

**Codes for Dental Services that are NOT covered due to the
Court Decision of June 29th, 2018 for Adults on the
Alternative Benefit Plan**

CODE	Description	Fee Schedule
D0140	Limit oral eval problm focus	\$ 41.25
D0150	Comprehensive Oral Evaluation	\$ 32.50
D0210	Intraoral Complete Series	\$ 61.25
D0220	Intraoral - Peripical - First Film	\$ 10.00
D0230	Intraoral - Peripical - Each Additional	\$ 7.50
D0270	Bitewing - Single film	\$ 8.75
D0272	Bitewing - Two Films	\$ 17.50
D0274	Bitewing - Four Films	\$ 28.75
D0330	Panoramic Film	\$ 48.75
D0340	Cephalometric Film	\$ 58.75
D1110	Dental Prophylaxis Adult	\$ 46.25
D1354	Interim Caries Med App - Silver Diamine Floride	\$ 25.00
D2140	Amalgam-one surface, primary or permanent	\$ 38.00
D2150	Amalgam-two surfaces, primary or permanent	\$ 50.00
D2160	Amalgam-three surfaces, primary or permanent	\$ 59.00
D2161	Amalgam-four/more surfaces, primary or permanent	\$ 72.00
D2330	Resin-one surface, anterior	\$ 44.00
D2331	Resin-two surfaces, anterior	\$ 55.00
D2332	Resin-three surfaces, anterior	\$ 66.00
D2335	Resin-four/more surfaces, anterior	\$ 78.00
D2391	Resin-one surface, posterior	\$ 44.00
D2392	Resin-two surfaces, posterior	\$ 55.00
D2393	Resin-three surfaces, posterior	\$ 66.00
D2394	Resin four or more surfaces, posterior	\$ 78.00
D2951	Pin retention-per tooth, in add. To restor13	\$ 13.00
D3410	Apicoectomy-anterior	\$ 155.00
D3421	Apicoectomy-bicuspid first root	\$ 155.00
D3425	Apicoectomy-molar first root	\$ 155.00
D3426	Apicoectomy-per tooth each addit root	\$ 197.00
D4210	Gingivectomy/gingivoplasty-four or more teeth per quadrant	\$ 259.00
D4211	Gingivectomy/gingivoplasty-one to three teeth per quadrant	\$ 104.00
D4341	Periodontal scaling and root planing-per quadrant	\$ 78.00
D7111	Coronal remnants deciduous tooth	\$ 38.00
D7140	Extraction erupted tooth/exr	\$ 38.00
D7210	Rem imp tooth w mucoper flp	\$ 72.00
D7220	Impact tooth remov soft tiss	\$ 98.00
D7230	Impact tooth remov part bony	\$ 138.00
D7240	Impact tooth remov comp bony	\$ 166.00
D7241	Impact tooth rem bony w/comp	\$ 171.00
D7250	Tooth root removal	\$ 83.00
D7510	I&d absc intraoral soft tiss	\$ 52.00

D9110	Tx dental pain minor proc	\$ 21.00
D9222*	General anesthesia first 15m	\$ 75.00
D9223*	General anesthesia each 15m	\$ 75.00
D9243*	Iv sedation each 15m	\$ 79.30

*These codes will be included as payable on the MCO side as well in case they are used in conjunction with a medical dental procedure.