



## General Dentists DentalSave Network Fee Schedule DS 1.15

June 2016

- This fee schedule applies to services provided by a participating general dentist.
- Participating specialist will provide plan members with 25% off their regular fees.
- Non-listed procedures are provided at 25% off the dentist's regular fee.
- If the dentist's regular fee is equal or lower than the listed member fee, the member will get 25% off the dentist's regular fee.
- Dental plans are not dental insurance.

### Diagnostic Procedures

Code	Regular Fee	Member Fee
D0120	periodic oral evaluation - established patient	\$59.80 \$33.00
D0140	limited oral evaluation problem focused	\$87.40 \$48.00
D0150	comprehensive oral evaluation new or established patient	\$103.50 \$57.00
D0210	x-rays: intraoral complete series (including bitewings)	\$157.55 \$86.50
D0220	x-rays: intraoral periapical - first film	\$34.50 \$19.00
D0230	x-rays: intraoral periapical - each additional film	\$29.90 \$16.50
D0270	x-rays: bitewing - single film	\$34.50 \$19.00
D0272	x-rays: bitewing - two films	\$52.90 \$29.00
D0273	x-rays: bitewing - three films	\$64.40 \$35.50
D0274	x-rays: bitewing - four films	\$77.05 \$42.50
D0330	x-rays: panoramic film	\$132.25 \$72.50

### Preventive Procedures

Code	Regular Fee	Member Fee
D1110	prophylaxis adult (cleaning)	\$106.95 \$59.00
D1120	prophylaxis child (cleaning)	\$80.50 \$44.50
D1208	topical application of fluoride - excluding varnish	\$43.70 \$24.00
D1351	sealant - per tooth	\$64.40 \$35.50
D1510	space maintainer fixed unilateral	\$368.00 \$202.50
D1515	space maintainer fixed bilateral	\$495.65 \$272.50

### Restorative Procedures

Code	Regular Fee	Member Fee
D2140	amalgam - one surface, primary or permanent (filling)	\$167.90 \$92.50
D2150	amalgam - two surfaces, primary or permanent (filling)	\$207.00 \$114.00
D2160	amalgam - three surfaces, primary or permanent (filling)	\$254.15 \$140.00
D2161	amalgam - four or more surfaces, primary or permanent (filling)	\$300.15 \$165.00
D2330	resin - one surface, anterior (filling)	\$197.80 \$109.00
D2331	resin - two surfaces, anterior (filling)	\$239.20 \$131.50
D2332	resin - three surfaces, anterior (filling)	\$293.25 \$161.50
D2335	resin - four or more surfaces or involving incisal angle, anterior (filling)	\$363.40 \$200.00
D2391	resin based composite - one surface, posterior (filling)	\$216.20 \$119.00
D2392	resin based composite - two surfaces, posterior (filling)	\$271.40 \$149.50

D2393	resin based composite - three surfaces, posterior (filling)	\$336.95 \$185.50
D2394	resin based composite - four or more surface, posterior (filling)	\$402.50 \$221.50
D2610	inlay - porcelain/ceramic - one surface	\$1,095.95 \$603.00
D2620	inlay - porcelain/ceramic - two surfaces	\$1,121.25 \$616.50
D2630	inlay - porcelain/ceramic - three or more surfaces	\$1,154.60 \$635.00
D2642	onlay - porcelain/ceramic - two surfaces	\$1,196.00 \$658.00
D2643	onlay - porcelain/ceramic - three surfaces	\$1,246.60 \$685.50
D2644	onlay - porcelain/ceramic - four or more surfaces	\$1,293.75 \$711.50
D2650	inlay - resin based composite - one surface	\$1,002.80 \$551.50
D2651	inlay - resin based composite - two surfaces	\$1,022.35 \$562.50
D2652	inlay - resin based composite - three or more surfaces	\$1,081.00 \$594.50
D2662	onlay - resin based composite - two surfaces	\$1,092.50 \$601.00
D2663	onlay - resin based composite - three surfaces	\$1,133.90 \$623.50
D2664	onlay - resin based composite - four or more surfaces	\$1,177.60 \$647.50
D2740	crown - porcelain/ceramic substrate	\$1,343.20 \$739.00
D2750	crown - porcelain fused to high noble metal	\$1,345.50 \$740.00
D2751	crown - porcelain fused to predominantly base metal	\$1,244.30 \$684.50
D2752	crown - porcelain fused to noble metal	\$1,274.20 \$701.00
D2920	re-cement or re-bond crown	\$131.10 \$72.00
D2950	core buildup, including any pins	\$316.25 \$174.00
D2951	pin retention - per tooth, in addition to restoration	\$86.25 \$47.50
D2952	post and core in addition to crown - indirectly fabricated	\$487.60 \$268.00
D2954	prefabricated post and core - in addition to crown	\$402.50 \$221.50
D2960	labial veneer (resin laminated) - chairside	\$767.05 \$422.00
D2962	labial veneer (porcelain laminate) - laboratory	\$1,369.65 \$753.50

### Endodontics

Code	Regular Fee	Member Fee
D3110	pulp cap - direct (excluding final restoration)	\$97.75 \$54.00
D3220	therapeutic pulpotomy (excluding final restoration)	\$232.30 \$128.00
D3310	endodontic therapy, anterior tooth (excluding final restoration)	\$890.10 \$489.50
D3320	endodontic therapy, bicuspid tooth (excluding final restoration)	\$1,002.80 \$551.50
D3330	endodontic therapy, molar (excluding final restoration)	\$1,207.50 \$664.00
D3346	retreatment of previous root canal therapy - anterior	\$1,014.30 \$558.00
D3347	retreatment of previous root canal therapy - bicuspid	\$1,138.50 \$626.00
D3348	retreatment of previous root canal therapy - molar	\$1,357.00 \$746.50
D3410	apicoectomy - anterior	\$828.00 \$455.50
D3421	apicoectomy - bicuspid (first root)	\$906.20 \$498.50
D3425	apicoectomy - molar (first root)	\$1,032.70 \$568.00
D3426	apicoectomy (each additional root)	\$460.00 \$253.00
D3430	retrograde filling - per root	\$322.00 \$177.00
D3920	hemisection (including any root removal) not including root canal therapy	\$543.95 \$299.00

### Periodontics

Code	Regular Fee	Member Fee
D4341	periodontal scaling and root planing - four or more teeth per quadrant	\$302.45 \$166.50
D4342	periodontal scaling and root planing - one to three teeth per quadrant	\$219.65 \$121.00
D4355	full mouth debridement to enable comprehensive evaluation and diagnosis	\$213.90 \$117.50
D4910	periodontal maintenance	\$161.00 \$88.50

## Prosthodontics - Removable

Code		Regular Fee	Member Fee
D5110	complete denture - maxillary	\$1,725.00	\$949.00
D5120	complete denture - mandibular	\$1,725.00	\$949.00
D5130	immediate denture - maxillary	\$1,840.00	\$1,012.00
D5140	immediate denture - mandibular	\$1,840.00	\$1,012.00
D5211	maxillary partial denture - resin base (including any conventional clasps, rests and teeth)	\$1,610.00	\$885.50
D5212	mandibular partial denture - resin base (including any conventional clasps, rests and teeth)	\$1,587.00	\$873.00
D5213	maxillary partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	\$2,070.00	\$1,138.50
D5214	mandibular partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	\$2,106.80	\$1,158.50
D5410	adjust complete denture - maxillary	\$104.65	\$57.50
D5411	adjust complete denture - mandibular	\$104.65	\$57.50
D5510	repair broken complete denture base	\$250.70	\$138.00
D5520	replace missing or broken teeth - complete denture (each tooth)	\$223.10	\$122.50
D5610	repair resin denture base	\$241.50	\$133.00
D5620	repair cast framework	\$338.10	\$186.00
D5630	repair or replace broken clasp - per tooth	\$313.95	\$172.50
D5640	replace broken teeth - per tooth	\$225.40	\$124.00
D5650	add tooth to existing partial denture	\$264.50	\$145.50
D5660	add clasp to existing partial denture - per tooth	\$310.50	\$171.00
D5730	reline complete maxillary denture (chairside)	\$439.30	\$241.50
D5731	reline complete mandibular denture (chairside)	\$435.85	\$239.50
D5740	reline maxillary partial denture (chairside)	\$423.20	\$233.00
D5741	reline mandibular partial denture (chairside)	\$428.95	\$236.00
D5750	reline complete maxillary denture (laboratory)	\$547.40	\$301.00
D5751	reline complete mandibular denture (laboratory)	\$557.75	\$307.00
D5760	reline maxillary partial denture (laboratory)	\$552.00	\$303.50
D5761	reline mandibular partial denture (laboratory)	\$552.00	\$303.50

## Implant Services

Code		Regular Fee	Member Fee
D6000 to D6199	implant services		25% off

## Prosthodontics - fixed

Code		Regular Fee	Member Fee
D6240	pontic - porcelain fused to high noble metal	\$1,328.25	\$730.50
D6241	pontic - porcelain fused to predominantly base metal	\$1,216.70	\$669.00
D6242	pontic - porcelain fused to noble metal	\$1,266.15	\$696.50
D6245	pontic - porcelain/ceramic	\$1,324.80	\$728.50
D6740	retainer crown - porcelain/ceramic	\$1,331.70	\$732.50
D6750	retainer crown - porcelain fused to high noble metal	\$1,345.50	\$740.00
D6751	retainer crown - porcelain fused to predominantly base metal	\$1,224.75	\$673.50
D6752	retainer crown - porcelain fused to noble metal	\$1,267.30	\$697.00
D6930	re-cement or re-bond fixed partial denture	\$201.25	\$110.50

## Oral and Maxillofacial Surgery

Code		Regular Fee	Member Fee
D7111	extraction, coronal remnants - deciduous tooth	\$158.70	\$87.50
D7140	extraction, erupted tooth or exposed root (elevation and/or forceps removal)	\$208.15	\$114.50
D7210	surgical removal of erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated	\$327.75	\$180.50
D7220	removal of impacted tooth - soft tissue	\$372.60	\$205.00
D7230	removal of impacted tooth - partially bony	\$465.75	\$256.00
D7240	removal of impacted tooth - completely bony	\$563.50	\$310.00
D7250	surgical removal of residual tooth roots (cutting procedure)	\$356.50	\$196.00
D7510	incision and drainage of abscess - intraoral soft tissue	\$285.20	\$157.00

## Orthodontic Treatment

Code		Regular Fee	Member Fee
D8070	comprehensive orthodontic treatment of the transitional dentition	\$5,998.40	25% off
D8080	comprehensive orthodontic treatment of the adolescent dentition	\$6,000.70	25% off
D8090	comprehensive orthodontic treatment of the adult dentition	\$6,150.20	25% off
D8660	pre-orthodontic treatment examination to monitor growth and development	\$409.40	\$225.00
D8680	orthodontic retention (removal of appliances, construction and placement of retainer(s))	\$546.25	\$300.50

## Unclassified Treatment

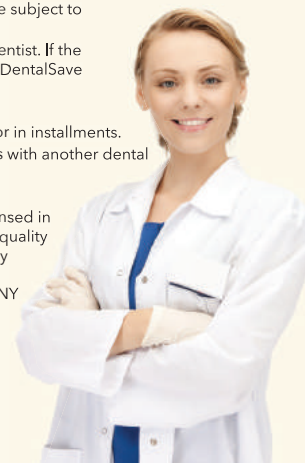
Code		Regular Fee	Member Fee
D9110	palliative (emergency) treatment of dental pain minor procedures	\$149.50	\$82.00

## Anesthesia

Code		Regular Fee	Member Fee
D9230	inhalation of nitrous oxide/analgesia, anxiolysis	\$90.85	\$50.00

## Disclaimer

- DentalSave is **NOT AN INSURANCE**. We do not pay claims. All charges for dental services are to be paid by the member directly to the dentist.
- Regular fee** represents average current rate dentists charge **NON PLAN** patients based on a survey of dentists in the geographical area of the plan.
- Member fee** represents the discounted fee the **PATIENT** pays directly to the plan dentist.
- Member Fee applies only to fees charged by plan General Dentists **NOT SPECIALISTS**.
- Participating Specialist will provide their services to plan members at a 25% discount off their regular fees.
- Non-listed procedures, performed by General Dentists, are provided to all members at 25% off the dentists' usual and customary fees.
- If the participating Dentist's normal fee for any procedure is less than the fee listed on this schedule, the dentist will give 25% off his regular fee.
- Any procedure involving lab and OSHA fees will incur additional costs. All applicable lab and OSHA fees are the full responsibility of the member and are subject to no discount.
- It is the Member's responsibility to verify that the dentist is a participating DentalSave provider before seeking any treatment.
- Member is responsible for full payment for all charges at the time of service. Any dental procedures performed by a non-participating dentist are not discounted and are charged to the member at the dentist's regular fees.
- Work in progress prior to enrollment on the dental plan may not be subject to discount.
- DentalSave cannot guarantee the continued participation of any dentist. If the dentist leaves the plan, you will need to select another participating DentalSave provider. Not all types of dentists may be available in your area.
- Some providers may charge for missed or broken appointments
- Dentists will decide whether fees for services are due on the spot or in installments.
- It is at the dentist's discretion whether or not to coordinate benefits with another dental plan or insurance.
- DentalSave may periodically adjust this fee schedule.
- While all participating DentalSave providers are professionally licensed in the state in which they practice, DentalSave does not guarantee the quality of service of the providers. Any quality of care concerns involving any participating DentalSave provider should be directed in writing to: DentalSave Attn: Provider Relations, 845 3rd Ave 20th FL New York, NY 10022. Please call 800-585-1025 if you have any further questions.





## DentalSave Network Specialists Fee Schedule

June 2016

This schedule applies to services provided by participating Specialists (Board Certified or Advanced Degree). Participating General Dentists do not charge according to this fee schedule. For participating General Dentists fees please refer to your DentalSave network General Dentists Schedule.

Please visit [dentalsave.com](http://dentalsave.com) to locate the nearest participating specialist

### Specialists Fee Schedule

#### Oral Surgeon

Participating Oral Surgeons will provide a 25% discount off their usual rates for all plan members

#### Endodontist

Participating Endodontists will provide a 25% discount off their usual rates for all plan members

#### Prosthodontist

Participating Prosthodontists will provide a 25% discount off their usual rates for all plan members

#### Implantology

Participating Dentists will provide a 25% discount off their usual rates for all plan members

#### Orthodontist

Participating Orthodontists will provide a 25% discount off their usual rates for all plan members

#### Periodontist

Participating Periodontists will provide a 25% discount off their usual rates for all plan members

#### Pedodontist

Participating Pedodontists will provide a 25% discount off their usual rates for all plan members

#### TMJ Specialist (Temporomandibular Joint Syndrome)

Providers who treat TMJ will provide a 25% discount off their usual rates for all plan members

#### Disclaimer

- It is the Member's responsibility to verify that the dentist is a participating DentalSave provider before seeking any treatment. Member is responsible for full payment for all charges at the time of service. Any dental procedures performed by a non-participating dentist are not discounted and are charged to the member at the dentist's normal fees.
- Procedures performed by DentalSave Network participating specialists will be discounted at 25% off the Dentist's normal fee.
- Work in progress prior to enrollment on the dental plan must be completed by the dentist who started the work and is not subject to discount.
- DentalSave cannot guarantee the continued participation of any dentist. If the dentist leaves the plan, you will need to select another participating DentalSave provider. Not all types of dentists may be available in your area.
- Some providers may charge for missed or broken appointments if no prior notice is given.
- Dentists will decide whether fees for services are due on the spot or in installments.
- It is at the dentist's discretion whether or not to co-ordinate benefits with another dental plan or insurance.
- DentalSave may periodically adjust this fee schedule.
- While all participating DentalSave providers are professionally licensed in the state in which they practice, DentalSave does not guarantee the quality of service of the providers.
- Any quality of care concerns involving any participating DentalSave provider should be directed in writing to: DentalSave Attn. Provider Relations, 845 3rd Ave 20th FL New York, NY 10022. Please call 800-585-1025 if you have any further questions.