE METAL	\$1,315.86	III
D2782	CROWN 3/4 CAST NOBLE METAL	\$1,341.35	III
D2783	CROWN 3/4 PORCELAIN/CERAMIC	\$1,404.34	III
D2790	CROWN FULL CAST HIGH NOBLE M	\$1,429.60	III
D2791	CROWN FULL CAST BASE METAL	\$1,299.74	III
D2792	CROWN FULL CAST NOBLE METAL	\$1,348.14	III
D2794	CROWN-TITANIUM	\$1,403.72	III
D2799	PROVISIONAL CROWN	\$570.69	III
D2910	RECEMENT INLAY ONLAY OR PART	\$139.43	III
D2915	RECEMENT CAST OR PREFAB POST	\$140.83	III
D2920	RE-CEMENT OR RE-BOND CROWN	\$139.77	III
D2921	REATTACH TOOTH FRAGMENT	\$267.18	III
D2929	PREFAB PORC/CERAM CROWN PRI	\$493.77	III
D2930	PREFAB STNLSS STEEL CRWN PRI	\$348.41	III
D2931	PREFAB STNLSS STEEL CROWN PE	\$404.51	III
D2932	PREFABRICATED RESIN CROWN	\$441.62	III
D2933	PREFAB STAINLESS STEEL CROWN	\$478.67	III
D2934	PREFAB STEEL CROWN PRIMARY	\$475.67	III
D2940	PROTECTIVE RESTORATION	\$149.10	III

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HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D2941	INT THERAPEUTIC RESTORATION	\$190.31	III
D2949	RESTORATIVE FOUNDATION	\$209.33	III
D2950	CORE BUILD-UP INCL ANY PINS	\$341.56	III
D2951	TOOTH PIN RETENTION	\$88.27	III
D2952	POST AND CORE CAST + CROWN	\$533.36	III
D2953	EACH ADDTNL CAST POST	\$338.54	III
D2954	PREFAB POST/CORE + CROWN	\$429.82	III
D2955	POST REMOVAL	\$353.21	III
D2957	EACH ADDTNL PREFAB POST	\$242.12	III
D2960	LAMINATE LABIAL VENEER	\$951.42	III
D2961	LAB LABIAL VENEER RESIN	\$1,232.78	III
D2962	LAB LABIAL VENEER PORCELAIN	\$1,384.06	III
D2971	ADD PROC CONSTRUCT NEW CROWN	\$279.64	III
D2975	COPING	\$704.03	III
D2980	CROWN REPAIR	\$314.09	III
D2981	INLAY REPAIR	\$310.39	III
D2982	ONLAY REPAIR	\$311.80	III
D2983	VENEER REPAIR	\$318.84	III
D2990	RESIN INFILTRATION OF LESION	\$165.21	III
D2999	DENTAL UNSPEC RESTORATIVE PR	\$290.17	III
D3110	PULP CAP DIRECT	\$115.57	II
D3120	PULP CAP INDIRECT	\$104.25	II
D3220	THERAPEUTIC PULPOTOMY	\$259.50	II
D3221	GROSS PULPAL DEBRIDEMENT	\$289.66	II
D3222	PART PULP FOR APEXOGENESIS	\$318.04	II
D3230	PULPAL THERAPY ANTERIOR PRIM	\$300.06	II
D3240	PULPAL THERAPY POSTERIOR PRI	\$344.31	II
D3310	END THXPY, ANTERIOR TOOTH	\$957.78	II
D3320	END THXPY, PREMOLAR TOOTH	\$1,130.74	II
D3330	END THXPY, MOLAR TOOTH	\$1,388.79	II
D3331	NON-SURG TX ROOT CANAL OBS	\$601.98	II
D3332	INCOMPLETE ENDODONTIC TX	\$639.39	II
D3333	INTERNAL ROOT REPAIR	\$386.33	II
D3346	RETREAT ROOT CANAL ANTERIOR	\$1,189.32	II
D3347	RETREAT ROOT CANAL PREMOLAR	\$1,370.89	II
D3348	RETREAT ROOT CANAL MOLAR	\$1,675.62	II
D3351	APEXIFICATION/RECALC INITIAL	\$509.09	II
D3352	APEXIFICATION/RECALC INTERIM	\$295.16	II
D3353	APEXIFICATION/RECALC FINAL	\$719.15	II
D3355	PULPAL REGENERATION INITIAL	\$547.66	II
D3356	PULPAL REGENERATION INTERIM	\$297.80	II
D3357	PULPAL REGENERATION COMPLETE	\$670.61	II
D3410	APICOECTOMY - ANTERIOR	\$1,008.89	II
D3421	ROOT SURGERY PREMOLAR	\$1,130.49	II
D3425	ROOT SURGERY MOLAR	\$1,271.50	II
D3426	ROOT SURGERY EA ADD ROOT	\$507.12	II
D3427	PERIRADICULAR SURGERY	\$944.99	II
D3428	BONE GRAFT PERI PER TOOTH	\$1,114.03	II
D3429	BONE GRAFT PERI EACH ADDL	\$1,032.03	II
D3430	RETROGRADE FILLING	\$355.93	II
D3431	BIOLOGICAL MATERIALS	\$1,183.34	II
D3432	GUIDED TISSUE REGENERATION	\$1,102.32	II
D3450	ROOT AMPUTATION	\$680.75	II

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HCPCS Code	HCPCS Code Description	Charge	GAAP Category
D3460	ENDODONTIC ENDOSSEOUS IMPLAN	\$2,312.63	II
D3470	INTENTIONAL REPLANTATION	\$1,196.01	II
D3910	ISOLATION- TOOTH W RUBB DAM	\$246.76	II
D3920	TOOTH SPLITTING	\$572.88	II
D3950	CANAL PREP/FITTING OF DOWEL	\$293.04	II
D3999	ENDODONTIC PROCEDURE	\$1,130.74	II
D4210	GINGIVECTOMY/PLASTY 4 OR MOR	\$864.89	II
D4211	GINGIVECTOMY/PLASTY 1 TO 3	\$417.56	II
D4212	GINGIVECTOMY/PLASTY REST	\$353.95	II
D4230	ANA CROWN EXP 4 OR> PER QUAD	\$1,175.27	II
D4231	ANA CROWN EXP 1-3 PER QUAD	\$689.13	II
D4240	GINGIVAL FLAP PROC W/ PLANIN	\$1,052.73	II
D4241	GNGVL FLAP W ROOTPLAN 1-3 TH	\$735.87	II
D4245	APICALLY POSITIONED FLAP	\$948.83	II
D4249	CROWN LENGTHEN HARD TISSUE	\$1,133.81	II
D4260	OSSEOUS SURGERY 4 OR MORE	\$1,671.30	II
D4261	OSSEOUS SURG 1 TO 3 TEETH	\$1,093.46	II
D4263	BONE REPLCE GRAFT FIRST SITE	\$777.76	II
D4264	BONE REPLCE GRAFT EACH ADD	\$645.14	II
D4265	BIO MTRLS TO AID SOFT/OS REG	\$746.75	II
D4266	GUIDED TISS REGEN RESORBLE	\$843.24	II
D4267	GUIDED TISS REGEN NONRESORB	\$1,037.66	II
D4268	SURGICAL REVISION PROCEDURE	\$1,044.81	II
D4270	PEDICLE SOFT TISSUE GRAFT PR	\$1,232.61	II
D4273	AUTO TISSUE GRAFT 1ST TOOTH	\$1,550.85	II
D4274	MESIAL/DISTAL WEDGE PROC	\$902.09	II
D4275	NON-AUTO GRAFT 1ST TOOTH	\$1,303.17	II
D4276	CON TISSUE W DBLE PED GRAFT	\$1,653.69	II
D4277	SOFT TISSUE GRAFT FIRSTTOOTH	\$1,344.27	II
D4278	SOFT TISSUE GRAFT ADDL TOOTH	\$723.56	II
D4283	AUTO TISSUE GRAFT ADDL TOOTH	\$1,345.68	II
D4285	NON-AUTO GRAFT ADDL TOOTH	\$1,097.31	II
D4320	PROVISION SPLNT INTRACORONAL	\$607.49	II
D4321	PROVISIONAL SPLINT EXTRACORO	\$554.38	II
D4341	PERIODONTAL SCALING & ROOT	\$322.22	II
D4342	PERIODONTAL SCALING 1-3TEETH	\$214.41	II
D4346	SCALING GINGIV INFLAMMATION	\$193.72	II
D4355	FULL MOUTH DEBRIDEMENT	\$223.52	II
D4381	LOCALIZED DELIVERY ANTIMICRO	\$163.30	II
D4910	PERIODONTAL MAINT PROCEDURES	\$177.53	II
D4920	UNSCHEDULED DRESSING CHANGE	\$137.33	II
D4921	GINGIVAL IRRIGATION PER QUAD	\$110.45	II
D4999	UNSPECIFIED PERIODONTAL PROC	\$193.72	II
D5110	DENTURES COMPLETE MAXILLARY	\$2,125.77	III
D5120	DENTURES COMPLETE MANDIBLE	\$2,140.57	III
D5130	DENTURES IMMEDIAT MAXILLARY	\$2,289.59	III
D5140	DENTURES IMMEDIAT MANDIBLE	\$2,292.59	III
D5211	DENTURES MAXILL PART RESIN	\$1,740.85	III
D5212	DENTURES MAND PART RESIN	\$1,872.11	III
D5213	DENTURES MAXILL PART METAL	\$2,265.11	III
D5214	DENTURES MANDIBL PART METAL	\$2,268.99	III
D5221	IMMED MAX PART DENTURE RESIN	\$1,891.46	III
D5222	IMMED MAN PART DENTURE RESIN	\$2,025.33	III

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D5223	IMMED MAX PART DENT METAL	\$2,346.79	III
D5224	IMMED MAND PART DENT METAL	\$2,375.32	III
D5225	MAXILLARY PART DENTURE FLEX	\$1,842.12	III
D5226	MANDIBULAR PART DENTURE FLEX	\$1,971.09	III
D5410	DENTURES ADJUST CMLPT MAXIL	\$113.37	III
D5411	DENTURES ADJUST CMLPT MAND	\$112.49	III
D5421	DENTURES ADJUST PART MAXILL	\$112.49	III
D5422	DENTURES ADJUST PART MANDBL	\$112.49	III
D5511	REP BROKE COMP DENT BASE MAN	\$232.39	III
D5512	REP BROKE COMP DENT BASE MAX	\$232.39	III
D5520	REPLACE DENTURE TEETH COMPLT	\$215.96	III
D5611	REP RESIN PART DENT BASE MAN	\$241.80	III
D5612	REP RESIN PART DENT BASE MAX	\$241.80	III
D5621	REP CAST PART FRAME MAN	\$282.41	III
D5622	REP CAST PART FRAME MAX	\$282.41	III
D5630	REP PARTIAL DENTURE CLASP	\$328.56	III
D5640	REPLACE PART DENTURE TEETH	\$229.28	III
D5650	ADD TOOTH TO PARTIAL DENTURE	\$285.72	III
D5660	ADD CLASP TO PARTIAL DENTURE	\$338.18	III
D5670	REPLC TTH&ACRLC ON MTL FRMWK	\$884.18	III
D5671	REPLC TTH&ACRLC MANDIBULAR	\$892.28	III
D5710	DENTURES REBASE CMLPT MAXIL	\$791.41	III
D5711	DENTURES REBASE CMLPT MAND	\$769.89	III
D5720	DENTURES REBASE PART MAXILL	\$748.87	III
D5721	DENTURES REBASE PART MANDBL	\$748.87	III
D5730	DENTURE RELN CMLPT MAXIL CH	\$474.04	III
D5731	DENTURE RELN CMLPT MAND CHR	\$472.63	III
D5740	DENTURE RELN PART MAXIL CHR	\$449.33	III
D5741	DENTURE RELN PART MAND CHR	\$451.09	III
D5750	DENTURE RELN CMLPT MAX LAB	\$606.34	III
D5751	DENTURE RELN CMLPT MAND LAB	\$609.69	III
D5760	DENTURE RELN PART MAXIL LAB	\$597.31	III
D5761	DENTURE RELN PART MAND LAB	\$598.19	III
D5810	DENTURE INTERM CMLPT MAXILL	\$1,056.70	III
D5811	DENTURE INTERM CMLPT MANDBL	\$1,101.87	III
D5820	DENTURE INTERM PART MAXILL	\$838.59	III
D5821	DENTURE INTERM PART MANDBL	\$857.00	III
D5850	DENTURE TISS CONDITN MAXILL	\$231.51	III
D5851	DENTURE TISS CONDTIN MANDBL	\$230.46	III
D5862	PRECISION ATTACHMENT	\$931.72	III
D5863	OVERDENTURE COMPLETE MAX	\$2,513.25	III
D5864	OVERDENTURE PARTIAL MAX	\$2,829.19	III
D5865	OVERDENTURE COMPLETE MANDIB	\$2,549.00	III
D5866	OVERDENTURE PARTIAL MANDIB	\$2,887.08	III
D5867	REPLACEMENT OF PRECISION ATT	\$523.73	III
D5875	PROSTHESIS MODIFICATION	\$582.39	III
D5899	REMOVABLE PROSTHODONTIC PROC	\$523.73	III
D5911	FACIAL MOULAGE SECTIONAL	\$575.96	III
D5912	FACIAL MOULAGE COMPLETE	\$592.69	III
D5913	NASAL PROSTHESIS	\$9,359.78	III
D5914	AURICULAR PROSTHESIS	\$9,671.32	III
D5915	ORBITAL PROSTHESIS	\$14,037.28	III
D5916	OCULAR PROSTHESIS	\$3,744.10	III

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D5919	FACIAL PROSTHESIS	\$1,610.93	III
D5922	NASAL SEPTAL PROSTHESIS	\$1,610.93	III
D5923	OCULAR PROSTHESIS INTERIM	\$1,610.93	III
D5924	CRANIAL PROSTHESIS	\$1,227.13	III
D5925	FACIAL AUGMENTATION IMPLANT	\$394.75	III
D5926	REPLACEMENT NASAL PROSTHESIS	\$1,610.93	III
D5927	AURICULAR REPLACEMENT	\$1,610.93	III
D5928	ORBITAL REPLACEMENT	\$1,610.93	III
D5929	FACIAL REPLACEMENT	\$1,610.93	III
D5931	SURGICAL OBTURATOR	\$5,585.15	III
D5932	POSTSURGICAL OBTURATOR	\$10,445.57	III
D5933	REFITTING OF OBTURATOR	\$321.50	III
D5934	MANDIBULAR FLANGE PROSTHESIS	\$9,520.62	III
D5935	MANDIBULAR DENTURE PROSTH	\$8,283.80	III
D5936	TEMP OBTURATOR PROSTHESIS	\$9,304.44	III
D5937	TRISMUS APPLIANCE	\$1,057.95	III
D5951	FEEDING AID	\$1,397.21	III
D5952	PEDIATRIC SPEECH AID	\$4,936.62	III
D5953	ADULT SPEECH AID	\$9,375.32	III
D5954	SUPERIMPOSED PROSTHESIS	\$8,687.81	III
D5955	PALATAL LIFT PROSTHESIS	\$8,035.73	III
D5958	INTRAORAL CON DEF INTER PLT	\$1,610.93	III
D5959	INTRAORAL CON DEF MOD PALAT	\$1,610.93	III
D5960	MODIFY SPEECH AID PROSTHESIS	\$581.05	III
D5982	SURGICAL STENT	\$695.60	III
D5983	RADIATION APPLICATOR	\$1,771.94	III
D5984	RADIATION SHIELD	\$1,771.94	III
D5985	RADIATION CONE LOCATOR	\$1,771.94	III
D5986	FLUORIDE APPLICATOR	\$226.00	III
D5987	COMMISSURE SPLINT	\$2,012.71	III
D5988	SURGICAL SPLINT	\$759.90	III
D5991	VESICULOBULLOUS DISEASE CARR	\$252.58	III
D5992	ADJUST MAX PROST APPLIANCE	\$619.90	III
D5993	MAIN/CLEAN MAX PROSTHESIS	\$619.90	III
D5994	PERIDONTAL MEDICAMENT	\$210.98	III
D5999	MAXILLOFACIAL PROSTHESIS	\$9,375.32	III
D6010	ODONTICS ENDOSTEAL IMPLANT	\$2,893.06	III
D6011	SECOND STAGE IMPLANT SURGERY	\$1,016.19	III
D6012	ENDOSTEAL IMPLANT	\$2,625.84	III
D6013	SURGICAL PLACE MINI IMPLANT	\$2,419.79	III
D6040	ODONTICS EPOSTEAL IMPLANT	\$10,372.95	III
D6050	ODONTICS TRANSOSTEAL IMPLNT	\$7,670.51	III
D6051	INTERIM ABUTMENT	\$696.53	III
D6052	SEMI PRECISION ATTACH ABUT	\$1,241.32	III
D6055	IMPLANT CONNECTING BAR	\$2,523.12	III
D6056	PREFABRICATED ABUTMENT	\$830.34	III
D6057	CUSTOM ABUTMENT	\$994.41	III
D6058	ABUTMENT SUPPORTED CROWN	\$1,847.75	III
D6059	ABUTMENT SUPPORTED MTL CROWN	\$1,852.53	III
D6060	ABUTMENT SUPPORTED MTL CROWN	\$1,746.95	III
D6061	ABUTMENT SUPPORTED MTL CROWN	\$1,770.94	III
D6062	ABUTMENT SUPPORTED MTL CROWN	\$1,804.35	III
D6063	ABUTMENT SUPPORTED MTL CROWN	\$1,652.72	III

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

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HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D6064	ABUTMENT SUPPORTED MTL CROWN	\$1,687.85	III
D6065	IMPLANT SUPPORTED CROWN	\$1,906.22	III
D6066	IMPLANT SUPPORTED MTL CROWN	\$1,861.36	III
D6067	IMPLANT SUPPORTED MTL CROWN	\$1,869.67	III
D6068	ABUTMENT SUPPORTED RETAINER	\$1,859.10	III
D6069	ABUTMENT SUPPORTED RETAINER	\$1,855.17	III
D6070	ABUTMENT SUPPORTED RETAINER	\$1,768.25	III
D6071	ABUTMENT SUPPORTED RETAINER	\$1,771.29	III
D6072	ABUTMENT SUPPORTED RETAINER	\$1,843.81	III
D6073	ABUTMENT SUPPORTED RETAINER	\$1,713.22	III
D6074	ABUTMENT SUPPORTED RETAINER	\$1,749.25	III
D6075	IMPLANT SUPPORTED RETAINER	\$1,893.19	III
D6076	IMPLANT SUPPORTED RETAINER	\$1,879.68	III
D6077	IMPLANT SUPPORTED RETAINER	\$1,882.00	III
D6080	IMPLANT MAINTENANCE	\$276.40	III
D6081	SCALE & DEBRIDE, SINGLE IMP	\$95.62	III
D6085	PROVISIONAL IMPLANT CROWN	\$571.18	III
D6090	REPAIR IMPLANT	\$956.56	III
D6091	REPL SEMI/PRECISION ATTACH	\$750.05	III
D6092	RECEMENT SUPP CROWN	\$174.89	III
D6093	RECEMENT SUPP PART DENTURE	\$235.28	III
D6094	ABUT SUPPORT CROWN TITANIUM	\$1,634.79	III
D6095	ODONTICS REPR ABUTMENT	\$929.61	III
D6096	REMOVE BROKEN IMP RET SCREW	\$478.28	III
D6100	REMOVAL OF IMPLANT	\$970.83	III
D6101	DEBRIDEMENT OF A PERIIMPLANT	\$718.66	III
D6102	DEBRIDEMENT & CONTOURING	\$940.55	III
D6103	BONE GRAFT REPAIR PERIMPLANT	\$780.24	III
D6104	BONE GRAFT TIME OF IMPLANT	\$755.58	III
D6110	IMPLNT/ABUT REMOV DENT MAX	\$3,119.07	III
D6111	IMPLNT/ABUT REMOV DENT MAND	\$3,070.82	III
D6112	IMP/ABUT REM DENT PART MAX	\$3,016.92	III
D6113	IMP/ABUT REM DENT PART MAND	\$3,032.96	III
D6114	IMPLNT/ABUT FIXED DENT MAX	\$7,918.25	III
D6115	IMPLNT/ABUT FIXED DENT MAND	\$8,060.50	III
D6116	IMP/ABUT FIXED DENT PART MAX	\$5,149.84	III
D6117	IMP/ABUT FIXED DENT PART MAN	\$5,597.55	III
D6118	IMP/ABUT INT FIXED DENT MAN	\$2,247.49	III
D6119	INT/ABUT INT FIXED DENT MAX	\$2,247.49	III
D6190	RADIO/SURGICAL IMPLANT INDEX	\$448.49	III
D6194	ABUT SUPPORT RETAINER TITANI	\$1,641.58	III
D6199	IMPLANT PROCEDURE	\$1,016.19	III
D6205	PONTIC-INDIRECT RESIN BASED	\$1,094.89	III
D6210	PROSTHODONT HIGH NOBLE METAL	\$1,413.71	III
D6211	BRIDGE BASE METAL CAST	\$1,331.94	III
D6212	BRIDGE NOBLE METAL CAST	\$1,360.47	III
D6214	PONTIC TITANIUM	\$1,406.55	III
D6240	BRIDGE PORCELAIN HIGH NOBLE	\$1,408.85	III
D6241	BRIDGE PORCELAIN BASE METAL	\$1,319.37	III
D6242	BRIDGE PORCELAIN NOBEL METAL	\$1,360.17	III
D6245	BRIDGE PORCELAIN/CERAMIC	\$1,431.33	III
D6250	BRIDGE RESIN W/HIGH NOBLE	\$1,375.79	III
D6251	BRIDGE RESIN BASE METAL	\$1,310.80	III

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

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HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D6252	BRIDGE RESIN W/NOBLE METAL	\$1,322.42	III
D6253	PROVISIONAL PONTIC	\$779.07	III
D6545	DENTAL RETAINR CAST METL	\$827.03	III
D6548	PORCELAIN/CERAMIC RETAINER	\$920.72	III
D6549	RESIN RETAINER	\$770.56	III
D6600	PORCELAIN/CERAMIC INLAY 2SRF	\$1,155.86	III
D6601	PORC/CERAM INLAY >= 3 SURFAC	\$1,192.60	III
D6602	CST HGH NBLE MTL INLAY 2 SRF	\$1,183.67	III
D6603	CST HGH NBLE MTL INLAY >=3SR	\$1,255.05	III
D6604	CST BSE MTL INLAY 2 SURFACES	\$1,170.70	III
D6605	CST BSE MTL INLAY >= 3 SURFA	\$1,210.44	III
D6606	CAST NOBLE METAL INLAY 2 SUR	\$1,162.13	III
D6607	CST NOBLE MTL INLAY >=3 SURF	\$1,233.92	III
D6608	ONLAY PORC/CRMC 2 SURFACES	\$1,226.65	III
D6609	ONLAY PORC/CRMC >=3 SURFACES	\$1,287.82	III
D6610	ONLAY CST HGH NBL MTL 2 SRFC	\$1,265.63	III
D6611	ONLAY CST HGH NBL MTL >=3SRF	\$1,368.40	III
D6612	ONLAY CST BASE MTL 2 SURFACE	\$1,248.30	III
D6613	ONLAY CST BASE MTL >=3 SURFA	\$1,284.29	III
D6614	ONLAY CST NBL MTL 2 SURFACES	\$1,230.99	III
D6615	ONLAY CST NBL MTL >=3 SURFAC	\$1,284.64	III
D6624	INLAY TITANIUM	\$1,224.72	III
D6634	ONLAY TITANIUM	\$1,265.52	III
D6710	CROWN-INDIRECT RESIN BASED	\$1,248.60	III
D6720	RETAIN CROWN RESIN W HI NBLE	\$1,369.87	III
D6721	CROWN RESIN W/BASE METAL	\$1,321.62	III
D6722	CROWN RESIN W/NOBLE METAL	\$1,338.70	III
D6740	CROWN PORCELAIN/CERAMIC	\$1,443.13	III
D6750	CROWN PORCELAIN HIGH NOBLE	\$1,427.82	III
D6751	CROWN PORCELAIN BASE METAL	\$1,327.61	III
D6752	CROWN PORCELAIN NOBLE METAL	\$1,361.18	III
D6780	CROWN 3/4 HIGH NOBLE METAL	\$1,366.00	III
D6781	CROWN 3/4 CAST BASED METAL	\$1,335.54	III
D6782	CROWN 3/4 CAST NOBLE METAL	\$1,298.38	III
D6783	CROWN 3/4 PORCELAIN/CERAMIC	\$1,388.42	III
D6790	CROWN FULL HIGH NOBLE METAL	\$1,400.46	III
D6791	CROWN FULL BASE METAL CAST	\$1,319.10	III
D6792	CROWN FULL NOBLE METAL CAST	\$1,354.84	III
D6793	PROVISIONAL RETAINER CROWN	\$641.45	III
D6794	CROWN TITANIUM	\$1,343.05	III
D6920	DENTAL CONNECTOR BAR	\$852.31	III
D6930	RECEMENT/BOND PART DENTURE	\$211.85	III
D6940	STRESS BREAKER	\$499.38	III
D6950	PRECISION ATTACHMENT	\$856.63	III
D6980	FIXED PARTIAL REPAIR	\$520.55	III
D6985	PEDIATRIC PARTIAL DENTURE FX	\$927.47	III
D6999	FIXED PROSTHODONTIC PROC	\$1,408.85	III
D7111	EXTRACTION CORONAL REMNANTS	\$171.62	II
D7140	EXTRACTION ERUPTED TOOTH/EXR	\$230.98	II
D7210	REM IMP TOOTH W MUCOPER FLP	\$362.27	II
D7220	IMPACT TOOTH REMOV SOFT TISS	\$418.12	II
D7230	IMPACT TOOTH REMOV PART BONY	\$540.71	II
D7240	IMPACT TOOTH REMOV COMP BONY	\$647.48	II

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

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HCPCS Code	HCPCS Code Description	Charge	GAAP Category
D7241	IMPACT TOOTH REM BONY W/COMP	\$783.31	II
D7250	TOOTH ROOT REMOVAL	\$379.53	II
D7251	CORONECTOMY	\$651.52	II
D7260	ORAL ANTRAL FISTULA CLOSURE	\$1,969.92	II
D7261	PRIMARY CLOSURE SINUS PERF	\$985.57	II
D7270	TOOTH REIMPLANTATION	\$735.30	II
D7272	TOOTH TRANSPLANTATION	\$965.15	II
D7280	EXPOSURE OF UNERUPTED TOOTH	\$653.69	II
D7282	MOBILIZE ERUPTED/MALPOS TOOT	\$487.65	II
D7283	PLACE DEVICE IMPACTED TOOTH	\$455.34	II
D7285	BIOPSY OF ORAL TISSUE HARD	\$1,001.62	II
D7286	BIOPSY OF ORAL TISSUE SOFT	\$517.93	II
D7287	EXFOLIATIVE CYTOLOG COLLECT	\$251.73	II
D7288	BRUSH BIOPSY	\$253.85	II
D7290	REPOSITIONING OF TEETH	\$609.52	II
D7291	TRANSSEPTAL FIBEROTOMY	\$395.84	II
D7292	SCREW RETAINED PLATE	\$2,368.88	II
D7293	TEMP ANCHORAGE DEV W FLAP	\$1,844.15	II
D7294	TEMP ANCHORAGE DEV W/O FLAP	\$1,242.89	II
D7295	BONE HARVEST,AUTO GRAFT PROC	\$1,248.80	II
D7310	ALVEOPLASTY W/ EXTRACTION	\$401.11	II
D7311	ALVEOLOPLASTY W/EXTRACT 1-3	\$382.21	II
D7320	ALVEOPLASTY W/O EXTRACTION	\$621.89	II
D7321	ALVEOLOPLASTY NOT W/EXTRACTS	\$558.90	II
D7340	VESTIBULOPLASTY RIDGE EXTENS	\$2,216.68	II
D7350	VESTIBULOPLASTY EXTEN GRAFT	\$5,626.62	II
D7410	RAD EXC LESION UP TO 1.25 CM	\$892.30	II
D7411	EXCISION BENIGN LESION>1.25C	\$1,377.04	II
D7412	EXCISION BENIGN LESION COMPL	\$1,681.25	II
D7413	EXCISION MALIG LESION<=1.25C	\$1,207.43	II
D7414	EXCISION MALIG LESION>1.25CM	\$1,808.94	II
D7415	EXCISION MALIG LES COMPLICAT	\$1,995.90	II
D7440	MALIG TUMOR EXC TO 1.25 CM	\$1,541.19	II
D7441	MALIG TUMOR > 1.25 CM	\$2,379.47	II
D7450	REM ODONTOGEN CYST TO 1.25CM	\$1,014.53	II
D7451	REM ODONTOGEN CYST > 1.25 CM	\$1,405.17	II
D7460	REM NONODONTO CYST TO 1.25CM	\$993.57	II
D7461	REM NONODONTO CYST > 1.25 CM	\$1,476.47	II
D7465	LESION DESTRUCTION	\$611.32	II
D7471	REM EXOSTOSIS ANY SITE	\$1,238.81	II
D7472	REMOVAL OF TORUS PALATINUS	\$1,481.18	II
D7473	REMOVE TORUS MANDIBULARIS	\$1,387.90	II
D7485	SURG REDUCT OSSEOUSTUBEROSIT	\$1,272.98	II
D7490	MAXILLA OR MANDIBLE RESECTIO	\$10,886.13	II
D7510	I&D ABSC INTRAORAL SOFT TISS	\$378.67	II
D7511	INCISION/DRAIN ABSCESS INTRA	\$565.00	II
D7520	I&D ABSCESS EXTRAORAL	\$1,370.02	II
D7521	INCISION/DRAIN ABSCESS EXTRA	\$1,571.15	II
D7530	REMOVAL FB SKIN/AREOLAR TISS	\$608.15	II
D7540	REMOVAL OF FB REACTION	\$840.08	II
D7550	REMOVAL OF SLOUGHED OFF BONE	\$640.20	II
D7560	MAXILLARY SINUSOTOMY	\$3,073.32	II
D7610	MAXILLA OPEN REDUCT SIMPLE	\$6,063.99	II

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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
D7620	CLSD REDUCT SIMPL MAXILLA FX	\$4,665.63	II
D7630	OPEN RED SIMPL MANDIBLE FX	\$7,149.95	II
D7640	CLSD RED SIMPL MANDIBLE FX	\$4,882.08	II
D7650	OPEN RED SIMP MALAR/ZYGOM FX	\$4,446.91	II
D7660	CLSD RED SIMP MALAR/ZYGOM FX	\$3,214.64	II
D7670	CLOSD RDUCTN SPLINT ALVEOLUS	\$2,089.11	II
D7671	ALVEOLUS OPEN REDUCTION	\$2,782.17	II
D7680	REDUCT SIMPLE FACIAL BONE FX	\$10,489.79	II
D7710	MAXILLA OPEN REDUCT COMPOUND	\$6,736.61	II
D7720	CLSD REDUCT COMPD MAXILLA FX	\$4,923.47	II
D7730	OPEN REDUCT COMPD MANDBLE FX	\$8,655.37	II
D7740	CLSD REDUCT COMPD MANDBLE FX	\$5,025.62	II
D7750	OPEN RED COMP MALAR/ZYGMA FX	\$6,209.24	II
D7760	CLSD RED COMP MALAR/ZYGMA FX	\$5,355.54	II
D7770	OPEN REDUC COMPD ALVEOLUS FX	\$3,669.91	II
D7771	ALVEOLUS CLSD REDUC STBLZ TE	\$2,703.00	II
D7780	REDUCT COMPD FACIAL BONE FX	\$13,696.26	II
D7810	TMJ OPEN REDUCT-DISLOCATION	\$6,477.61	II
D7820	CLOSED TMP MANIPULATION	\$1,045.76	II
D7830	TMJ MANIPULATION UNDER ANEST	\$1,005.16	II
D7840	REMOVAL OF TMJ CONDYLE	\$8,405.79	II
D7850	TMJ MENISCECTOMY	\$7,606.30	II
D7852	TMJ REPAIR OF JOINT DISC	\$8,496.43	II
D7854	TMJ EXCISN OF JOINT MEMBRANE	\$8,489.13	II
D7856	TMJ CUTTING OF A MUSCLE	\$5,970.99	II
D7858	TMJ RECONSTRUCTION	\$20,441.48	II
D7860	TMJ CUTTING INTO JOINT	\$8,712.79	II
D7865	TMJ RESHAPING COMPONENTS	\$11,969.76	II
D7870	TMJ ASPIRATION JOINT FLUID	\$620.25	II
D7871	LYSIS + LAVAGE W CATHETERS	\$1,016.10	II
D7872	TMJ DIAGNOSTIC ARTHROSCOPY	\$4,952.51	II
D7873	TMJ ARTHROSCOPY LYSIS ADHESN	\$5,963.19	II
D7874	TMJ ARTHROSCOPY DISC REPOSIT	\$8,553.43	II
D7875	TMJ ARTHROSCOPY SYNOVECTOMY	\$9,370.44	II
D7876	TMJ ARTHROSCOPY DISCECTOMY	\$10,102.73	II
D7877	TMJ ARTHROSCOPY DEBRIDEMENT	\$8,916.55	II
D7880	OCCLUSAL ORTHOTIC APPLIANCE	\$1,275.89	II
D7881	OCC ORTHOTIC DEVICE ADJUST	\$467.45	II
D7899	TMJ UNSPECIFIED THERAPY	\$1,275.89	II
D7910	DENT SUTUR RECENT WND TO 5CM	\$533.18	II
D7911	DENTAL SUTURE WOUND TO 5 CM	\$1,178.35	II
D7912	SUTURE COMPLICATE WND > 5 CM	\$2,047.84	II
D7920	DENTAL SKIN GRAFT	\$4,229.60	II
D7921	COLLECT & APPL BLOOD PRODUCT	\$511.85	II
D7940	RESHAPING BONE ORTHOGNATHIC	\$5,106.79	II
D7941	BONE CUTTING RAMUS CLOSED	\$11,828.02	II
D7943	CUTTING RAMUS OPEN W/GRAFT	\$11,132.48	II
D7944	BONE CUTTING SEGMENTED	\$9,549.44	II
D7945	BONE CUTTING BODY MANDIBLE	\$11,292.33	II
D7946	RECONSTRUCTION MAXILLA TOTAL	\$13,875.65	II
D7947	RECONSTRUCT MAXILLA SEGMENT	\$12,428.92	II
D7948	RECONSTRUCT MIDFACE NO GRAFT	\$15,360.66	II
D7949	RECONSTRUCT MIDFACE W/GRAFT	\$19,565.13	II

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

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HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D7950	MANDIBLE GRAFT	\$3,724.77	II
D7951	SINUS AUG W BONE OR BONE SUB	\$3,889.69	II
D7952	SINUS AUGMENTATION VERTICAL	\$2,605.45	II
D7953	BONE REPLACEMENT GRAFT	\$811.68	II
D7955	REPAIR MAXILLOFACIAL DEFECTS	\$4,408.13	II
D7960	FRENULECTOMY/FRENECTOMY	\$567.53	II
D7963	FRENULOPLASTY	\$785.42	II
D7970	EXCISION HYPERPLASTIC TISSUE	\$736.36	II
D7971	EXCISION PERICORONAL GINGIVA	\$329.85	II
D7972	SURG REDCT FIBROUS TUBEROSIT	\$1,031.11	II
D7979	NON-SURGICAL SIALOLITHOTOMY	\$591.29	II
D7980	SURGICAL SIALOLITHOTOMY	\$1,182.58	II
D7981	EXCISION OF SALIVARY GLAND	\$752.29	II
D7982	SIALODOCHOPLASTY	\$2,602.51	II
D7983	CLOSURE OF SALIVARY FISTULA	\$2,423.86	II
D7990	EMERGENCY TRACHEOTOMY	\$2,242.38	II
D7991	DENTAL CORONOIDECTION	\$5,626.04	II
D7995	SYNTHETIC GRAFT FACIAL BONES	\$565.81	II
D7996	IMPLANT MANDIBLE FOR AUGMENT	\$2,379.03	II
D7997	APPLIANCE REMOVAL	\$460.85	II
D7998	INTRAORAL PLACE OF FIX DEV	\$2,603.15	II
D7999	ORAL SURGERY PROCEDURE	\$811.68	II
D8010	LIMITED DENTAL TX PRIMARY	\$3,148.70	III
D8020	LIMITED DENTAL TX TRANSITION	\$3,559.18	III
D8030	LIMITED DENTAL TX ADOLESCENT	\$4,112.64	III
D8040	LIMITED DENTAL TX ADULT	\$4,383.78	III
D8050	INTERCEP DENTAL TX PRIMARY	\$3,446.28	III
D8060	INTERCEP DENTAL TX TRANSITN	\$3,652.87	III
D8070	COMPRE DENTAL TX TRANSITION	\$6,429.54	III
D8080	COMPRE DENTAL TX ADOLESCENT	\$6,571.18	III
D8090	COMPRE DENTAL TX ADULT	\$6,579.64	III
D8210	ORTHODONTIC REM APPLIANCE TX	\$1,114.56	III
D8220	FIXED APPLIANCE THERAPY HAPT	\$1,282.11	III
D8660	PREORTHODONTIC TX VISIT	\$559.67	III
D8670	PERIODIC ORTHODONTIC TX VISIT	\$374.18	III
D8680	ORTHODONTIC RETENTION	\$661.66	III
D8681	REMOVABLE RETAINER ADJUST	\$586.68	III
D8690	ORTHODONTIC TREATMENT	\$488.85	III
D8691	REPAIR ORTHO APPLIANCE	\$282.74	III
D8692	REPLACEMENT RETAINER	\$430.72	III
D8693	REBOND/RECEMENT RETAINERS	\$411.16	III
D8694	REPAIR FIXED RETAINERS	\$395.31	III
D8999	ORTHODONTIC PROCEDURE	\$395.31	III
D9110	TX DENTAL PAIN MINOR PROC	\$164.60	II
D9120	FIX PARTIAL DENTURE SECTION	\$239.85	III
D9210	DENT ANESTHESIA W/O SURGERY	\$80.13	II
D9211	REGIONAL BLOCK ANESTHESIA	\$92.87	II
D9212	TRIGEMINAL BLOCK ANESTHESIA	\$213.66	II
D9215	LOCAL ANESTHESIA	\$67.36	II
D9219	EVAL FOR DEEP SED/GEN ANESTH	\$129.60	II
D9222	DEEP ANEST, 1ST 15 MIN	\$344.40	II
D9223	GENERAL ANESTH EA ADDL 15 MI	\$275.52	II
D9230	ANALGESIA	\$104.78	II

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

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HCPCS Code	HCPCS Code Description	Charge	GAAF Category
D9239	IV MOD SEDATION, 1ST 15 MIN	\$317.53	II
D9243	IV SEDATION EA ADDL 15M	\$254.02	II
D9248	SEDATION (NON-IV)	\$281.48	II
D9310	DENTAL CONSULTATION	\$177.31	I
D9311	CONSULT W/MED HLTH CARE PROF	\$178.02	I
D9410	DENTAL HOUSE CALL	\$258.17	I
D9420	HOSPITAL/ASC CALL	\$371.65	I
D9430	OFFICE VISIT DURING HOURS	\$106.75	I
D9440	OFFICE VISIT AFTER HOURS	\$175.87	I
D9450	CASE PRESENTATION TX PLAN	\$132.76	I
D9610	DENT THERAPEUTIC DRUG INJECT	\$141.11	III
D9612	THERA PAR DRUGS 2 OR > ADMIN	\$241.52	III
D9630	DRUGS/MEDS DISP FOR HOME USE	\$58.66	III
D9910	DENT APPL DESENSITIZING MED	\$80.37	III
D9911	APPL DESENSITIZING RESIN	\$105.72	III
D9920	BEHAVIOR MANAGEMENT	\$199.24	III
D9930	TREATMENT OF COMPLICATIONS	\$164.89	III
D9932	CLEAN & INSPECT REM DENT MAX	\$160.56	III
D9933	CLEAN & INSPECT REM DENT MAN	\$160.20	III
D9934	CLEAN REM PART DENTURE MAX	\$191.19	III
D9935	CLEAN REM PART DENTURE MAND	\$191.19	III
D9941	FABRICATION ATHLETIC GUARD	\$287.30	III
D9942	REPAIR/RELINING OCCLUSAL GUARD	\$299.81	III
D9943	OCCLUSAL GUARD ADJUSTMENT	\$147.77	III
D9950	OCCLUSION ANALYSIS	\$447.35	III
D9951	LIMITED OCCLUSAL ADJUSTMENT	\$220.50	III
D9952	COMPLETE OCCLUSAL ADJUSTMENT	\$883.96	III
D9970	ENAMEL MICROABRASION	\$187.20	III
D9971	ODONTOPLASTY 1-2 TEETH	\$178.31	III
D9972	EXTRNL BLEACHING PER ARCH	\$443.04	III
D9973	EXTRNL BLEACHING PER TOOTH	\$195.26	III
D9974	INTRNL BLEACHING PER TOOTH	\$379.84	III
D9975	EXTERNAL BLEACHING HOME APP	\$427.36	III
D9991	CASE MGMT, APPT BARRIERS	\$77.81	III
D9992	CASE MGMT, CARE COORDINATION	\$77.81	III
D9993	CASE MGMT, INTERVIEWING	\$77.81	III
D9994	CASE MGMT, PT EDUCATION	\$106.71	III
D9995	TELEDENTISTRY REAL-TIME	\$362.67	I
D9996	TELEDENTISTRY DENT REVIEW	\$272.00	I
D9999	ADJUNCTIVE PROCEDURE	\$191.19	III