

2010 Boston University Dental Health Centers Summary Fee Schedule

<u>Proc.</u>	<u>Description</u>	<u>2010 Dental Health Center Fee</u>	<u>Dental Center Benefit</u>	<u>Dental Center Copay</u>
	<u>Diagnostic</u>			
D0120	Periodic oral exam - every 6 months	\$35.00	\$35.00	\$0.00
D0140	Limited oral exam - problem focused - limit three per 6 months	\$65.00	\$65.00	\$0.00
D0150	Comprehensive oral evaluation - limit 3 in lifetime	\$65.00	\$65.00	\$0.00
D0210	Itraoral fms and bitewings - limit every 60 months	\$105.00	\$105.00	\$0.00
D0274	Bitewings - four films - every 6 months	\$55.00	\$55.00	\$0.00
D0330	Panorex- limit every 60 months	\$95.00	\$95.00	\$0.00
	<u>Preventive</u>			
D1110	Adult prophylaxis -(cleaning)- limited every six months	\$90.00	\$90.00	\$0.00
D1120	Child prophylaxis - under 14years old	\$60.00	\$60.00	\$0.00
D1203	Top appl fl ex prophy-adult -under 14 years old	\$34.00	\$34.00	\$0.00
D1204	Top appl fl ex prophy-adult -under 19 years old	\$34.00	\$34.00	\$0.00
D1351	Dental sealants - per tooth under 14 years old	\$50.00	\$50.00	\$0.00
D2140	1 Surface amalgam	\$110.00	\$110.00	\$0.00
D2150	2 Surface amalgam	\$125.00	\$125.00	\$0.00
D2160	3 Surface amalgam	\$145.00	\$145.00	\$0.00
D2161	4+ Surface amalgam	\$175.00	\$175.00	\$0.00
D2330	1 Surface composite - anterior	\$115.00	\$115.00	\$0.00
D2331	2 Surface Composite -anterior	\$140.00	\$140.00	\$0.00
D2332	3 Surface Composite -anterior	\$170.00	\$170.00	\$0.00
D2335	Comp. 4+ surf.or involving icicisal angle ant.	\$215.00	\$215.00	\$0.00
	<u>Endodontics - Root Canal Therapy</u>			
D3310	Anterior endodontics	\$625.00	\$375.00	\$250.00
D3320	Bicuspid endodontics	\$725.00	\$435.00	\$290.00
D3330	Molar endodontics	\$895.00	\$537.00	\$358.00
	<u>Periodontics</u>			
D4210	Gingivectomy -quad.four or more teeth - One per quad. 36 months	\$400.00	\$240.00	\$160.00
D4240	Gingival flap,inc.root planning- four + teeth - One per quad. 36 months	\$625.00	\$375.00	\$250.00
D4260	Oss surg four or more teeth per quad - One per quad. 36 months	\$900.00	\$540.00	\$360.00
D4261	Oss surg one to three per quad - One per quad. 36 months	\$750.00	\$450.00	\$300.00
D4263	Bone replacement graft- first site in quad - One per quad. 36 months	\$225.00	\$135.00	\$90.00
D4270	Pedicle soft tissue grafts - One per quad. 36 months	\$635.00	\$381.00	\$254.00
D4271	Fee soft tissue grafts - One per quad. 36 months	\$775.00	\$465.00	\$310.00
D4341	Perio scaling 4+ teeth per quadrant - One per quad. per 24 months	\$190.00	\$114.00	\$76.00
D4910	Periodontal prophylaxis - every 3 months	\$115.00	\$69.00	\$46.00
	<u>Removable Prosthodontics</u>			
D5110	Full upper denture	\$1,050.00	\$630.00	\$420.00
D5120	Full lower denture	\$1,050.00	\$630.00	\$420.00
D5130	Immediate upper denture	\$1,150.00	\$690.00	\$460.00
D5140	Immediate lower denture	\$1,150.00	\$690.00	\$460.00
D5211	Upper partial resin base	\$800.00	\$480.00	\$320.00
D5212	Lower partial resin base	\$800.00	\$480.00	\$320.00
D5213	Upper partial cast metal/resin base	\$1,150.00	\$690.00	\$460.00
D5214	Lower partial cast metal/resin base	\$1,150.00	\$690.00	\$460.00
D5730	Reline complete upper denture - office	\$230.00	\$230.00	\$0.00
	<u>Fixed Prosthodontics</u>			
D2750	Crown-porcelain/high noble metal - over 16 years old	\$1,050.00	\$630.00	\$420.00
D2790	High noble full cast	\$1,050.00	\$630.00	\$420.00
D2952	Cast post and core	\$355.00	\$213.00	\$142.00
D2954	Pre fab post and core	\$285.00	\$171.00	\$114.00
D6010	Surgical Placement :Endosteal Implant	\$1,500.00	\$900.00	\$600.00
D6057	Custom abutment	\$675.00	\$405.00	\$270.00
D6066	Implant supported porcelain /metal crown	\$1,050.00	\$630.00	\$420.00
D6210	Pontic high noble metal	\$1,050.00	\$630.00	\$420.00
D6240	Pontic porcelain to high noble	\$1,050.00	\$630.00	\$420.00
D6610	Onlay-cast high noble two surfaces	\$1,050.00	\$630.00	\$420.00
D6750	Abutment-porc./high noble	\$1,050.00	\$630.00	\$420.00
D6780	Abutment high noble 3/4 cast	\$1,050.00	\$630.00	\$420.00
D6790	Abutment high noble full cast	\$1,050.00	\$630.00	\$420.00

<u>Proc.</u>	<u>Description</u>	<u>Fee</u>	<u>Benefit</u>	<u>Copay</u>
	<u>Oral Surgery</u>			
D7140	Extraction, erupted tooth or exposed root	\$110.00	\$66.00	\$44.00
D7210	Surgical extraction	\$220.00	\$132.00	\$88.00
D7220	Soft tissue impaction	\$260.00	\$156.00	\$104.00
D7230	Partial bony impaction	\$325.00	\$195.00	\$130.00
D7240	Full bony impaction	\$395.00	\$237.00	\$158.00
D7250	residual root recovery surgical	\$220.00	\$132.00	\$88.00
D7960	Frenectomy	\$210.00	\$126.00	\$84.00
	<u>Orthodontics</u>			
D8050	Interceptive orth.child	\$1,700.00	\$850.00	\$850.00
D8060	Interceptive orth.adult	\$1,700.00	\$850.00	\$850.00
D8080	Comprehensive ortho treatment - child	\$3,800.00	\$1,900.00	\$1,900.00
D8090	Comprehensive orthodontic treatment-adult	\$4,200.00	\$2,100.00	\$2,100.00
D8120	Expansion Appliance	\$405.00	\$202.50	\$202.50
D8210	Removable appliance therapy	\$265.00	\$132.50	\$132.50
*Lifetime Benefit for Orthodontic treatment equals \$2000				
	<u>Adjunct</u>			
D9110	Existing patient emergency	\$100.00	\$100.00	\$0.00
D9220	General Anesthesia (first 30 minutes)	\$180.00	\$180.00	\$0.00
D9230	Analgesia, anxiolysis, inhalation of nitrous oxide	\$85.00	\$51.00	\$34.00
D9310	Consultation per session	\$75.00	\$75.00	\$0.00
D9940	Occlusal guards	\$315.00	\$189.00	\$126.00
D9951	Occlusal adj. limited - One per 24 months per quadrant	\$380.00	\$228.00	\$152.00