

Code	Procedure	Average Dentist Fee	Dentex Member Fee	Member Savings	Potential % Savings
Diagnostic					
D0120	Periodic Oral Evaluation	\$56.00	\$25.00	\$31.00	55%
D0150	Initial Oral Evaluation	\$98.00	\$37.00	\$61.00	62%
D0220	X-rays Intraoral-Periapical first film	\$34.00	\$17.00	\$17.00	50%
D0230	X-rays Intraoral-Periapical each additional film	\$29.00	\$11.00	\$18.00	62%
D0270	X-rays Bitewing-Single film	\$33.00	\$20.00	\$13.00	39%
D0272	X-rays Bitewings - Two films	\$52.00	\$25.00	\$27.00	52%
D0274	X-rays Bitewings - Four films	\$75.00	\$35.00	\$40.00	53%
D0330	X-rays Panoramic film	\$129.00	\$65.00	\$64.00	50%
Preventative					
D1110	Prophylaxis (cleaning and polishing) - Adult	\$104.00	\$55.00	\$49.00	47%
D1120	Prophylaxis (cleaning and polishing) - Child	\$77.00	\$41.00	\$36.00	47%
D1206	Topical application of fluoride varnish	\$50.00	\$15.00	\$35.00	70%
D1351	Sealant - per tooth	\$65.00	\$35.00	\$30.00	46%
Restorative Procedures					
D2330	Filling-Resin - one surface, anterior	\$193.00	\$80.00	\$113.00	59%
D2331	Filling-Resin - two surfaces, anterior	\$235.00	\$102.00	\$133.00	57%
D2332	Filling Resin - three surfaces, anterior	\$288.00	\$132.00	\$156.00	54%
D2391	Filling Resin- one surface, posterior	\$215.00	\$131.00	\$84.00	39%
D2392	Filling Resin-two surface,posterior	\$276.00	\$172.00	\$104.00	38%
D2393	Filling Resin-three surface,posterior	\$346.00	\$221.00	\$125.00	36%
D2394	Filling Resin-four surface posterior	\$394.00	\$278.00	\$116.00	29%
D2740	Crown – cosmetic-Empress,Emax etc.	\$1,325.00	\$875.00	\$450.00	34%
D2750	Crown - porcelain fused to high noble metal	\$1,295.00	\$755.00	\$540.00	42%
D2751	Crown - porcelain fused to predominantly base metal	\$1,184.00	\$725.00	\$459.00	39%
D2791	Crown - full cast predominantly base metal	\$1,169.00	\$725.00	\$444.00	38%
D2920	Recement crown	\$128.00	\$45.00	\$83.00	65%
D2940	Sedative filling	\$142.00	\$40.00	\$102.00	72%
D2950	Core buildup, including any pins	\$302.00	\$165.00	\$137.00	45%
Endodontic					
D3110	Pulp cap - direct (excluding final restoration)	\$95.00	\$40.00	\$55.00	58%
D3220	Therapeutic pulpotomy (excluding final restoration)	\$235.00	\$105.00	\$130.00	55%
D3310	Root Canal Therapy - Anterior (excluding final restoration) per tooth	\$856.00	\$485.00	\$371.00	43%
D3320	Root Canal Therapy - Bicuspid (excluding final restoration) per tooth	\$975.00	\$540.00	\$435.00	45%

D3330	Root Canal Therapy – Molar (excluding final restoration) per tooth	\$1,275.00	\$805.00	\$470.00	37%
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Periodontic

D4341	Periodontal scaling and root planning - quadrant	\$292.00	\$150.00	\$142.00	49%
D4355	Full mouth debridement to enable comprehensive periodontal evaluation	\$220.00	\$90.00	\$130.00	59%
D4910	Periodontal maintenance procedure following active therapy	\$155.00	\$85.00	\$70.00	45%

Prosthodontics

D5110	Complete dentures - upper	\$1,950.00	* \$655.00	\$1295.00	* 66%
D5120	Complete dentures – lower	\$2,000.00	* \$605.00	\$1395.00	* 70%
D5130	Immediate denture - upper	\$2,096.00	* \$705.00	\$1391.00	* 66%
D5140	Immediate denture - lower	\$2,106.00	* \$695.00	\$1411.00	* 67%
D5410	Adjust upper - complete denture	\$101.00	\$40.00	\$61.00	60%
D5411	Adjust lower - complete denture	\$101.00	\$40.00	\$61.00	60%
D5520	Replace missing or broken teeth - complete denture (ea. tooth)	\$220.00	* \$70.00	\$150.00	* 68%
D5610	Repair resin saddle or base	\$238.00	* \$85.00	\$153.00	* 64%
D5640	Replace broken teeth - per tooth	\$220.00	* \$80.00	\$140.00	* 64%
D5650	Add tooth to existing partial denture	\$285.00	* \$145.00	\$140.00	* 49%
D5660	Add clasp to existing partial denture	\$310.00	* \$117.00	\$193.00	* 62%
D5730	Reline complete maxillary denture (chairside)	\$430.00	* \$150.00	\$280.00	* 65%
D5731	Reline complete mandibular denture (chairside)	\$425.00	* \$145.00	\$280.00	* 66%
D5740	Reline maxillary partial denture (chairside)	\$420.00	* \$150.00	\$270.00	* 64%
D5741	Reline mandibular partial denture (chairside)	\$425.00	* \$150.00	\$275.00	* 65%
D5750	Reline complete maxillary denture (laboratory)	\$520.00	* \$165.00	\$355.00	* 68%
D5751	Reline complete mandibular denture (laboratory)	\$545.00	* \$170.00	\$375.00	* 69%
D5760	Reline maxillary partial denture (laboratory)	\$530.00	* \$165.00	\$365.00	* 69%
D5761	Reline mandibular partial denture (laboratory)	\$538.00	* \$170.00	\$368.00	* 68%

Oral Surgery

D7140	Extraction - single tooth	\$205.00	\$90.00	\$115.00	56%
D7220	Removal of impacted tooth - soft tissue	\$359.00	\$195.00	\$164.00	46%
D7230	Removal of impacted tooth - partially bony	\$450.00	\$210.00	\$240.00	53%
D7240	Removal of impacted tooth - completely bony	\$547.00	\$290.00	\$257.00	47%
D7250	Surgical removal of residual tooth roots	\$350.00	\$195.00	\$155.00	44%
D7510	Incision and drainage of abscess - intraoral soft tissue	\$275.00	\$105.00	\$170.00	62%
D7960	Frenulectomy (frenectomy or frenotomy)	\$509.00	\$295.00	\$214.00	42%

Adjunctive General Services

D9110	Palliative (emergency) treatment of dental pain - minor procedures	\$148.00	\$70.00	\$78.00	53%
D9430	Office visit for observation (during regularly scheduled hours)	\$90.00	\$20.00	\$70.00	78%
D9440	Office visit - after regularly scheduled hours	\$210.00	\$55.00	\$155.00	74%

The Smart Alternative to the High Cost of Dental Insurance

* Plus lab fee. Lab fee may vary as different providers use different laboratories and materials. Check with your provider before initial treatment.

** All procedures not listed and procedures performed by Dentex specialists are a 25% discount from the dentist's usual and customary fees.(lab fees and materials excluded)