# Dental Full Schedule of Benefits Plan Design - Level 2 - NY

The following benefit categories are payable using the 2017 CDT codes assigned by the American Dental Association® (ADA).
Current Dental Terminology (CDT) © 2017 American Dental Association. All rights reserved.
These codes are proprietary and are subject to change by the ADA.
Plan benefits and amounts vary by states. Please refer to policy schedule addendum for complete list of covered procedures and benefit amounts.

## Calendar Year Maximum per Covered Insured

| | Level 2 |
|---|---|
| | $1,600 |

## Dental Wellness

Pays two visits per calendar year per covered insured.
Visits must be separated by 150 days or more.
Dental Wellness Benefits are not subject to the calendar year maximum. Any one or more of the following codes counts as a dental wellness visit:

| CDT Code | Description | Waiting Period | Level 2 |
|---|---|---|---|
| D0120 | periodic oral evaluation - established patient | None | $50 |
| D0145 | oral evaluation for a patient under three years of age and counseling with primary caregiver | None | $50 |
| D0150 | comprehensive oral evaluation - new or established patient | None | $50 |
| D0160 | detailed and extensive oral evaluation - problem focused, by report | None | $50 |
| D0170 | re-evaluation - limited, problem focused (established patient; not post-operative visit) | None | $50 |
| D0180 | comprehensive periodontal evaluation - new or established patient | None | $50 |
| D0425 | caries susceptibility tests | None | $50 |
| D0601 | caries risk assessment and documentation, with a finding of low risk | None | $50 |
| D0602 | caries risk assessment and documentation, with a finding of moderate risk | None | $50 |
| D0603 | caries risk assessment and documentation, with a finding of high risk | None | $50 |
| D1110 | prophylaxis - adult | None | $50 |
| D1120 | prophylaxis - child | None | $50 |
| D1206 | topical application of fluoride varnish | None | $50 |
| D1208 | topical application of fluoride – excluding varnish | None | $50 |
| D1310 | nutritional counseling for control of dental disease | None | $50 |
| D1320 | tobacco counseling for the control and prevention of oral disease | None | $50 |
| D1330 | oral hygiene instructions | None | $50 |
| D4910 | periodontal maintenance | None | $50 |
| D9430 | office visit for observation (during regularly scheduled hours) - no other services performed | None | $50 |
| D9910 | application of desensitizing medicament | None | $50 |

## Radiographic Image Procedure (X-Ray)

Payable once per visit, regardless of the number of X-Rays received.
This benefit is payable only once per calendar year per covered person. Radiographic Image Procedure
(X-Ray) Benefits are not subject to the calendar year maximum. Any one or more of the following codes counts as a radiographic image procedure (X-Ray):

| CDT Code | Description | Waiting Period | Level 2 |
|---|---|---|---|
| D0210 | intraoral - complete series of radiographic images | None | $35 |
| D0220 | intraoral - periapical first radiographic image | None | $35 |
| D0230 | intraoral - periapical each additional radiographic image | None | $35 |
| D0240 | intraoral - occlusal radiographic image | None | $35 |
| D0250 | extra-oral – 2D projection radiographic image created using a stationary radiation source, and detector | None | $35 |
| D0251 | extra-oral posterior dental radiographic image | None | $35 |
| D0270 | bitewing - single radiographic image | None | $35 |
| D0272 | bitewings - two radiographic images | None | $35 |
| D0273 | bitewings - three radiographic images | None | $35 |
| D0274 | bitewings - four radiographic images | None | $35 |
| D0277 | vertical bitewings - 7 to 8 radiographic images | None | $35 |
| D0330 | panoramic radiographic image | None | $35 |
| D0340 | 2D cephalometric radiographic image – acquisition, measurement and analysis | None | $35 |
| D0393 | treatment simulation using 3D image volume | None | $35 |
| D0394 | digital subtraction of two or more images or image volumes of the same modality | None | $35 |
| D0395 | fusion of two or more 3D image volumes of one or more modalities | None | $35 |

## Filling & Basic Services

| CDT Code | Description | Waiting Period | Level 2 |
|---|---|---|---|
| D0140 | limited oral evaluation - problem focused | 3 months | $25 |
| D0310 | sialography | 3 months | $170 |
| D0415 | collection of microorganisms for culture and sensitivity | 3 months | $15 |
| D0416 | viral culture | 3 months | $15 |
| D0417 | collection and preparation of saliva sample for laboratory diagnostic testing | 3 months | $15 |
| D0418 | analysis of saliva sample | 3 months | $15 |

| CDT Code | Description | Waiting Period | Level 2 |
|---|---|---|---|
| D0423 | genetic test for susceptibility to diseases – specimen analysis | 3 months | $15 |
| D0431 | adjunctive pre-diagnostic test that aids in detection of mucosal abnormalities including premalignant and malignant lesions, not to include cytology or biopsy procedures | 3 months | $15 |
| D0460 | pulp vitality tests | 3 months | $15 |
| D0470 | diagnostic casts | 3 months | $30 |
| D2140 | amalgam - one surface, primary or permanent | 3 months | $60 |
| D2150 | amalgam - two surfaces, primary or permanent | 3 months | $65 |
| D2160 | amalgam - three surfaces, primary or permanent | 3 months | $70 |
| D2161 | amalgam - four or more surfaces, primary or permanent | 3 months | $75 |
| D2330 | resin-based composite - one surface, anterior | 3 months | $55 |
| D2331 | resin-based composite - two surfaces, anterior | 3 months | $65 |
| D2332 | resin-based composite - three surfaces, anterior | 3 months | $75 |
| D2335 | resin-based composite - four or more surfaces or involving incisal angle (anterior) | 3 months | $85 |
| D2390 | resin-based composite crown, anterior | 3 months | $85 |
| D2391 | resin-based composite - one surface, posterior | 3 months | $55 |
| D2392 | resin-based composite - two surfaces, posterior | 3 months | $65 |
| D2393 | resin-based composite - three surfaces, posterior | 3 months | $75 |
| D2394 | resin-based composite - four or more surfaces, posterior | 3 months | $75 |
| D2410 | gold foil - one surface | 3 months | $225 |
| D2420 | gold foil - two surfaces | 3 months | $250 |
| | **Pain Management & Adjunctive Services** | | |
| **CDT Code** | **Description** | **Waiting Period** | **Level 2** |
| D9110 | palliative (emergency) treatment of dental pain - minor procedure | 3 months | $30 |
| D9223 | deep sedation/general anesthesia – each 15 minute increment | 3 months | $60 |
| D9230 | inhalation of nitrous oxide/analgesia, anxiolysis | 3 months | $30 |
| D9243 | intravenous moderate (conscious) sedation/analgesia – each 15 minute increment | 3 months | $55 |
| D9310 | consultation - diagnostic service provided by dentist or physician other than requesting dentist or physician | 3 months | $30 |
| D9410 | house/extended care facility call | 3 months | $30 |
| D9420 | hospital or ambulatory surgical center call | 3 months | $30 |
| D9440 | office visit - after regularly scheduled hours | 3 months | $30 |
| D9450 | case presentation, detailed and extensive treatment planning | 3 months | $30 |
| D9930 | treatment of complications (post-surgical) - unusual circumstances, by report | 3 months | $30 |
| | **Other Preventive Services** | | |
| **CDT Code** | **Description** | **Waiting Period** | **Level 2** |
| D1351 | sealant - per tooth | 6 months | $20 |
| D1510 | space maintainer - fixed - unilateral | 6 months | $85 |
| D1515 | space maintainer - fixed - bilateral | 6 months | $110 |
| D1520 | space maintainer - removable - unilateral | 6 months | $85 |
| D1525 | space maintainer - removable - bilateral | 6 months | $110 |
| D1550 | re-cement or re-bond space maintainer | 6 months | $40 |
| D1555 | removal of fixed space maintainer | 6 months | $40 |
| D1575 | distal shoe space maintainer – fixed – unilateral | 6 months | $85 |
| | **Oral Surgery, Gum Treatments, and Prosthetic Repair** | | |
| **CDT Code** | **Description** | **Waiting Period** | **Level 2** |
| D4210 | gingivectomy or gingivoplasty - four or more contiguous teeth or tooth bounded spaces per quadrant | 6 months | $150 |
| D4211 | gingivectomy or gingivoplasty - one to three contiguous teeth or tooth bounded spaces per quadrant | 6 months | $50 |
| D4230 | anatomical crown exposure - four or more contiguous teeth per quadrant | 6 months | $150 |
| D4231 | anatomical crown exposure - one to three teeth per quadrant | 6 months | $50 |
| D4240 | gingival flap procedure, including root planing - four or more contiguous teeth or tooth bounded spaces per quadrant | 6 months | $250 |
| D4241 | gingival flap procedure, including root planing - one to three contiguous teeth or tooth bounded spaces per quadrant | 6 months | $250 |
| D4249 | clinical crown lengthening – hard tissue | 6 months | $275 |
| D4260 | osseous surgery (including elevation of a full thickness flap and closure) – four or more contiguous teeth or tooth bounded spaces per quadrant | 6 months | $275 |
| D4261 | osseous surgery (including elevation of a full thickness flap and closure) – one to three contiguous teeth or tooth bounded spaces per quadrant | 6 months | $275 |
| D4263 | bone replacement graft – retained natural tooth – first site in quadrant | 6 months | $300 |
| D4264 | bone replacement graft – retained natural tooth – each additional site in quadrant | 6 months | $225 |
| D4266 | guided tissue regeneration - resorbable barrier, per site | 6 months | $275 |
| D4267 | guided tissue regeneration - nonresorbable barrier, per site (includes membrane removal) | 6 months | $275 |
| D4270 | pedicle soft tissue graft procedure | 6 months | $300 |
| D4273 | autogenous connective tissue graft procedure (including donor and recipient surgical sites) first tooth, implant, or edentulous tooth position in graft | 6 months | $325 |

| CDT Code | Description | Waiting Period | Level 2 |
|---|---|---|---|
| D4275 | non-autogenous connective tissue graft (including recipient site and donor material) first tooth, implant, or edentulous tooth position in graft | 6 months | $300 |
| D4277 | free soft tissue graft procedure (including recipient and donor surgical sites) first tooth, implant or edentulous tooth position in graft | 6 months | $175 |
| 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 | 6 months | $175 |
| 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 | 6 months | $325 |
| D4285 | non-autogenous connective tissue graft procedure (including recipient surgical site and donor material) – each additional contiguous tooth, implant or edentulous tooth position in same graft site | 6 months | $300 |
| D4320 | provisional splinting - intracoronal | 6 months | $160 |
| D4321 | provisional splinting - extracoronal | 6 months | $130 |
| D4341 | periodontal scaling and root planing - four or more teeth per quadrant | 6 months | $60 |
| D4342 | periodontal scaling and root planing - one to three teeth per quadrant | 6 months | $60 |
| D4355 | full mouth debridement to enable comprehensive evaluation and diagnosis | 6 months | $60 |
| D4346 | scaling in presence of generalized moderate or severe gingival inflammation – full mouth, after oral evaluation | 6 months | $40 |
| D4921 | gingival irrigation – per quadrant | 6 months | $30 |
| D5410 | adjust complete denture - maxillary | 6 months | $30 |
| D5411 | adjust complete denture - mandibular | 6 months | $30 |
| D5421 | adjust partial denture - maxillary | 6 months | $30 |
| D5422 | adjust partial denture - mandibular | 6 months | $30 |
| D5510 | repair broken complete denture base | 6 months | $50 |
| D5520 | replace missing or broken teeth - complete denture (each tooth) | 6 months | $45 |
| D5610 | repair resin denture base | 6 months | $50 |
| D5620 | repair cast framework | 6 months | $65 |
| D5630 | repair or replace broken clasp - per tooth | 6 months | $55 |
| D5640 | replace broken teeth - per tooth | 6 months | $45 |
| D5650 | add tooth to existing partial denture | 6 months | $50 |
| D5660 | add clasp to existing partial denture - per tooth | 6 months | $65 |
| D5710 | rebase complete maxillary denture | 6 months | $140 |
| D5711 | rebase complete mandibular denture | 6 months | $180 |
| D5720 | rebase maxillary partial denture | 6 months | $180 |
| D5721 | rebase mandibular partial denture | 6 months | $180 |
| D5730 | reline complete maxillary denture (chairside) | 6 months | $85 |
| D5731 | reline complete mandibular denture (chairside) | 6 months | $85 |
| D5740 | reline maxillary partial denture (chairside) | 6 months | $100 |
| D5741 | reline mandibular partial denture (chairside) | 6 months | $100 |
| D5750 | reline complete maxillary denture (laboratory) | 6 months | $120 |
| D5751 | reline complete mandibular denture (laboratory) | 6 months | $120 |
| D5760 | reline maxillary partial denture (laboratory) | 6 months | $150 |
| D5761 | reline mandibular partial denture (laboratory) | 6 months | $150 |
| D5850 | tissue conditioning, maxillary | 6 months | $45 |
| D5851 | tissue conditioning, mandibular | 6 months | $45 |
| D6090 | repair implant supported prosthesis, by report | 6 months | $120 |
| D6091 | replacement of semi-precision or precision attachment (male or female component) of implant/abutment supported prosthesis, per attachment | 6 months | $120 |
| D6092 | re-cement or re-bond implant/abutment supported crown | 6 months | $80 |
| D6093 | re-cement or re-bond implant/abutment supported fixed partial denture | 6 months | $100 |
| D6095 | repair implant abutment, by report | 6 months | $120 |
| D6100 | implant removal, by report | 6 months | $40 |
| D6930 | re-cement or re-bond fixed partial denture | 6 months | $40 |
| D7111 | extraction, coronal remnants - deciduous tooth | 6 months | $45 |
| D7140 | extraction, erupted tooth or exposed root (elevation and/or forceps removal) | 6 months | $45 |
| D7210 | extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated | 6 months | $80 |
| D7220 | removal of impacted tooth - soft tissue | 6 months | $100 |
| D7230 | removal of impacted tooth - partially bony | 6 months | $130 |
| D7240 | removal of impacted tooth - completely bony | 6 months | $150 |
| D7241 | removal of impacted tooth - completely bony, with unusual surgical complications | 6 months | $170 |
| D7250 | removal of residual tooth roots (cutting procedure) | 6 months | $80 |
| D7251 | coronectomy – intentional partial tooth removal | 6 months | $150 |
| D7260 | oroantral fistula closure | 6 months | $200 |
| D7270 | tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth | 6 months | $200 |
| D7280 | exposure of an unerupted tooth | 6 months | $225 |

| CDT Code | Description | Waiting Period | Level 2 |
|---|---|---|---|
| D7282 | mobilization of erupted or malpositioned tooth to aid eruption | 6 months | $75 |
| D7283 | placement of device to facilitate eruption of impacted tooth | 6 months | $75 |
| D7285 | incisional biopsy of oral tissue-hard (bone, tooth) | 6 months | $165 |
| D7286 | incisional biopsy of oral tissue-soft | 6 months | $120 |
| D7310 | alveoloplasty in conjunction with extractions - four or more teeth or tooth spaces, per quadrant | 6 months | $70 |
| D7311 | alveoloplasty in conjunction with extractions - one to three teeth or tooth spaces, per quadrant | 6 months | $70 |
| D7320 | alveoloplasty not in conjunction with extractions - four or more teeth or tooth spaces, per quadrant | 6 months | $85 |
| D7321 | alveoloplasty not in conjunction with extractions - one to three teeth or tooth spaces, per quadrant | 6 months | $85 |
| D7340 | vestibuloplasty - ridge extension (secondary epithelialization) | 6 months | $450 |
| D7350 | vestibuloplasty - ridge extension (including soft tissue grafts, muscle reattachment, revision of soft tissue attachment and management of hypertrophied and hyperplastic tissue) | 6 months | $900 |
| D7410 | excision of benign lesion up to 1.25 cm | 6 months | $150 |
| D7411 | excision of benign lesion greater than 1.25 cm | 6 months | $225 |
| D7412 | excision of benign lesion, complicated | 6 months | $375 |
| D7413 | excision of malignant lesion up to 1.25 cm | 6 months | $300 |
| D7414 | excision of malignant lesion greater than 1.25 cm | 6 months | $425 |
| D7415 | excision of malignant lesion, complicated | 6 months | $500 |
| D7440 | excision of malignant tumor - lesion diameter up to 1.25 cm | 6 months | $300 |
| D7441 | excision of malignant tumor - lesion diameter greater than 1.25 cm | 6 months | $500 |
| D7450 | removal of benign odontogenic cyst or tumor - lesion diameter up to 1.25 cm | 6 months | $290 |
| D7451 | removal of benign odontogenic cyst or tumor - lesion diameter greater than 1.25 cm | 6 months | $300 |
| D7460 | removal of benign nonodontogenic cyst or tumor - lesion diameter up to 1.25 cm | 6 months | $275 |
| D7461 | removal of benign nonodontogenic cyst or tumor - lesion diameter greater than 1.25 cm | 6 months | $375 |
| D7471 | removal of lateral exostosis (maxilla or mandible) | 6 months | $325 |
| D7472 | removal of torus palatinus | 6 months | $375 |
| D7473 | removal of torus mandibularis | 6 months | $375 |
| D7485 | reduction of osseous tuberosity | 6 months | $325 |
| D7510 | incision and drainage of abscess - intraoral soft tissue | 6 months | $110 |
| D7511 | incision and drainage of abscess - intraoral soft tissue - complicated (includes drainage of multiple fascial spaces) | 6 months | $175 |
| D7520 | incision and drainage of abscess - extraoral soft tissue | 6 months | $225 |
| D7521 | incision and drainage of abscess - extraoral soft tissue - complicated (includes drainage of multiple fascial spaces) | 6 months | $300 |
| D7530 | removal of foreign body from mucosa, skin, or subcutaneous alveolar tissue | 6 months | $160 |
| D7540 | removal of reaction producing foreign bodies, musculoskeletal system | 6 months | $200 |
| D7550 | partial ostectomy/sequestrectomy for removal of non-vital bone | 6 months | $180 |
| D7560 | maxillary sinusotomy for removal of tooth fragment or foreign body | 6 months | $800 |
| D7610 | maxilla - open reduction (teeth immobilized, if present) | 6 months | $1,200 |
| D7620 | maxilla - closed reduction (teeth immobilized, if present) | 6 months | $1,200 |
| D7630 | mandible - open reduction (teeth immobilized, if present) | 6 months | $1,200 |
| D7640 | mandible - closed reduction (teeth immobilized, if present) | 6 months | $1,200 |
| D7650 | malar and/or zygomatic arch - open reduction | 6 months | $1,200 |
| D7660 | malar and/or zygomatic arch - closed reduction | 6 months | $1,200 |
| D7670 | alveolus - closed reduction, may include stabilization of teeth | 6 months | $800 |
| D7671 | alveolus - open reduction, may include stabilization of teeth | 6 months | $400 |
| D7710 | maxilla - open reduction | 6 months | $1,200 |
| D7720 | maxilla - closed reduction | 6 months | $1,200 |
| D7730 | mandible - open reduction | 6 months | $1,200 |
| D7740 | mandible - closed reduction | 6 months | $1,200 |
| D7750 | malar and/or zygomatic arch - open reduction | 6 months | $1,200 |
| D7760 | malar and/or zygomatic arch - closed reduction | 6 months | $1,200 |
| D7770 | alveolus - open reduction stabilization of teeth | 6 months | $400 |
| D7771 | alveolus, closed reduction stabilization of teeth | 6 months | $800 |
| D7953 | bone replacement graft for ridge preservation - per site | 6 months | $85 |
| D7960 | frenulectomy - also known as frenectomy or frenotomy - separate procedure not incidental to another procedure | 6 months | $85 |
| D7963 | frenuloplasty | 6 months | $85 |
| D7970 | excision of hyperplastic tissue - per arch | 6 months | $85 |
| D7971 | excision of pericoronal gingiva | 6 months | $75 |
| D9120 | fixed partial denture sectioning | 6 months | $40 |
| | **Crowns and Major Services** | | |
| **CDT Code** | **Description** | **Waiting Period** | **Level 2** |
| D2510 | inlay - metallic - one surface | 12 months | $200 |
| D2520 | inlay - metallic - two surfaces | 12 months | $250 |
| D2530 | inlay - metallic - three or more surfaces | 12 months | $375 |
| D2542 | onlay - metallic - two surfaces | 12 months | $250 |
| D2543 | onlay - metallic - three surfaces | 12 months | $275 |

| CDT Code | Description | Waiting Period | Level 2 |
|---|---|---|---|
| D2544 | onlay - metallic - four or more surfaces | 12 months | $325 |
| D2610 | inlay - porcelain/ceramic - one surface | 12 months | $225 |
| D2620 | inlay - porcelain/ceramic - two surfaces | 12 months | $250 |
| D2630 | inlay - porcelain/ceramic - three or more surfaces | 12 months | $375 |
| D2642 | onlay - porcelain/ceramic - two surfaces | 12 months | $275 |
| D2643 | onlay - porcelain/ceramic - three surfaces | 12 months | $325 |
| D2644 | onlay - porcelain/ceramic - four or more surfaces | 12 months | $350 |
| D2650 | inlay - resin-based composite - one surface | 12 months | $200 |
| D2651 | inlay - resin-based composite - two surfaces | 12 months | $225 |
| D2652 | inlay - resin-based composite - three or more surfaces | 12 months | $275 |
| D2662 | onlay - resin-based composite - two surfaces | 12 months | $250 |
| D2663 | onlay - resin-based composite - three surfaces | 12 months | $275 |
| D2664 | onlay - resin-based composite - four or more surfaces | 12 months | $275 |
| D2710 | crown - resin-based composite (indirect) | 12 months | $170 |
| D2712 | crown - ¾ resin-based composite (indirect) | 12 months | $170 |
| D2720 | crown - resin with high noble metal | 12 months | $325 |
| D2721 | crown - resin with predominantly base metal | 12 months | $325 |
| D2722 | crown - resin with noble metal | 12 months | $325 |
| D2740 | crown - porcelain/ceramic substrate | 12 months | $325 |
| D2750 | crown - porcelain fused to high noble metal | 12 months | $325 |
| D2751 | crown - porcelain fused to predominantly base metal | 12 months | $325 |
| D2752 | crown - porcelain fused to noble metal | 12 months | $325 |
| D2780 | crown - 3/4 cast high noble metal | 12 months | $325 |
| D2781 | crown - 3/4 cast predominantly base metal | 12 months | $325 |
| D2782 | crown - 3/4 cast noble metal | 12 months | $325 |
| D2783 | crown - 3/4 porcelain/ceramic | 12 months | $325 |
| D2790 | crown - full cast high noble metal | 12 months | $325 |
| D2791 | crown - full cast predominantly base metal | 12 months | $325 |
| D2792 | crown - full cast noble metal | 12 months | $325 |
| D2794 | crown - titanium | 12 months | $325 |
| D2799 | provisional crown– further treatment or completion of diagnosis necessary prior to final impression | 12 months | $80 |
| D2910 | re-cement or re-bond inlay, onlay, veneer or partial coverage restoration | 12 months | $35 |
| D2915 | re-cement or re-bond indirectly fabricated or prefabricated post and core | 12 months | $35 |
| D2920 | re-cement or re-bond crown | 12 months | $35 |
| D2921 | reattachment of tooth fragment, incisal edge or cusp | 12 months | $35 |
| D2930 | prefabricated stainless steel crown - primary tooth | 12 months | $75 |
| D2931 | prefabricated stainless steel crown - permanent tooth | 12 months | $80 |
| D2932 | prefabricated resin crown | 12 months | $110 |
| D2933 | prefabricated stainless steel crown with resin window | 12 months | $130 |
| D2934 | prefabricated esthetic coated stainless steel crown - primary tooth | 12 months | $75 |
| D2940 | protective restoration | 12 months | $30 |
| D2941 | interim therapeutic restoration – primary dentition | 12 months | $20 |
| D2949 | restorative foundation for an indirect restoration | 12 months | $30 |
| D2950 | core buildup, including any pins when required | 12 months | $60 |
| D2951 | pin retention - per tooth, in addition to restoration | 12 months | $15 |
| D2952 | post and core in addition to crown, indirectly fabricated | 12 months | $110 |
| D2954 | prefabricated post and core in addition to crown | 12 months | $110 |
| D2955 | post removal | 12 months | $85 |
| D2975 | coping | 12 months | $250 |
| D2980 | crown repair necessitated by restorative material failure | 12 months | $80 |
| D3110 | pulp cap - direct (excluding final restoration) | 12 months | $20 |
| D3120 | pulp cap - indirect (excluding final restoration) | 12 months | $20 |
| D3220 | therapeutic pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of medicament | 12 months | $45 |
| D3222 | partial pulpotomy for apexogenesis - permanent tooth with incomplete root development | 12 months | $45 |
| D3230 | pulpal therapy (resorbable filling) - anterior, primary tooth (excluding final restoration) | 12 months | $50 |
| D3240 | pulpal therapy (resorbable filling) - posterior, primary tooth (excluding final restoration) | 12 months | $50 |
| D3310 | endodontic therapy, anterior tooth (excluding final restoration) | 12 months | $200 |
| D3320 | endodontic therapy, bicuspid tooth (excluding final restoration) | 12 months | $250 |
| D3330 | endodontic therapy, molar (excluding final restoration) | 12 months | $325 |
| D3346 | retreatment of previous root canal therapy - anterior | 12 months | $180 |
| D3347 | retreatment of previous root canal therapy - bicuspid | 12 months | $225 |
| D3348 | retreatment of previous root canal therapy - molar | 12 months | $300 |
| D3351 | apexification/recalcification – initial visit (apical closure / calcific repair of perforations, root resorption, etc.) | 12 months | $140 |

| CDT Code | Description | Waiting Period | Level 2 |
|---|---|---|---|
| D3352 | apexification/recalcification – interim medication replacement | 12 months | $35 |
| D3353 | apexification/recalcification - final visit (includes completed root canal therapy - apical closure/calcific repair of perforations, root resorption, etc.) | 12 months | $75 |
| D3355 | pulpal regeneration - initial visit | 12 months | $75 |
| D3356 | pulpal regeneration - interim medication replacement | 12 months | $35 |
| D3357 | pulpal regeneration - completion of treatment | 12 months | $35 |
| D3410 | apicoectomy - anterior | 12 months | $160 |
| D3421 | apicoectomy - bicuspid (first root) | 12 months | $300 |
| D3425 | apicoectomy - molar (first root) | 12 months | $325 |
| D3426 | apicoectomy (each additional root) | 12 months | $120 |
| D3427 | periradicular surgery without apicoectomy | 12 months | $240 |
| D3428 | bone graft in conjunction with periradicular surgery – per tooth, single site | 12 months | $300 |
| D3429 | bone graft in conjunction with periradicular surgery – each additional contiguous tooth in the same surgical site | 12 months | $140 |
| D3430 | retrograde filling - per root | 12 months | $85 |
| D3431 | biologic materials to aid in soft and osseous tissue regeneration in conjunction with periradicular surgery | 12 months | $35 |
| D3432 | guided tissue regeneration, resorbable barrier, per site, in conjunction with periradicular surgery | 12 months | $275 |
| D3450 | root amputation - per root | 12 months | $170 |
| D3920 | hemisection (including any root removal), not including root canal therapy | 12 months | $130 |
| D3950 | canal preparation and fitting of preformed dowel or post | 12 months | $60 |
| | **Major Prosthetic Services** | | |
| **CDT Code** | **Description** | **Waiting Period** | **Level 2** |
| D5110 | complete denture - maxillary | 24 months | $425 |
| D5120 | complete denture - mandibular | 24 months | $425 |
| D5130 | immediate denture - maxillary | 24 months | $425 |
| D5140 | immediate denture - mandibular | 24 months | $425 |
| D5211 | maxillary partial denture - resin base (including any conventional clasps, rests and teeth) | 24 months | $325 |
| D5212 | mandibular partial denture - resin base (including any conventional clasps, rests and teeth) | 24 months | $325 |
| D5213 | maxillary partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth) | 24 months | $325 |
| D5214 | mandibular partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth) | 24 months | $325 |
| D5221 | immediate maxillary partial denture – resin base (including any conventional clasps, rests and teeth) | 24 months | $325 |
| D5222 | immediate mandibular partial denture – resin base (including any conventional clasps, rests and teeth) | 24 months | $325 |
| D5223 | immediate maxillary partial denture – cast metal framework with resin denture bases (including any conventional clasps, rests and teeth) | 24 months | $325 |
| D5224 | immediate mandibular partial denture – cast metal framework with resin denture bases (including any conventional clasps, rests and teeth) | 24 months | $325 |
| D5225 | maxillary partial denture - flexible base (including any clasps, rests and teeth) | 24 months | $325 |
| D5226 | mandibular partial denture - flexible base (including any clasps, rests and teeth) | 24 months | $325 |
| D5281 | removable unilateral partial denture - one piece cast metal (including clasps and teeth) | 24 months | $325 |
| D5670 | replace all teeth and acrylic on cast metal framework (maxillary) | 24 months | $200 |
| D5671 | replace all teeth and acrylic on cast metal framework (mandibular) | 24 months | $200 |
| D5810 | interim complete denture (maxillary) | 24 months | $225 |
| D5811 | interim complete denture (mandibular) | 24 months | $250 |
| D5820 | interim partial denture (maxillary) | 24 months | $180 |
| D5821 | interim partial denture (mandibular) | 24 months | $200 |
| D5863 | overdenture – complete maxillary | 24 months | $400 |
| D5864 | overdenture – partial maxillary | 24 months | $200 |
| D5865 | overdenture – complete mandibular | 24 months | $400 |
| D5866 | overdenture – partial mandibular | 24 months | $200 |
| D6010 | surgical placement of implant body: endosteal implant | 24 months | $550 |
| D6011 | second stage implant surgery | 24 months | $200 |
| D6012 | surgical placement of interim implant body for transitional prosthesis: endosteal implant | 24 months | $550 |
| D6013 | surgical placement of mini implant | 24 months | $550 |
| D6040 | surgical placement: eposteal implant | 24 months | $1,200 |
| D6050 | surgical placement: transosteal implant | 24 months | $1,200 |
| D6052 | semi-precision attachment abutment | 24 months | $325 |
| D6056 | prefabricated abutment – includes modification and placement | 24 months | $275 |
| D6057 | custom fabricated abutment – includes placement | 24 months | $275 |
| D6058 | abutment supported porcelain/ceramic crown | 24 months | $325 |
| D6059 | abutment supported porcelain fused to metal crown (high noble metal) | 24 months | $325 |
| D6060 | abutment supported porcelain fused to metal crown (predominantly base metal) | 24 months | $325 |
| D6061 | abutment supported porcelain fused to metal crown (noble metal) | 24 months | $325 |
| D6062 | abutment supported cast metal crown (high noble metal) | 24 months | $325 |

| CDT Code | Description | Waiting Period | Level 2 |
|---|---|---|---|
| D6063 | abutment supported cast metal crown (predominantly base metal) | 24 months | $325 |
| D6064 | abutment supported cast metal crown (noble metal) | 24 months | $325 |
| D6065 | implant supported porcelain/ceramic crown | 24 months | $325 |
| D6066 | implant supported porcelain fused to metal crown (titanium, titanium alloy, high noble metal) | 24 months | $325 |
| D6067 | implant supported metal crown (titanium, titanium alloy, high noble metal) | 24 months | $325 |
| D6068 | abutment supported retainer for porcelain/ceramic FPD | 24 months | $325 |
| D6069 | abutment supported retainer for porcelain fused to metal FPD (high noble metal) | 24 months | $325 |
| D6070 | abutment supported retainer for porcelain fused to metal FPD (predominantly base metal) | 24 months | $325 |
| D6071 | abutment supported retainer for porcelain fused to metal FPD (noble metal) | 24 months | $325 |
| D6072 | abutment supported retainer for cast metal FPD (high noble metal) | 24 months | $325 |
| D6073 | abutment supported retainer for cast metal FPD (predominantly base metal) | 24 months | $325 |
| D6074 | abutment supported retainer for cast metal FPD (noble metal) | 24 months | $325 |
| D6075 | implant supported retainer for ceramic FPD | 24 months | $325 |
| D6076 | implant supported retainer for porcelain fused to metal FPD (titanium, titanium alloy, or high noble metal) | 24 months | $325 |
| D6077 | implant supported retainer for cast metal FPD (titanium, titanium alloy, or high noble metal) | 24 months | $325 |
| D6080 | implant maintenance procedures when prostheses are removed and reinserted, including cleansing of prostheses and abutments | 24 months | $90 |
| D6085 | provisional implant crown | 24 months | $80 |
| D6094 | abutment supported crown - (titanium) | 24 months | $325 |
| D6110 | implant /abutment supported removable denture for edentulous arch – maxillary | 24 months | $550 |
| D6111 | implant /abutment supported removable denture for edentulous arch – mandibular | 24 months | $550 |
| D6112 | implant /abutment supported removable denture for partially edentulous arch – maxillary | 24 months | $550 |
| D6113 | implant /abutment supported removable denture for partially edentulous arch – mandibular | 24 months | $550 |
| D6114 | implant /abutment supported fixed denture for edentulous arch – maxillary | 24 months | $550 |
| D6115 | implant /abutment supported fixed denture for edentulous arch – mandibular | 24 months | $550 |
| D6116 | implant /abutment supported fixed denture for partially edentulous arch – maxillary | 24 months | $550 |
| D6117 | implant /abutment supported fixed denture for partially edentulous arch – mandibular | 24 months | $550 |
| D6194 | abutment supported retainer crown for FPD (titanium) | 24 months | $325 |
| D6205 | pontic - indirect resin based composite | 24 months | $325 |
| D6210 | pontic - cast high noble metal | 24 months | $325 |
| D6211 | pontic - cast predominantly base metal | 24 months | $325 |
| D6212 | pontic - cast noble metal | 24 months | $325 |
| D6214 | pontic - titanium | 24 months | $325 |
| D6240 | pontic - porcelain fused to high noble metal | 24 months | $325 |
| D6241 | pontic - porcelain fused to predominantly base metal | 24 months | $325 |
| D6242 | pontic - porcelain fused to noble metal | 24 months | $325 |
| D6245 | pontic - porcelain/ceramic | 24 months | $325 |
| D6250 | pontic - resin with high noble metal | 24 months | $325 |
| D6251 | pontic - resin with predominantly base metal | 24 months | $325 |
| D6252 | pontic - resin with noble metal | 24 months | $325 |
| D6253 | provisional pontic - further treatment or completion of diagnosis necessary prior to final impression | 24 months | $325 |
| D6545 | retainer - cast metal for resin bonded fixed prosthesis | 24 months | $160 |
| D6548 | retainer - porcelain/ceramic for resin bonded fixed prosthesis | 24 months | $160 |
| D6549 | resin retainer – for resin bonded fixed prosthesis | 24 months | $160 |
| D6600 | retainer inlay - porcelain/ceramic, two surfaces | 24 months | $250 |
| D6601 | retainer inlay - porcelain/ceramic, three or more surfaces | 24 months | $375 |
| D6602 | retainer inlay - cast high noble metal, two surfaces | 24 months | $350 |
| D6603 | retainer inlay - cast high noble metal, three or more surfaces | 24 months | $375 |
| D6604 | retainer inlay - cast predominantly base metal, two surfaces | 24 months | $350 |
| D6605 | retainer inlay - cast predominantly base metal, three or more surfaces | 24 months | $375 |
| D6606 | retainer inlay - cast noble metal, two surfaces | 24 months | $350 |
| D6607 | retainer inlay - cast noble metal, three or more surfaces | 24 months | $375 |
| D6608 | retainer onlay - porcelain/ceramic, two surfaces | 24 months | $275 |
| D6609 | retainer onlay - porcelain/ceramic, three or more surfaces | 24 months | $325 |
| D6610 | retainer onlay - cast high noble metal, two surfaces | 24 months | $375 |
| D6611 | retainer onlay - cast high noble metal, three or more surfaces | 24 months | $400 |
| D6612 | retainer onlay - cast predominantly base metal, two surfaces | 24 months | $375 |
| D6613 | retainer onlay - cast predominantly base metal, three or more surfaces | 24 months | $400 |
| D6614 | retainer onlay - cast noble metal, two surfaces | 24 months | $375 |
| D6615 | retainer onlay - cast noble metal, three or more surfaces | 24 months | $400 |
| D6624 | retainer inlay - titanium | 24 months | $375 |
| D6634 | retainer onlay - titanium | 24 months | $400 |
| D6710 | retainer crown - indirect resin based composite | 24 months | $325 |
| D6720 | retainer crown - resin with high noble metal | 24 months | $325 |

| CDT Code | Description | Waiting Period | Level 2 |
|---|---|---|---|
| D6721 | retainer crown - resin with predominantly base metal | 24 months | $325 |
| D6722 | retainer crown - resin with noble metal | 24 months | $325 |
| D6740 | retainer crown - porcelain/ceramic | 24 months | $325 |
| D6750 | retainer crown - porcelain fused to high noble metal | 24 months | $325 |
| D6751 | retainer crown - porcelain fused to predominantly base metal | 24 months | $325 |
| D6752 | retainer crown - porcelain fused to noble metal | 24 months | $325 |
| D6780 | retainer crown - 3/4 cast high noble metal | 24 months | $325 |
| D6781 | retainer crown - 3/4 cast predominantly base metal | 24 months | $325 |
| D6782 | retainer crown - 3/4 cast noble metal | 24 months | $325 |
| D6783 | retainer crown - 3/4 porcelain/ceramic | 24 months | $325 |
| D6790 | retainer crown - full cast high noble metal | 24 months | $325 |
| D6791 | retainer crown - full cast predominantly base metal | 24 months | $325 |
| D6792 | retainer crown - full cast noble metal | 24 months | $325 |
| D6793 | provisional retainer crown - further treatment or completion of diagnosis necessary prior to final impression | 24 months | $165 |
| D6794 | retainer crown - titanium | 24 months | $325 |

**EXCLUSIONS AND LIMITATIONS**

Each benefit requires that charges are incurred for treatment. We will not pay benefits for: coding convention errors, misrepresentations or upcoding, crown replacement services within five years of last placement, inlay or onlay replacement services within five years of last placement, procedures prior to the effective date, procedures prior to the expiration of the waiting period, prosthetic replacement services within five years of last placement, repairs within six months of the initial procedure, sealant limitation (limited to secondary molars for dependent children under age 16 and will not be payable more often than every five years), teeth missing before the policy coverage effective date, treatment outside of the United States, unlisted procedures, or unrecommended or unrequired services. This list does not include a complete description of each limitation and exclusion. To obtain a complete description of benefits, limitations and exclusions, please refer to the policy or see your Paul Revere benefits counselor.

Applicable to policy Dental-NY. This is not an insurance contract and only the actual policy provisions will control.

©2017 The Paul Revere Life Insurance Company, Worcester, MA | Colonial Voluntary Benefits insurance products are underwritten by The Paul Revere Life Insurance Company.