

**TRI-STATE JOINT FUND**  
**SCHEDULE OF DENTAL ALLOWANCES**  
**Effective January 1, 2023**

ADA CODE	DENTAL SERVICE	SCHEDULE
<b>TYPE I SERVICES</b>		
D0120	periodic oral evaluation - established patient	100%
D0140	limited oral evaluation - problem focused	100%
D0145	oral evaluation for a patient under 3 years of age and counseling with primary caregiver	100%
D0150	comprehensive oral evaluation - new or established patient	100%
D0160	detailed and extensive oral evaluation - problem focused, by report	100%
D0170	re-evaluation - limited, problem focused (established patient; not post-operative visit)	\$ 66.00
D0180	comprehensive periodontal evaluation - new or established patient	100%
D0210	intraoral - complete series of radiographic images	100%
D0220	intraoral - periapical first radiographic image	100%
D0230	intraoral - periapical each additional radiographic image	100%
D0240	intraoral - occlusal radiographic image	100%
D0250	extraoral - 2D projection radiographic image created using a stationary radiation source	100%
D0251	extraoral posterior radiographic image	100%
D0270	bitewing - single radiographic image	100%
D0272	bitewings - two radiographic images	100%
D0273	bitewings - three radiographic images	100%
D0274	bitewings - four radiographic images	100%
D0277	vertical bitewings - 7 to 8 radiographic images	100%
D0330	panoramic radiographic image	100%
D0460	pulp vitality tests	100%
D1110	prophylaxis - adult	100%
D1120	prophylaxis - child	100%
D1206	topical application of fluoride varnish	100%
D1208	topical application of fluoride	100%
D1351	sealant - per tooth	100%
D1352	preventive resin restoration in a moderate to high caries risk patient - permanent tooth	\$ 98.00
D1510	space maintainer - fixed - unilateral	100%
D1516	space maintainer - fixed - bilateral, maxillary	100%
D1517	space maintainer - fixed - bilateral, mandibular	100%
D1520	space maintainer - removable - unilateral	100%
D1526	space maintainer - removable - bilateral, maxillary	100%
D1527	space maintainer - removable - bilateral, mandibular	100%
D1551	re-cement or re-bond space maintainer-maxillary	\$ 78.00
D1552	re-cement or re-bond space maintainer-mandibular	\$ 78.00
D1553	re-cement or re-bond space maintainer-per quadrant	\$ 78.00
D1556	removal of unilateral fixed bilateral space maintainer-per quadrant	\$ 77.00
D1557	removal of fixed bilateral space maintainer-maxillary	\$ 77.00
D1558	removal of fixed bilateral space maintainer-mandibular	\$ 77.00
<b>TYPE II SERVICES</b>		
D2140	amalgam - one surface, primary or permanent	\$ 109.00
D2150	amalgam - two surfaces, primary or permanent	\$ 135.00
D2160	amalgam - three surfaces, primary or permanent	\$ 165.00
D2161	amalgam - four or more surfaces, primary or permanent	\$ 197.00
D2330	resin-based composite - one surface, anterior	\$ 126.00
D2331	resin-based composite - two surfaces, anterior	\$ 154.00
D2332	resin-based composite - three surfaces, anterior	\$ 188.00
D2335	resin-based composite - four or more surfaces or involving incisal angle (anterior)	\$ 237.00
D2390	resin-based composite crown, anterior	\$ 333.00
D2391	resin-based composite - one surface, posterior	\$ 137.00
D2392	resin-based composite - two surfaces, posterior	\$ 176.00
D2393	resin-based composite - three surfaces, posterior	\$ 215.00
D2394	resin-based composite - four or more surfaces, posterior	\$ 257.00
D3110	pulp cap - direct (excluding final restoration)	\$ 64.00

D3120	pulp cap - indirect (excluding final restoration)	\$ 62.00
D3220	therapeutic pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of medicament	\$ 152.00
D3222	partial pulpotomy for apexogenesis - permanent tooth with incomplete root development	\$ 226.00
D3230	pulpal therapy (resorbable filling) - anterior, primary tooth (excluding final restoration)	\$ 205.00
D3240	pulpal therapy (resorbable filling) - posterior, primary tooth (excluding final restoration)	\$ 226.00
D3310	endodontic therapy, anterior tooth (excluding final restoration)	\$ 568.00
D3320	endodontic therapy, premolar tooth (excluding final restoration)	\$ 647.00
D3330	endodontic therapy, molar tooth (excluding final restoration)	\$ 782.00
D3346	retreatment of previous root canal therapy - anterior	\$ 658.00
D3347	retreatment of previous root canal therapy - premolar	\$ 752.00
D3348	retreatment of previous root canal therapy - molar	\$ 890.00
D3351	apexification/recalcification - initial visit (apical closure/calcific repair of perforations, root resorption, pulp space disinfection, etc.)	\$ 272.00
D3352	apexification/recalcification - interim medication replacement	\$ 194.00
D3353	apexification/recalcification - final visit (includes completed root canal therapy - apical closure/calcific repair of perforations, root resorption, etc.)	\$ 394.00
D3355	pupal regeneration - initial visit	\$ 334.00
D3356	pupal regeneration - interim medication replacement	\$ 204.00
D3357	pupal regeneration - completion of treatment	\$ 385.00
D3410	apicoectomy - anterior	\$ 534.00
D3421	apicoectomy - premolar (first root); For surgery on one root of a premolar. Does not include placement of retrograde filling material.	\$ 599.00
D3425	apicoectomy - molar (first root)	\$ 672.00
D3426	apicoectomy (each additional root); Typically used for premolar & molar surgeries when more than one root is treated during the same procedure. Retrograde filling material placement not included.	\$ 305.00
D3427	periradicular surgery without apicectomy	\$ 479.00
D3430	retrograde filling - per root	\$ 212.00
D3450	root amputation - per root	\$ 368.00
D3470	intentional reimplantation (including necessary splinting)	\$ 578.00
D3910	surgical procedure for isolation of tooth with rubber dam	\$ 171.00
D3920	hemisection (including any root removal), not including root canal therapy	\$ 342.00
D4210	gingivectomy or gingivoplasty - 4 or more contiguous teeth or tooth bounded spaces per quad	100%
D4211	gingivectomy or gingivoplasty - 1 to 3 contiguous teeth or tooth bounded spaces per quad	100%
D4240	gingival flap procedure, including root planing - four or more contiguous teeth or tooth bounded spaces per quadrant	100%
D4241	gingival flap procedure, including root planing - one to three contiguous teeth or tooth bounded spaces per quadrant	100%
D4245	apically positioned flap	100%
D4249	clinical crown lengthening - hard tissue	\$ 583.00
D4260	osseous surgery (including flap entry and closure) - four or more contiguous teeth or tooth bounded spaces per quadrant	100%
D4261	osseous surgery (including flap entry and closure) - one to three contiguous teeth or tooth bounded spaces per quadrant	100%
D4263	bone replacement graft - first site in quadrant	100%
D4264	bone replacement graft - each additional site in quadrant	100%
D4265	biologic materials to aid in soft and osseous tissue regeneration	\$ 408.00
D4266	guided tissue regeneration - resorbable barrier, per site	100%
D4267	guided tissue regeneration - non-resorbable barrier, per site (includes membrane removal)	100%
D4270	pedicle soft tissue graft procedure	\$ 640.00
D4273	autogenous connective tissue graft procedure (including donor and recipient surgical sites) first tooth, implant, or edentulous tooth position in graft	100%
D4274	distal or proximal wedge procedure (when not performed in conjunction with surgical procedures in the same anatomical area)	100%
D4275	non-autogenous connective tissue graft (including recipient site and donor material) first tooth, implant, or edentulous tooth position in graft	100%
D4276	combined connective tissue and double pedicle graft, per tooth	100%
D4277	free soft tissue graft procedure (including recipient and donor surgical sites) first tooth, implant or edentulous tooth position in graft	100%

D4278	free soft tissue graft procedure (including recipient and donor surgical sites) each additional contiguous tooth, implant or edentulous tooth position in same graft site	100%
D4283	autogenous connective tissue graft procedure (including donor and recipient surgical sites) - each additional contiguous tooth, implant or edentulous tooth position in same graft site	100%
D4285	non-autogenous connective tissue graft procedure (including donor and recipient surgical sites) - each additional contiguous tooth, implant or edentulous tooth position in same graft site	100%
D4341	periodontal scaling and root planing - four or more teeth per quadrant	\$ 195.00
D4342	periodontal scaling and root planing - one to three teeth per quadrant	\$ 142.00
D4910	periodontal maintenance	100%
D4920	unscheduled dressing change (by someone other than treating dentist or their staff)	\$ 74.00
D7111	extraction, coronal remnants - primary tooth; Removal of soft tissue-retained coronal remnants	\$ 101.00
D7140	extraction, erupted tooth or exposed root (elevation and/or forceps removal)	\$ 137.00
D7210	surgical removal of erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated	\$ 211.00
D7220	removal of impacted tooth - soft tissue	\$ 240.00
D7230	removal of impacted tooth - partially bony	100%
D7240	removal of impacted tooth - completely bony	100%
D7241	removal of impacted tooth - completely bony, with unusual surgical complications	100%
D7250	surgical removal of residual tooth roots (cutting procedure)	\$ 229.00
D7272	tooth transplantation (includes reimplantation from one site to another and splinting/stabilization)	\$ 553.00
D7280	surgical access of an unerupted tooth	\$ 358.00
D7282	mobilization of erupted or malpositioned tooth to aid eruption	\$ 358.00
D7285	biopsy of oral tissue - hard (bone, tooth)	100%
D7286	biopsy of oral tissue - soft	100%
D7290	surgical repositioning of teeth	\$ 357.00
D7291	transseptal fibrotomy/supra crestal fibrotomy, by report	100%
D7295	harvest of bone for use in autogenous grafting procedure	\$ 690.00
D7296	corticotomy - one to three teeth or tooth spaces, per quadrant; This procedure involves creating multiple cuts, perforations, or removal of cortical, alveolar or basal bone of the jaw for the purpose of facilitating orthodontic repositioning of the dentition. This procedure includes flap entry and closure. Graft material and membrane, if used, should be reported separately.	\$ 579.00
D7297	corticotomy - four or more teeth or tooth spaces, per quadrant; This procedure involves creating multiple cuts, perforations, or removal of cortical, alveolar or basal bone of the jaw for the purpose of facilitating orthodontic repositioning of the dentition. This procedure includes flap entry and closure. Graft material and membrane, if used, should be reported separately.	\$ 613.00
D7310	alveoloplasty in conjunction with extractions - four or more teeth or tooth spaces, per quadrant	\$ 230.00
D7311	alveoloplasty in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	\$ 225.00
D7320	alveoloplasty not in conjunction with extractions - four or more teeth or tooth spaces, per quad	\$ 328.00
D7321	alveoloplasty not in conjunction with extractions - one to three teeth or tooth spaces, per quad	\$ 308.00
D7340	vestibuloplasty - ridge extension (secondary epithelialization)	100%
D7350	vestibuloplasty - ridge extension (including soft tissue grafts, muscle reattachment, revision of soft tissue attachment and management of hypertrophied and hyperplastic tissue)	100%
D7410	excision of benign lesion up to 1.25 cm	100%
D7411	excision of benign lesion greater than 1.25 cm	100%
D7412	excision of benign lesion, complicated	100%
D7413	excision of malignant lesion up to 1.25 cm	100%
D7414	excision of malignant lesion greater than 1.25 cm	100%
D7415	excision of malignant lesion, complicated	100%
D7440	excision of malignant tumor - lesion diameter up to 1.25 cm	100%
D7441	excision of malignant tumor - lesion diameter greater than 1.25 cm	100%
D7450	removal of benign odontogenic cyst or tumor - lesion diameter up to 1.25 cm	\$ 455.00
D7451	removal of benign odontogenic cyst or tumor - lesion diameter greater than 1.25 cm	\$ 605.00
D7460	removal of benign nonodontogenic cyst or tumor - lesion diameter up to 1.25 cm	\$ 415.00
D7461	removal of benign nonodontogenic cyst or tumor - lesion diameter greater than 1.25 cm	\$ 672.00
D7465	destruction of lesion(s) by physical or chemical method, by report	\$ 292.00
D7471	removal of lateral exostosis (maxilla or mandible)	100%
D7472	removal of torus palatinus	100%
D7473	removal of torus mandibularis	100%
D7485	surgical reduction of osseous tuberosity	100%

D7510	incision and drainage of abscess - intraoral soft tissue	100%
D7511	incision and drainage of abscess - intraoral soft tissue - complicated (includes drainage of multiple fascial spaces)	100%
D7520	incision and drainage of abscess - extraoral soft tissue	100%
D7521	incision and drainage of abscess - extraoral soft tissue - complicated (includes drainage of multiple fascial spaces)	100%
D7530	removal of foreign body from mucosa, skin, or subcutaneous alveolar tissue	\$ 260.00
D7540	removal of reaction producing foreign bodies, musculoskeletal system	100%
D7550	partial ostectomy/sequestrectomy for removal of non-vital bone	\$ 407.00
D7953	bone replacement graft for ridge preservation - per site	100%
D7955	repair of maxillofacial soft and/or hard tissue defect	100%
D7961	buccal/labial frenectomy - also known as frenulectomy (buccal sides of the mouth and labial, the lip area)	100%
D7962	lingual frenectomy, also know as frenulectomy (lingual - near or on the sides of tongue)	100%
D7963	frenuloplasty	100%
D7970	excision of hyperplastic tissue - per arch	100%
D7971	excision of pericoronal gingiva	100%
D7972	surgical reduction of fibrous tuberosity	100%
D9110	palliative (emergency) treatment of dental pain - minor procedure	\$ 97.00
D9120	fixed partial denture sectioning	\$ 171.00
D9222	deep sedation/general anesthesia - first 15 minutes; Anesthesia time begins when the doctor administering the anesthetic agent initiates the appropriate anesthesia and non-invasive monitoring protocol and remains in continuous attendance of the patient. Anesthesia services are considered completed when the patient may be safely left under the observation of trained personnel and the doctor may safely leave the room to attend to other patients or duties.	\$ 162.00
D9223	deep sedation/general anesthesia - each subsequent 15 minute increment	\$ 162.00
D9239	intravenous moderate (conscious) sedation/analgesia- first 15 minutes; Anesthesia time begins when the doctor administering the anesthetic agent initiates the appropriate anesthesia and non-invasive monitoring protocol and remains in continuous attendance of the patient. Anesthesia services are considered completed when the patient may be safely left under the observation of trained personnel and the doctor may safely leave the room to attend to other patients or duties.	\$ 145.00
D9243	intravenous moderate (conscious) sedation/analgesia - each subsequent 15 minute increment	\$ 141.00
D9310	consultation - diagnostic service by dentist or physician other than requesting dentist or physician	\$ 96.00
D9610	therapeutic parenteral drug, single administration	\$ 74.00
D9612	therapeutic parenteral drugs, two or more administrations, different medications	\$ 135.00
D9630	other drugs and/or medicaments, by report	\$ 24.00
D9910	application of desensitizing medicament	\$ 44.00
D9911	application of desensitizing resin for cervical and/or root surface, per tooth	\$ 56.00
D9920	behavior management, by report	\$ 111.00
D9930	treatment of complications (post-surgical) - unusual circumstances, by report	\$ 94.00
D9941	Fabrication of Athletic Mouth Guard	\$ 107.00
D9942	repair and/or reline of occlusal guard	\$ 185.00
D9944	Occlusal guard – hard appliance, full arch	\$ 427.00
D9945	Occlusal guard – soft appliance, full arch	\$ 107.00
D9946	Occlusal guard – hard appliance, partial arch	\$ 171.00
D9951	occlusal adjustment - limited	100%
D9952	occlusal adjustment - complete	100%
<b>TYPE III SERVICES</b>		
D2542	onlay - metallic-two surfaces	\$ 709.00
D2543	onlay - metallic-three surfaces	\$ 754.00
D2544	onlay - metallic-four or more surfaces	\$ 770.00
D2620	inlay - porcelain/ceramic - two surfaces	\$ 689.00
D2630	inlay - porcelain/ceramic - three or more surfaces	\$ 714.00
D2642	onlay - porcelain/ceramic - two surfaces	\$ 725.00
D2643	onlay - porcelain/ceramic - three surfaces	\$ 754.00
D2644	onlay - porcelain/ceramic - four or more surfaces	\$ 776.00
D2651	inlay - resin-based composite - two surfaces	\$ 626.00
D2652	inlay - resin-based composite - three or more surfaces	\$ 657.00
D2662	onlay - resin-based composite - two surfaces	\$ 669.00
D2663	onlay - resin-based composite - three surfaces	\$ 689.00

D2664	onlay - resin-based composite - four or more surfaces	\$ 719.00
D2710	crown - resin-based composite (indirect)	\$ 644.00
D2712	crown - 3/4 resin-based composite (indirect)	\$ 702.00
D2720	crown - resin with high noble metal	\$ 765.00
D2721	crown - resin with predominantly base metal	\$ 705.00
D2722	crown - resin with noble metal	\$ 741.00
D2740	crown - porcelain/ceramic	\$ 802.00
D2750	crown - porcelain fused to high noble metal	\$ 802.00
D2751	crown - porcelain fused to predominantly base metal	\$ 733.00
D2752	crown - porcelain fused to noble metal	\$ 754.00
D2753	crown - porcelain fused to titanium alloys	\$ 733.00
D2780	crown - 3/4 cast high noble metal	\$ 774.00
D2781	crown - 3/4 cast predominantly base metal	\$ 735.00
D2782	crown - 3/4 cast noble metal	\$ 749.00
D2783	crown - 3/4 porcelain/ceramic	\$ 774.00
D2790	crown - full cast high noble metal	\$ 824.00
D2791	crown - full cast predominantly base metal	\$ 722.00
D2792	crown - full cast noble metal	\$ 760.00
D2794	crown - titanium	\$ 770.00
D2910	recement inlay, onlay, or partial coverage restoration	\$ 80.00
D2915	recement cast or prefabricated post and core	\$ 83.00
D2920	recement crown	\$ 80.00
D2930	prefabricated stainless steel crown - primary tooth	\$ 190.00
D2931	prefabricated stainless steel crown - permanent tooth	\$ 225.00
D2932	prefabricated resin crown	\$ 244.00
D2933	prefabricated stainless steel crown with resin window	\$ 248.00
D2934	prefabricated esthetic coated stainless steel crown - primary tooth	\$ 256.00
D2940	protective restoration	\$ 87.00
D2950	core buildup, including any pins when required	\$ 190.00
D2951	pin retention - per tooth, in addition to restoration	\$ 52.00
D2953	each additional indirectly fabricated post - same tooth	\$ 212.00
D2954	prefabricated post and core in addition to crown	\$ 239.00
D2955	post removal	\$ 205.00
D2957	each additional prefabricated post - same tooth	\$ 139.00
D2960	labial veneer (resin laminate) - chairside	\$ 473.00
D2961	labial veneer (resin laminate) - laboratory	\$ 690.00
D2962	labial veneer (porcelain laminate) - laboratory	\$ 818.00
D2971	additional procedures to construct new crown under existing partial denture framework	\$ 153.00
D2975	coping	\$ 427.00
D2980	crown repair necessitated by restorative material failure	\$ 199.00
D5110	complete denture - maxillary	\$ 1,208.00
D5120	complete denture - mandibular	\$ 1,216.00
D5130	immediate denture - maxillary	\$ 1,283.00
D5140	immediate denture - mandibular	\$ 1,283.00
D5211	maxillary partial denture - resin base (including any conventional clasps, rests and teeth)	\$ 953.00
D5212	mandibular partial denture - resin base (including any conventional clasps, rests and teeth)	\$ 957.00
D5213	maxillary partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	\$ 1,251.00
D5214	mandibular partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	\$ 1,257.00
D5221	immediate maxillary partial denture - resin base (including any conventional clasps, rests, teeth)	\$ 962.00
D5222	immediate mandibular partial denture - resin base (includes conventional clasps, rests, teeth)	\$ 991.00
D5223	immediate maxillary partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	\$ 1,219.00
D5224	immediate mandibular partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	\$ 1,219.00
D5225	maxillary partial denture - flexible base (including any clasps, rests and teeth)	\$ 1,113.00
D5226	mandibular partial denture - flexible base (including any clasps, rests and teeth)	\$ 1,107.00
D5227	immediate maxillary partial denture - flexible base	\$ 1,113.00
D5228	immediate mandibular partial denture - flexible base	\$ 1,107.00

D5284	removable unilateral partial denture - one piece flexible base (including clasps & teeth) – per quad	\$ 688.00
D5286	removable unilateral partial denture - one piece resin (including clasps and teeth) – per quadrant	\$ 688.00
D5410	adjust complete denture - maxillary	\$ 63.00
D5411	adjust complete denture - mandibular	\$ 62.00
D5421	adjust partial denture - maxillary	\$ 62.00
D5422	adjust partial denture - mandibular	\$ 62.00
D5511	repair broken complete denture base, mandibular	\$ 151.00
D5512	repair broken complete denture base, maxillary	\$ 151.00
D5520	replace missing or broken teeth - complete denture (each tooth)	\$ 136.00
D5611	repair resin partial denture base, mandibular	\$ 148.00
D5612	repair resin partial denture base, maxillary	\$ 148.00
D5621	repair cast partial framework, mandibular	\$ 202.00
D5622	repair cast partial framework, maxillary	\$ 202.00
D5630	repair or replace broken clasp - per tooth	\$ 189.00
D5640	replace broken teeth - per tooth	\$ 135.00
D5650	add tooth to existing partial denture	\$ 160.00
D5660	add clasp to existing partial denture - per tooth	\$ 191.00
D5670	replace all teeth and acrylic on cast metal framework (maxillary)	\$ 526.00
D5671	replace all teeth and acrylic on cast metal framework (mandibular)	\$ 536.00
D5710	rebase complete maxillary denture	\$ 421.00
D5711	rebase complete mandibular denture	\$ 420.00
D5720	rebase maxillary partial denture	\$ 404.00
D5721	rebase mandibular partial denture	\$ 404.00
D5725	rebase hybrid prosthesis	\$ 404.00
D5730	reline complete maxillary denture (chairside)	\$ 263.00
D5731	reline complete mandibular denture (chairside)	\$ 262.00
D5740	reline maxillary partial denture (chairside)	\$ 256.00
D5741	reline mandibular partial denture (chairside)	\$ 256.00
D5750	reline complete maxillary denture (laboratory)	\$ 333.00
D5751	reline complete mandibular denture (laboratory)	\$ 334.00
D5760	reline maxillary partial denture (laboratory)	\$ 326.00
D5761	reline mandibular partial denture (laboratory)	\$ 325.00
D5765	soft liner for complete or partial removable denture - indirect	\$ 326.00
D5863	overdenture - complete maxillary	\$ 1,595.00
D5864	overdenture - partial maxillary	\$ 1,578.00
D5865	overdenture - complete mandibular	\$ 1,597.00
D5866	overdenture - partial mandibular	\$ 1,564.00
D5867	replace replaceable part of semi-precision or precision attachment (male or female component)	\$ 256.00
D5875	modification of removable prosthesis following implant surgery	\$ 302.00
D6010	surgical placement of implant body: endosteal implant	\$ 1,315.00
D6050	surgical placement: transosteal implant	\$ 3,537.00
D6052	semi-precision attachment abutment	\$ 561.00
D6056	prefabricated abutment - includes modification and placement	\$ 512.00
D6057	custom fabricated abutment - includes placement	\$ 615.00
D6058	abutment supported porcelain/ceramic crown	\$ 982.00
D6059	abutment supported porcelain fused to metal crown (high noble metal)	\$ 994.00
D6060	abutment supported porcelain fused to metal crown (predominantly base metal)	\$ 911.00
D6061	abutment supported porcelain fused to metal crown (noble metal)	\$ 930.00
D6062	abutment supported cast metal crown (high noble metal)	\$ 994.00
D6063	abutment supported cast metal crown (predominantly base metal)	\$ 898.00
D6064	abutment supported cast metal crown (noble metal)	\$ 945.00
D6065	implant supported porcelain/ceramic crown	\$ 1,020.00
D6066	implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal)	\$ 1,042.00
D6067	implant supported metal crown (titanium, titanium alloy, high noble metal)	\$ 1,059.00
D6068	abutment supported retainer for porcelain/ceramic FPD	\$ 987.00
D6069	abutment supported retainer for porcelain fused to metal FPD (high noble metal)	\$ 994.00
D6070	abutment supported retainer for porcelain fused to metal FPD (predominantly base metal)	\$ 938.00
D6071	abutment supported retainer for porcelain fused to metal FPD (noble metal)	\$ 944.00
D6072	abutment supported retainer for cast metal FPD (high noble metal)	\$ 997.00
D6073	abutment supported retainer for cast metal FPD (predominantly base metal)	\$ 928.00

D6074	abutment supported retainer for cast metal FPD (noble metal)	\$ 932.00
D6075	implant supported retainer for ceramic FPD	\$ 1,040.00
D6076	implant supported retainer - porcelain fused to metal FPD (titanium, titanium alloy, high noble metal)	\$ 1,059.00
D6077	implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal)	\$ 1,082.00
D6082	Implant supported crown – porcelain fused to predominantly base alloys	\$ 911.00
D6083	Implant supported crown – porcelain fused to noble alloys	\$ 930.00
D6084	Implant supported crown – porcelain fused to titanium and titanium alloys	\$ 911.00
D6086	Implant supported crown – predominantly base alloys	\$ 898.00
D6087	Implant supported crown – noble alloys	\$ 945.00
D6088	Implant supported crown – titanium and titanium alloys	\$ 940.00
D6091	replacement of semi-precision or precision attachment (male or female component) of implant/abutment supported prosthesis, per attachment	\$ 397.00
D6092	recement implant/abutment supported crown	\$ 109.00
D6093	recement implant/abutment supported fixed partial denture	\$ 129.00
D6094	abutment supported crown - (titanium)	\$ 940.00
D6095	repair implant abutment, by report	\$ 492.00
D6096	remove broken implant retaining screw	\$ 241.00
D6097	abutment supported crown – porcelain fused to titanium and titanium alloys	\$ 911.00
D6098	implant supported retainer – porcelain fused to predominantly base alloys	\$ 938.00
D6099	Implant supported retainer for FPD – porcelain fused to noble alloys	\$ 1,059.00
D6101	debridement of a periimplant defect and surface cleaning of exposed implant surfaces, including flap entry and closure	\$ 503.00
D6102	debridement and osseous contouring of a periimplant defect; includes surface cleaning of exposed implant surfaces and flap entry and closure	\$ 635.00
D6103	bone graft for repair of periimplant defect - not including flap entry and closure or, when indicated, placement of a barrier membrane or biologic materials to aid in osseous regeneration	\$ 514.00
D6104	bone graft at time of implant placement	\$ 456.00
D6105	removal of implant body not requiring bone removal or flap elevation	\$ 137.00
D6106	guided tissue regeneration - resorbable barrier, per implant	100%
D6107	guided tissue regeneration - non-resorbable barrier, per implant	100%
D6110	implant /abutment supported removable denture for edentulous arch - maxillary	\$ 1,973.00
D6111	implant /abutment supported removable denture for edentulous arch - mandibular	\$ 1,957.00
D6112	implant /abutment supported removable denture for partially edentulous arch - maxillary	\$ 1,922.00
D6113	implant /abutment supported removable denture for partially edentulous arch - mandibular	\$ 1,954.00
D6114	implant /abutment supported fixed denture for edentulous arch - maxillary	\$ 5,473.00
D6115	implant /abutment supported fixed denture for edentulous arch - mandibular	\$ 5,507.00
D6116	implant /abutment supported fixed denture for partially edentulous arch - maxillary	\$ 3,363.00
D6117	implant /abutment supported fixed denture for partially edentulous arch - mandibular	\$ 3,474.00
D6120	implant supported retainer – porcelain fused to titanium and titanium alloys	\$ 1,059.00
D6121	implant supported retainer for metal FPD – predominantly base alloys	\$ 1,082.00
D6122	implant supported retainer for metal FPD – noble alloys	\$ 1,082.00
D6123	Implant supported retainer for metal FPD – titanium and titanium alloys	\$ 1,082.00
D6194	abutment supported retainer crown for FPD - (titanium)	\$ 963.00
D6195	abutment supported retainer – porcelain fused to titanium and titanium alloys	\$ 938.00
D6197	replacement of restorative material used to close an access opening of a screw-retained implant supported prosthesis, per implant	\$ 137.00
D6199	unspecified implant procedure, by report	\$ 347.00
D6205	pontic - indirect resin based composite	\$ 674.00
D6210	pontic - cast high noble metal	\$ 799.00
D6211	pontic - cast predominantly base metal	\$ 738.00
D6212	pontic - cast noble metal	\$ 762.00
D6214	pontic - titanium	\$ 790.00
D6240	pontic - porcelain fused to high noble metal	\$ 802.00
D6241	pontic - porcelain fused to predominantly base metal	\$ 739.00
D6242	pontic - porcelain fused to noble metal	\$ 763.00
D6243	pontic - porcelain fused to titanium and titanium alloys	\$ 739.00
D6245	pontic - porcelain/ceramic	\$ 801.00
D6250	pontic - resin with high noble metal	\$ 766.00
D6251	pontic - resin with predominantly base metal	\$ 739.00
D6252	pontic - resin with noble metal	\$ 740.00

D6545	retainer - cast metal for resin bonded fixed prosthesis	\$ 593.00
D6548	retainer - porcelain/ceramic for resin bonded fixed prosthesis	\$ 657.00
D6549	resin retainer - for resin bonded fixed prosthesis	\$ 639.00
D6600	inlay - porcelain/ceramic, two surfaces	\$ 694.00
D6601	inlay - porcelain/ceramic, three or more surfaces	\$ 707.00
D6602	inlay - cast high noble metal, two surfaces	\$ 677.00
D6603	inlay - cast high noble metal, three or more surfaces	\$ 705.00
D6604	inlay - cast predominantly base metal, two surfaces	\$ 663.00
D6605	inlay - cast predominantly base metal, three or more surfaces	\$ 674.00
D6606	inlay - cast noble metal, two surfaces	\$ 661.00
D6607	inlay - cast noble metal, three or more surfaces	\$ 694.00
D6608	onlay -porcelain/ceramic, two surfaces	\$ 741.00
D6609	onlay - porcelain/ceramic, three or more surfaces	\$ 770.00
D6610	onlay - cast high noble metal, two surfaces	\$ 733.00
D6611	onlay - cast high noble metal, three or more surfaces	\$ 769.00
D6612	onlay - cast predominantly base metal, two surfaces	\$ 695.00
D6613	onlay - cast predominantly base metal, three or more surfaces	\$ 739.00
D6614	onlay - cast noble metal, two surfaces	\$ 704.00
D6615	onlay - cast noble metal, three or more surfaces	\$ 750.00
D6624	inlay - titanium	\$ 706.00
D6634	onlay - titanium	\$ 760.00
D6710	crown - indirect resin based composite	\$ 677.00
D6720	crown - resin with high noble metal	\$ 760.00
D6721	crown - resin with predominantly base metal	\$ 714.00
D6722	crown - resin with noble metal	\$ 748.00
D6740	crown - porcelain/ceramic	\$ 805.00
D6750	crown - porcelain fused to high noble metal	\$ 804.00
D6751	crown - porcelain fused to predominantly base metal	\$ 741.00
D6752	crown - porcelain fused to noble metal	\$ 763.00
D6753	crown - porcelain fused to titanium and titanium alloys	\$ 741.00
D6780	crown - 3/4 cast high noble metal	\$ 768.00
D6781	crown - 3/4 cast predominantly base metal	\$ 741.00
D6782	crown - 3/4 cast noble metal	\$ 774.00
D6783	crown - 3/4 porcelain/ceramic	\$ 798.00
D6784	crown - 3/4 titanium and titanium alloys	\$ 741.00
D6790	crown - full cast high noble metal	\$ 802.00
D6791	crown - full cast predominantly base metal	\$ 722.00
D6792	crown - full cast noble metal	\$ 762.00
D6794	crown - titanium	\$ 765.00
D6920	connector bar	\$ 719.00
D6930	recement fixed partial denture	\$ 122.00
D6940	stress breaker	\$ 291.00
D6950	precision attachment	\$ 447.00
D6980	fixed partial denture repair necessitated by restorative material failure	\$ 267.00
D7956	guided tissue regeneration, edentulous area - resorbable barrier, per site	100%
D7957	guided tissue regeneration, edentulous area - non-resorbable barrier, per site	100%

### ORTHODONTICS

Initial Exam and treatment plan including insertion of Appliances	\$ 1,000.00
Active Treatment	
Class I - Malocclusion (per month)	\$ 125.00
Class II - Malocclusion (per month)	\$ 125.00
Class III - Malocclusion (per month)	\$ 125.00
Retention Treatment	
Retention (passive) treatment	\$ 212.00
<b>Maximum Allowance for all Orthodontic Treatment (per lifetime)</b>	<b>\$ 3,000.00</b>



## Dental Frequency Restrictions

Non-Problem Focused Exams, Cleanings, & Fluoride:	Two (2) per calendar year.
Sealants On Permanent Unrestored Molars Only:	Once (1) every three (3) years up to age 18.
Full Mouth Series or 4 Bitewings	Once (1) per calendar year
Panoramic X-Rays	Once (1) per calendar year.
Fillings on Same Tooth/Same Surfaces:	60-day Restriction.
Crowns Per Tooth:	One (1) every three (3) years.
Crown Repairs and/or Re-cements over 6 Months Old:	Once (1) in a six (6) month period.
Periodontics Per quadrant/Per Site:	Once (1) every six (6) months.
Periodontal Maintenance: Follows the Prophylaxis restriction Of two per calendar year.	Two (2) per calendar year.
Dentures & Partials:	Once (1) every five (5) years.
Prostodontics:	Once (1) every three (3) years.
Prostodontics Repairs over 6 Months Old:	Once (1) in a six (6) month period.
*Implants:	Once (1) every five (5) years.
Occlusal Guards due to Bruxism/Grinding Only:	Once (1) every three (3) years.
Orthodontics:	Member, Spouse & Dependent up to age 26 ONLY & Lifetime Max of \$3000.

\*Pre-Treatment Estimates are requested for services over \$1,000 and are required for Implants.

No Yearly Maximums or Deductible.

ALL CLAIMS MUST BE MAILED, OUR OFFICE IS NOT SETUP FOR ELECTRONIC FILING

MAIL TO:

TEAMSTERS LOCAL 191 HEALTH SERVICES  
1139 FAIRFIELD AVENUE, BRIDGEPORT, CT 06605