

**Argus - National Schedule Dental Plans**

**Schedule of Benefits**

**Unlimited Annual Max**

**No Waiting Periods**

**No Deductibles - 295 Covered Procedures**

Procedure	Description	Limitations	Standard Plan
			Schedule Amount
D0120	Periodic Oral Evaluation	Limited to 2 oral evaluation procedures, per 12 month period	27
D0140	Limited Oral Evaluation - Problem Focused	Limited to 2 oral evaluation procedures, per 12 month period	41
D0145	Oral Evaluation – Patient under 3-yrs of Age	Limited to 2 oral evaluation procedures, per 12 month period	37
D0150	Comprehensive Oral Evaluation	Limited to 2 oral evaluation procedures, per 12 month period	44
D0170	Re-evaluation - Limited-Problem Focused (not post-op visit) (benefited for accidental injury monitoring only)	Limited to 2 oral evaluation procedures, per 12 month period	35
D0180	Comprehensive periodontal evaluation - new or established patient	Maximum of 1 procedure per 12 months per provider	58
D0210	Intraoral - Complete Series - FMX (including Bitewings)	Limited to 1 x-ray procedure per 5 year period	75
D0220	Intraoral - Periapical First Film		16
D0230	Intraoral - Periapical Each additional Film (6 or more is considered FMX)		13
D0240	Intraoral - Occlusal Film		22
D0250	Extraoral – First Film (by report)		31
D0260	Extraoral – Each Additional Film (by report)		27
D0270	Bitewing - Single Film	Limited to 1 bitewing x-ray procedure up to 4 films per 12 month period	16
D0272	Bitewings – Two Films	Limited to 1 bitewing x-ray procedure up to 4 films per 12 month period	24
D0273	Bitewings – Three Films	Limited to 1 bitewing x-ray procedure up to 4 films per 12 month period	29
D0274	Bitewings - Four Films	Limited to 1 bitewing x-ray procedure up to 4 films per 12 month period	35
D0277	Vertical Bitewings - Seven to Eight Films	Limited to 1 x-ray procedure per 5 year period	52
D0330	Panoramic Film	Limited to 1 x-ray procedure per 5 year period	61
D0431	Adjunctive Pre-diagnostic test aiding in the detection of muscosal abnormalities	Maximum of 1 procedure per 12 months. Only for those age 40 and over who demonstrate risk factors for oral cancer and/or a suspicious lesion	24
D0472	Accession of Tissue, Gross Exam including report	limited to once per site per year	33
D0473	Accession of Tissue, Gross and Micro Exam including report	limited to once per site per year	70
D0474	Accession of Tissue, Gross and Micro Exam (including assessment of . surgical margins) including report	limited to once per site per year	78
D0486	Accession of brush biopsy sample, microscopic examination, preparation and transmission of written report	Maximum of 1 procedure per 12 months, (t) Only for those age 40 and over who demonstrate risk factors for oral cancer and/or a suspicious lesion	57
D1110	Prophylaxis – Adult (age 14 and above)	Maximum of 2 procedures per 12 months	52
D1120	Prophylaxis - Child	Maximum of 2 procedures per 12 months	37
D1206	Topical application of fluoride varnish	Maximum of 1 procedure per 12 months	21
D1208	Topical application of fluoride - excluding varnish	Maximum of 1 procedure per 12 months	20
D1351	Sealant - per tooth	Maximum of 1 procedure per 36 months. Limited to dependent children under age 16, Applications made to permanent molar teeth only	30

D1510	Space Maintainer - Fixed - Unilateral	Limited to dependent children under age 16. Maximum of 1 per lifetime, per quadrant or arch	187
D1515	Space Maintainer - Fixed - Bilateral	Limited to dependent children under age 16. Maximum of 1 per lifetime, per quadrant or arch	279
D1520	Space Maintainer - Removable - Unilateral	Limited to dependent children under age 16. Maximum of 1 per lifetime, per quadrant or arch	224
D1525	Space Maintainer - Removable - Bilateral	Limited to dependent children under age 16. Maximum of 1 per lifetime, per quadrant or arch	332
D1550	Recementation of Space Maintainer (per Space Maintainer)	Limited to dependent children under age 16. Maximum of 1 per lifetime, per quadrant or arch. 6 months must have passed since initial placement	39
D1555	Removal of fixed space maintainer	Limited to dependent children under age 16. Maximum of 1 per lifetime, per quadrant or arch	39
D2140	Amalgam - One surface, primary or permanent	Replacement of existing only if in place for 36 months (for insureds over age 19) and in place for 12 months (for insureds under age 19). Maximum of 1 per tooth surface per tooth	56
D2150	Amalgam - Two surfaces, primary or permanent	Replacement of existing only if in place for 36 months (for insureds over age 19) and in place for 12 months (for insureds under age 19). Maximum of 1 per tooth surface per tooth	68
D2160	Amalgam - Three surfaces, primary or permanent	Replacement of existing only if in place for 36 months (for insureds over age 19) and in place for 12 months (for insureds under age 19). Maximum of 1 per tooth surface per tooth	82
D2161	Amalgam - Four or more surfaces, primary or permanent	Replacement of existing only if in place for 36 months (for insureds over age 19) and in place for 12 months (for insureds under age 19). Maximum of 1 per tooth surface per tooth	96
D2330	Resin - One surface, Anterior	Replacement of existing only if in place for 36 months (for insureds over age 19) and in place for 12 months (for insureds under age 19). Maximum of 1 per tooth surface per tooth	64
D2331	Resin - Two surfaces, Anterior	Replacement of existing only if in place for 36 months (for insureds over age 19) and in place for 12 months (for insureds under age 19). Maximum of 1 per tooth surface per tooth	79
D2332	Resin - Three surfaces, Anterior	Replacement of existing only if in place for 36 months (for insureds over age 19) and in place for 12 months (for insureds under age 19). Maximum of 1 per tooth surface per tooth	95
D2335	Resin - Four or more surfaces or involving incisal angle (Anterior)	Replacement of existing only if in place for 36 months (for insureds over age 19) and in place for 12 months (for insureds under age 19). Maximum of 1 per tooth surface per tooth	114
D2390	Resin-based composite crown, anterior	Replacement of existing only if in place for 36 months (for insureds over age 19) and in place for 12 months (for insureds under age 19). Maximum of 1 per tooth surface per tooth. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	139
D2391	Resin-based composite - one surface, posterior	Replacement of existing only if in place for 36 months (for insureds over age 19) and in place for 12 months (for insureds under age 19). Maximum of 1 per tooth surface per tooth. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	71
D2392	Resin-based composite - two surfaces, posterior	Replacement of existing only if in place for 36 months (for insureds over age 19) and in place for 12 months (for insureds under age 19). Maximum of 1 per tooth surface per tooth. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	93
D2393	Resin-based composite - three surfaces, posterior	Replacement of existing only if in place for 36 months (for insureds over age 19) and in place for 12 months (for insureds under age 19). Maximum of 1 per tooth surface per tooth. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	114

D2394	Resin-Based composite - four or more surfaces, posterior	Replacement of existing only if in place for 36 months (for insureds over age 19) and in place for 12 months (for insureds under age 19). Maximum of 1 per tooth surface per tooth. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	128
D2510	Inlay - Metallic - One surface	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	128
D2520	Inlay - Metallic - Two surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	172
D2530	Inlay - Metallic - Three or more surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	215
D2542	Onlay-Metallic-Two Surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	231
D2543	Onlay-Metallic-Three surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	242
D2544	Onlay-Metallic-Four or more surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	251
D2610	Inlay – Porcelain/Ceramic - One surface	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	179
D2620	Inlay – Porcelain/Ceramic - Two surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	210
D2630	Inlay – Porcelain/Ceramic - Three or more surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	224
D2642	Onlay - Porcelain/Ceramic - Two surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	238
D2643	Onlay - Porcelain/Ceramic - Three surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	242
D2644	Onlay - Porcelain/Ceramic - Four or more surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	251
D2650	Inlay - Resin-Based Composite - One surface	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	96
D2651	Inlay - Resin-Based Composite - Two surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	166
D2652	Inlay - Resin-Based Composite - Three or more surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	179
D2662	Onlay - Resin-Based Composite - Two surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	187
D2663	Onlay - Resin-Based Composite - Three surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	217
D2664	Onlay - Resin-Based Composite - Four or more surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	223

D2710	Crown - Resin (Indirect)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	92
D2720	Crown - Resin with High Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	236
D2721	Crown - Resin with Predominantly Base Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	192
D2722	Crown - Resin with Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	191
D2740	Crown - Porcelain/Ceramic Substrate	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	252
D2750	Crown - Porcelain Fused to High Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	237
D2751	Crown - Porcelain Fused to Predominantly Base Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	211
D2752	Crown - Porcelain Fused to Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	223
D2780	Crown-3/4 Cast High Noble metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	249
D2781	Crown - 3/4 Cast High predominantly Base Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	77
D2782	Crown - 3/4 Cast Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	242
D2783	Crown - 3/4 Cast Porcelain/Ceramic	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	250
D2790	Crown - Full Cast High Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	231
D2791	Crown - Full Cast Predominantly Base Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	223
D2792	Crown - Full Cast Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	235
D2910	Recement Inlay	6 months must have passed since initial placement	22
D2920	Recement Crown	6 months must have passed since initial placement	21
D2930	Prefabricated Stainless Steel Crown - Primary tooth	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to dependent children under age 16	55
D2931	Prefabricated Stainless Steel Crown - Permanent tooth	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to dependent children under age 16	62
D2932	Prefabricated Resin Crown	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to dependent children under age 16	65
D2950	Core Buildup, including any pins	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable.	56
D2951	Pin Retention - per tooth, in addition to restoration	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable.	10
D2952	Cast Post and Core in addition to Crown	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable.	83

D2954	Prefabricated Post and Core in addition to Crown	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable.	70
D2980	Crown repair, by report	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	47
D3110	Pulp Cap - direct	Maximum 1 time per tooth or site	21
D3120	Pulp Cap - indirect	Maximum 1 time per tooth or site	17
D3220	Therapeutic Pulpotomy (excluding final restoration)	Maximum 1 time per tooth or site, not in conjunction when a completed root canal is performed by the same provider.	37
D3221	Gross Pulpal Debridement, Primary and Permanent	Maximum 1 time per tooth or site, not in conjunction when a completed root canal is performed by the same provider.	39
D3230	Pulpal Therapy (Resorbable Filling) - Anterior, Primary tooth (excluding final rest	Maximum 1 time per tooth or site	51
D3240	Pulpal Therapy (Resorbable Filling) - Posterior, Primary tooth (excluding final rest	Maximum 1 time per tooth or site	52
D3310	Anterior (excluding final restoration)	Maximum 1 time per tooth or site	162
D3320	Bicuspid (excluding final restoration)	Maximum 1 time per tooth or site	190
D3330	Molar (excluding final restoration)	Maximum 1 time per tooth or site	242
D3332	Incomplete Endodontic Therapy (inoperable or fractured tooth)	Maximum 1 time per tooth or site	83
D3333	Internal Root Repair of Perforation Defects	Maximum 1 time per tooth or site	64
D3346	Retreatment of previous Root Canal Therapy – Anterior (at least 6 months after previous root Canal Therapy)	Maximum 1 time per tooth or site	186
D3347	Retreatment of previous Root Canal Therapy – Bicuspid (at least 6 months after previous root Canal Therapy)	Maximum 1 time per tooth or site	214
D3348	Retreatment of previous Root Canal Therapy – Molar (at least 6 months after previous root Canal Therapy)	Maximum 1 time per tooth or site	266
D3351	Apexification/Recalcification - Initial Visit (apical closure/calcific repair of perforations, root resorption, etc.)	Maximum 1 time per tooth or site	70
D3352	Apexification/Recalcification - interim medication replacement	Maximum 1 time per tooth or site	41
D3353	Apexification/Recalcification - Final Visit (includes completed root canal therapy)	Maximum 1 time per tooth or site	115
D3410	Apicoectomy/Periradicular Surgery - Anterior	Maximum 1 time per tooth or site	189
D3421	Apicoectomy/Periradicular Surgery - Bicuspid (first root)	Maximum 1 time per tooth or site	204
D3425	Apicoectomy/Periradicular Surgery - Molar (first root)	Maximum 1 time per tooth or site	223
D3426	Apicoectomy/Periradicular Surgery (each additional root)	Maximum 1 time per tooth or site	70
D3430	Retrograde Filling - per root	Maximum 1 time per tooth or site	51
D3450	Root Amputation - per root	Maximum 1 time per tooth or site	115
D3920	Hemisection (including any root removal), not including Root Canal Therapy	Maximum of 1 per lifetime	83
D4210	Gingivectomy or Gingivoplasty - per quadrant	Maximum of 1 each quadrant per 36 months	125
D4211	Gingivectomy or Gingivoplasty, per tooth	Maximum of 1 each quadrant per 36 months	49
D4240	Gingival Flap Procedure, including Root Planing - per quadrant	Maximum of 1 each quadrant per 36 months	159
D4241	Gingival Flap Procedure, including Root Planing - one to three teeth per quadrant	Maximum of 1 each quadrant per 36 months	117
D4249	Clinical Crown Lengthening - Hard Tissue	Maximum 1 time per tooth or site	191
D4260	Osseous Surgery (including Flap Entry and Closure) - per quadrant	Maximum of 1 each quadrant per 36 months	241
D4261	Osseous Surgery (including Flap Entry and Closure) - one to three teeth, per quadrant	Maximum of 1 each quadrant per 36 months	211
D4263	Bone Replacement Graft - first site in quadrant	Maximum 1 time per tooth or site	102
D4264	Bone Replacement Graft - each additional site in quadrant	Maximum 1 time per tooth or site	64
D4270	Pedicle Soft Tissue Graft Procedure	Maximum of 1 each quadrant per 36 months	194

D4273	Subepithelial Connective Tissue Graft Procedure (including Donor Site Surgery)	Maximum of 1 each quadrant per 36 months	242
D4274	Distal or Proximal Wedge Procedure (when not performed in conjunction with Surgical procedures in the same area)	Maximum of 1 each quadrant per 36 months	115
D4275	Soft tissue allograft	Maximum of 1 each quadrant per 36 months	198
D4276	Combined connective tissue and double pedicle graft	Maximum of 1 each quadrant per 36 months	249
D4341	Periodontal Scaling and Root Planing, per quadrant	Maximum of 1 each quadrant per 36 months	54
D4342	Periodontal Scaling and Root Planing - one to three teeth, per quadrant	Maximum of 1 each quadrant per 36 months	36
D4910	Periodontal Maintenance Procedures (following active therapy and in lieu of a D1110)	Maximum of 2 procedures per 12 months	31
D5110	Complete Denture - Maxillary	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable.	268
D5120	Complete Denture - Mandibular	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable.	268
D5130	Immediate Denture - Maxillary	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable.	297
D5140	Immediate Denture - Mandibular	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable.	297
D5211	Maxillary Partial Denture - Resin Base (including any conventional clasps, rests and teeth)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable.	213
D5212	Mandibular Partial Denture - Resin Base (including any conventional clasps, rests and teeth)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable.	235
D5213	Maxillary Partial Denture - Cast Metal Framework with Resin Denture Bases (inclu	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable.	303
D5214	Mandibular Partial Denture - Cast Metal Framework with Resin Denture Bases (incl	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable.	303
D5281	Removable Unilateral Partial Denture - One piece cast Metal (including clasps and teeth)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable.	172
D5410	Adjust Complete Denture - Maxillary	Maximum of 1 procedure per 12 months. 6 months must have passed since initial placement	17
D5411	Adjust Complete Denture - Mandibular	Maximum of 1 procedure per 12 months. 6 months must have passed since initial placement	17
D5421	Adjust Partial Denture - Maxillary	Maximum of 1 procedure per 12 months. 6 months must have passed since initial placement	17
D5422	Adjust Partial Denture - Mandibular	Maximum of 1 procedure per 12 months. 6 months must have passed since initial placement	17
D5510	Repair broken Complete Denture Base	Maximum of 1 procedure per 12 months. 6 months must have passed since initial placement	38
D5520	Replace missing or broken teeth - Complete Denture (each tooth)	Maximum of 1 procedure per 12 months. 6 months must have passed since initial placement	32
D5610	Repair Resin Denture Base	Maximum of 1 procedure per 12 months. 6 months must have passed since initial placement	37
D5620	Repair Cast Framework	Maximum of 1 procedure per 12 months. 6 months must have passed since initial placement	45
D5630	Repair or Replace Broken Clasp	Maximum of 1 procedure per 12 months. 6 months must have passed since initial placement	45
D5640	Replace broken teeth - per tooth	Maximum of 1 procedure per 12 months. 6 months must have passed since initial placement	33
D5650	Add tooth to existing Partial Denture	Maximum of 1 procedure per 12 months. 6 months must have passed since initial placement	40
D5660	Add Clasp to existing Partial Denture	Maximum of 1 procedure per 12 months. 6 months must have passed since initial placement	46
D5670	Replace all teeth and acrylic on cast metal framework (maxillary)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable.	121
D5671	Replace all teeth and acrylic on cast metal framework (mandibular)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable.	128

D5710	Rebase Complete Maxillary Denture	Maximum of 1 procedure per 24 months. 6 months must have passed since initial placement	102
D5711	Rebase Complete Mandibular Denture	Maximum of 1 procedure per 24 months. 6 months must have passed since initial placement	102
D5720	Rebase Maxillary Partial Denture	Maximum of 1 procedure per 24 months. 6 months must have passed since initial placement	102
D5721	Rebase Mandibular Partial Denture	Maximum of 1 procedure per 24 months. 6 months must have passed since initial placement	102
D5730	Reline Complete Maxillary Denture (chair side)	Maximum of 1 procedure per 24 months. 6 months must have passed since initial placement	68
D5731	Reline Complete Mandibular Denture (chair side)	Maximum of 1 procedure per 24 months. 6 months must have passed since initial placement	65
D5740	Reline Maxillary Partial Denture (chair side)	Maximum of 1 procedure per 24 months. 6 months must have passed since initial placement	64
D5741	Reline mandibular Partial Denture (chair side)	Maximum of 1 procedure per 24 months. 6 months must have passed since initial placement	64
D5750	Reline Complete Maxillary Denture (laboratory)	Maximum of 1 procedure per 24 months. 6 months must have passed since initial placement	89
D5751	Reline Complete Mandibular Denture (laboratory)	Maximum of 1 procedure per 24 months. 6 months must have passed since initial placement	89
D5760	Reline Maxillary Partial Denture (laboratory)	Maximum of 1 procedure per 24 months. 6 months must have passed since initial placement	89
D5761	Reline Mandibular Partial Denture (laboratory)	Maximum of 1 procedure per 24 months. 6 months must have passed since initial placement	89
D5810	Interim complete denture (maxillary)	Maximum of 1 per lifetime	140
D5811	Interim complete denture (mandibular)	Maximum of 1 per lifetime	144
D5820	Interim partial denture (maxillary)	Maximum of 1 per lifetime	116
D5821	Interim partial denture (mandibular)	Maximum of 1 per lifetime	124
D5850	Tissue Conditioning, Maxillary	Maximum of 1 procedure per 24 months. 6 months must have passed since initial placement	32
D5851	Tissue Conditioning, Mandibular	Maximum of 1 procedure per 24 months. 6 months must have passed since initial placement	32
D6058	Abutment supported porcelain/ceramic crown	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	315
D6059	Abutment supported porcelain fused to metal crown (high noble metal)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	311
D6060	Abutment supported porcelain fused to metal crown (predominantly base metal)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	281
D6061	Abutment supported porcelain fused to metal crown (noble metal)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	293
D6062	Abutment supported cast metal crown (high noble metal)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	306

D6063	Abutment supported cast metal crown (predominantly base metal)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. (mm) In lieu of an approvable fixed bridge for a 1 tooth replacement	267
D6064	Abutment supported cast metal crown (noble metal)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	344
D6065	Implant supported porcelain/ceramic crown	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	332
D6066	Implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	332
D6067	Implant supported metal crown (titanium, titanium all, high noble metal)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	330
D6068	Abutment supported retainer of porcelain/ceramic FPD	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	286
D6069	Abutment supported retainer for porcelain fused to metal FPD (high noble metal)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	306
D6070	Abutment supported retainer for porcelain fused to metal FPD (predominately base metal)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	303
D6071	Abutment supported retainer for porcelain fused to metal FPD (noble metal)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	306
D6072	Abutment supported retainer for cast metal FPD (high noble metal)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	264
D6073	Abutment supported retainer for cast metal FPD (predominately base metal)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. (mm) In lieu of an approvable fixed bridge for a 1 tooth replacement	281
D6074	Abutment supported retainer for cast metal FPD (noble metal)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	286
D6075	Implant supported retainer for ceramic FPD	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	306
D6076	Implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy or high noble metal)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	319



D6077	Implant supported retainer for cast metal FPD (titanium, titanium alloy or high noble metal)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. In lieu of an approvable fixed bridge for a 1 tooth replacement. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	249
D6092	Recement of implant/abutment supported crown	Maximum of 1 procedure per 12 months	23
D6093	Recement of implant/abutment supported fixed partial denture	Maximum of 1 procedure per 12 months	32
D6210	Pontic - Cast High Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	223
D6211	Pontic - Cast Predominantly Base Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	207
D6212	Pontic - Cast Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	228
D6240	Pontic - Porcelain fused to High Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	232
D6241	Pontic - Porcelain fused to Predominantly Base Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	207
D6242	Pontic - Porcelain fused to Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	222
D6245	Pontic - Porcelain/Ceramic	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	250
D6250	Pontic - Resin with High Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	230
D6251	Pontic - Resin with Predominantly Base Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	204
D6252	Pontic - Resin with Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	217
D6545	Retainer - Cast Metal for Resin Fixed Prosthesis	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	102
D6548	Retainer - Porcelain/Ceramic (resin bonded fixed prosthesis)	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	121
D6600	Inlay – porcelain/ceramic, two surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	191
D6601	Inlay – Porcelain/ceramic, three or more surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	242
D6602	Inlay - cast high noble metal, two surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	179
D6603	Inlay - cast high noble metal, three or more surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	204

D6604	Inlay - cast predominantly base metal, two surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	166
D6605	Inlay - cast predominantly base metal, three or more surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	230
D6606	Inlay - cast noble metal, two surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	177
D6607	Inlay - cast noble metal, three or more surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	228
D6608	Onlay - porcelain/ceramic, two surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	229
D6609	Onlay - porcelain/ceramic, three or more surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	242
D6610	Onlay - cast high noble metal, two surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	204
D6611	Onlay - cast high noble metal, three or more surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	242
D6612	Onlay - cast predominantly base metal, two surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	191
D6613	Onlay - cast predominantly base metal, three or more surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	241
D6614	Onlay - cast noble metal, two surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	196
D6615	Onlay - cast noble metal, three or more surfaces	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	245
D6720	Crown - Resin with High Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	230
D6721	Crown - Resin with Predominantly Base Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	209
D6722	Crown - Resin with Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	212
D6740	Crown - Porcelain/Ceramic	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	252
D6750	Crown - Porcelain fused to High Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	235
D6751	Crown - Porcelain fused to Predominantly Base Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	210
D6752	Crown - Porcelain fused to Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	223
D6780	Crown - 3/4 Cast High Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	230

D6781	Crown - 3/4 Cast Predominately Based Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	217
D6782	Crown - 3/4 Cast Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	232
D6783	Crown - 3/4 Porcelain/Ceramic	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	255
D6790	Crown - Full Cast High Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	228
D6791	Crown - Full Cast Predominantly Base Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	210
D6792	Crown - Full Cast Noble Metal	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over. Benefits based on the benefit for the corresponding non-cosmetic restoration on posterior teeth.	230
D6930	Recent Fixed Partial Denture	Maximum of 1 procedure per 12 months, 6 months must have passed since initial placement	31
D6940	Stress breaker	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	64
D6950	Precision attachment	Maximum of 1 per 7 year period when existing appliance / restoration is not serviceable. Limited to patients age 16 and over.	64
D7111	Coronal remnants - deciduous tooth	Maximum 1 time per tooth or site	48
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	Maximum 1 time per tooth or site	62
D7210	Surgical Removal of Erupted tooth requiring elevation of Mucoperiosteal Flap	Maximum 1 time per tooth or site	57
D7220	Removal of Impacted tooth - Soft Tissue	Maximum 1 time per tooth or site	70
D7230	Removal of Impacted tooth - Partially Bony	Maximum 1 time per tooth or site	89
D7240	Removal of Impacted tooth - Completely Bony	Maximum 1 time per tooth or site	102
D7241	Removal of Impacted tooth - Completely Bony, with unusual surgical complications	Maximum 1 time per tooth or site	121
D7250	Surgical Removal of Residual tooth roots (cutting procedure)	Maximum 1 time per tooth or site	63
D7260	Oroantral Fistula Closure	Maximum 1 time per tooth or site	228
D7261	Primary closure of a sinus perforation	Maximum 1 time per tooth or site	153
D7270	Tooth Reimplantation and/or stabilization of Accidentally Evulsed or Displaced	Maximum of 1 per lifetime	99
D7272	Tooth transplantation (includes reimplantation from one site to another and splinting and/or stabilization)	Maximum 1 time per tooth or site	140
D7280	Surgical access of an unerupted tooth	Maximum 1 time per tooth or site	115
D7282	Mobilization of erupted or malpositioned tooth to aid eruption	Maximum 1 time per tooth or site	57
D7285	Biopsy of Oral Tissue - Hard (bone, tooth)	X-rays and pathology report required	112
D7286	Biopsy of Oral Tissue - Soft (all others)	X-rays and pathology report required	77
D7287	Cytology sample collection		32
D7310	Alveoloplasty in conjunction with Extractions - per quadrant	Maximum of 1 per lifetime, per quadrant or arch	55
D7320	Alveoloplasty not in conjunction with Extractions - per quadrant	Maximum of 1 per lifetime, per quadrant or arch	77
D7340	Vestibuloplasty - Ridge Extension (secondary Epithelialization)	Maximum of 1 per lifetime	217
D7410	Radical Excision - Lesion Diameter up to 1.25 Cm	X-rays and pathology report required	96
D7411	Excision of benign lesion greater than 1.25 cm	X-rays and pathology report required	153
D7412	Excision of benign lesion, complicated	X-rays and pathology report required	242
D7413	Excision of malignant lesion up to 1.25 cm	X-rays and pathology report required	133

D7414	Excision of malignant lesion greater than 1.25 cm	X-rays and pathology report required	231
D7440	Excision of Malignant Tumor-Lesion Diameter up to 1.25 Cm	X-rays and pathology report required	254
D7441	Excision of Malignant Tumor - Lesion Diameter greater than 1.25 Cm	X-rays and pathology report required	255
D7450	Removal of Odontogenic Cyst or Tumor - Lesion Diameter up to 1.25 Cm	X-rays and pathology report required	115
D7451	Removal of Odontogenic Cyst or Tumor - Lesion Diameter greater than 1.25 Cm	X-rays and pathology report required	191
D7460	Removal of Nonodontogenic Cyst or Tumor - Lesion Diameter up to 1.25 Cm	X-rays and pathology report required	113
D7461	Removal of Nonodontogenic Cyst or Tumor - Lesion Diameter greater than 1.25 Cm	X-rays and pathology report required	169
D7465	Destruction of lesion(s) by physical or chemical method, by report		64
D7471	Removal of Exostosis - per site (up to maximum of 3 sites )	Maximum of 1 per lifetime	128
D7472	Removal of torus palatinus (up to 1 site)	Maximum of 1 per lifetime	165
D7473	Removal of torus mandibularis (up to 2 sites)	Maximum of 1 per lifetime	142
D7485	Surgical reduction of osseous tuberosity	Maximum of 1 per lifetime	117
D7510	Incision and Drainage of Abscess - Intraoral Soft Tissue		47
D7520	Incision and Drainage of Abscess - Extraoral Soft Tissue	X-rays and pathology report required	159
D7530	Removal of Foreign Body, Skin, or Subcutaneous Alveolar Tissue	Maximum of 1 per lifetime	64
D7540	Removal of reaction-producing foreign bodies – musculoskeletal system	Maximum of 1 per lifetime	96
D7550	Partial Osteotomy/Sequestrectomy	Maximum of 1 per lifetime	68
D7560	Maxillary Sinusotomy	Maximum of 1 per lifetime	306
D7910	Suture of Recent Small Wounds to 5 Cm (not associated with periodontal or oral surgery procedure)		38
D7960	Frenulectomy (Frenectomy or Frenotomy) - separate procedure	Maximum of 1 per lifetime, per quadrant or arch	92
D7970	Excision of Hyperplastic Tissue - per arch		83
D7972	Surgical reduction of fibrous	Maximum of 1 per lifetime	77
D7980	Sialolithotomy		122
D7983	Closure of salivary fistula		308
D9110	Palliative (emergency) treatment of dental pain - minor procedure	Maximum of 1 procedure per 12 months	23
D9120	Fixed partial denture sectioning	Maximum of 1 per lifetime	26
D9220	General Anesthesia - first 30 minutes	Only in conjunction with listed complex oral surgery procedures and subject to review. Involving a minimum of 2 lower or 3 total impactions or by report. Subject to review and up to a total 1 hour maximum.	86
D9221	General Anesthesia - each additional 15 minutes	Only in conjunction with listed complex oral surgery procedures and subject to review. Involving a minimum of 2 lower or 3 total impactions or by report. Subject to review and up to a total 1 hour maximum.	33
D9241	IV Sedation/Analgesia - first 30 mins	Only in conjunction with listed complex oral surgery procedures and subject to review. Involving a minimum of 2 lower or 3 total impactions or by report. Subject to review and up to a total 1 hour maximum.	80
D9242	IV Sedation/Analgesia - each additional 15 minutes	Only in conjunction with listed complex oral surgery procedures and subject to review. Involving a minimum of 2 lower or 3 total impactions or by report. Subject to review and up to a total 1 hour maximum.	27
D9440	Office Visit - after regularly scheduled hours	Maximum of 1 procedure per 12 months, X-rays and pathology report required	30
D9911	-Application of desensitizing resin for cervical and/or root surface, per tooth	Limited to patients age 25 and older, maximum of 1 procedure per 12 months	11