

# Sandia Plan Schedule of Benefits



ADA Code	Procedure Name	Member Pays Dentist
<b>DIAGNOSTIC</b>		
0120	Periodic oral evaluation	\$32
0140	Limited oral evaluation-problem focused	\$49
0145	Oral evaluation for a patient under 3 years	\$33
0150	Comprehen oral eval (new/estab)	\$48
0160	Detailed and ext. oral eval prob. Focu/by reprt	\$65
0170	Re-evaluation limited problem focused	\$40
0171	Re-eval - post oper off visit	\$40
0180	Comprehen perio eval (new/estab)	\$53
0190	Screen of a pt - a screen, includ state or fed	\$16
0191	Assessment of a patient	\$16
0210	Intraoral complete seriesof radio imges	\$73
0220	Intraoral periapical first radio image	\$18
0230	Intraoral periapical each add radio imge	\$18
0240	Intraoral occlusal radio image	\$20
0250	Extra-oral-2D project radio images	\$21
0251	Extra-oral posterior dental radio image	\$22
0270	Bitewing single radiographic image	\$16
0272	Bitewings two radiographic images	\$28
0273	Bitewings - three radio images	\$31
0274	Bitewings four radio images	\$39
0277	Vertical bitewings 7-8 radio images	\$50
0310	Sialography	\$330
0320	TMJ arthrogram including injection	\$188
0321	Other TMJ films, by report	\$136
0322	Tomographic survey	\$170
0330	Panoramic radiographic image	\$69
0340	2D cephalometric radiographic image	\$72
0350	2D oral/facial photo image obtain intra/extra	\$52
0351	3D photographic image	\$143
0425	Caries susceptibility tests	\$0
0460	Pulp vitality tests	\$0
0470	Diagnostic casts	\$65
0472	Accession of tissue exam & prep	\$150
0473	Accession of tissue micro exam	\$90
0474	Accession of tissue micro exam, surg marg	\$90
0480	Processing/inter cyto smears	\$50
0502	Other oral pathology, by report	\$60
<b>PREVENTIVE</b>		
1110	Prophylaxis adult	\$66
1120	Prophylaxis child	\$46
1206	Topical application of fluoride varnish	\$55
1208	Topical applic of fluoride exclud varnish	\$20
1310	Nutritional counseling	\$0
1320	Tobacco counseling	\$0
1330	Oral hygiene instruction	\$0
1351	Sealant per tooth	\$30
1510	Space maintainer-fixed unilateral	\$154
1520	Space maintainer-removable unilateral	\$205
1550	Re-cement or re-bond space maintainer	\$40
1551	Re-Cement/Rebond Bilateral space main max	\$40
1552	Re-Cement/Rebond Bilateral space main mand	\$40
1553	Re-Cement/Rebond unilateral space main max	\$40
1556	Remove unilateral space main max	\$40
1557	Remove fxd bilateral space main max	\$40
1558	Remove fxd bilateral space main mand	\$40
<b>RESTORATIVE</b>		
2140	Amalgam 1 surface primary or permanent	\$86
2150	Amalgam 2 surfaces primary or permanent	\$108
2160	Amalgam 3 surfaces primary or permanent	\$134
2161	Amalgam 4 or more surfaces prim or perm	\$166
2330	Resin 1 surface -anterior	\$102
2331	Resin 2 surfaces-anterior	\$124

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2332	Resin 3 surfaces-anterior	\$153
2335	Resin 4 or more surf includ incisal angle	\$182
2390	Resin based composite crown, anterior	\$209
2391	Resin 1 surface posterior	\$114
2392	Resin 2 surfaces posterior	\$162
2393	Resin 3 surfaces posterior	\$197
2394	Resin 4 or more surf post	\$223
2510	Inlay metallic 1surface	\$440
2520	Inlay metallic 2 surfaces	\$484
2530	Inlay metallic 3 surfaces	\$574
2542	Onlay metallic 2 surfaces	\$690
2543	Onlay metallic 3 surfaces	\$714
2544	Onlay metallic 4 or more surf	\$745
2610	Inlay porcelain/ceramic 1 surf	\$516
2620	Inlay porcelain/ceramic 2 surf	\$562
2630	Inlay porcelain/ceramic 3 surf	\$601
2642	Onlay porcelain/ceramic 2 surf	\$706
2643	Onlay porcelain/ceramic 3 surfaces	\$830
2644	Onlay porcelain/ceramic 4 or more	\$867
2650	Inlay composite/resin 1 surface	\$617
2651	Inlay composite/resin 2 surfaces	\$626
2652	Inlay composite/resin 3 or more surf	\$636
2662	Onlay composite/resin 2 surfaces	\$685
2663	Onlay composite/resin 3 surfaces	\$696
2664	Onlay composite/resin 4 or more	\$749
2740	Crown porce ceramic substr	\$831
2750	Crown porce fused high noble mtl	\$808
2751	Crown porce fused to predom base mtl	\$692
2752	Crown porcel fused to noble mtl	\$762
2753	Crown proc fused to titanium/alloys	\$762
2780	3/4 cast high noble metal	\$777
2783	Crown - 3/4 porcelain/ceramic	\$708
2790	Crown full cast high noble metal	\$799
2791	Crown full cast predom base metal	\$669
2792	Crown full cast noble metal	\$736
2794	Crown - titanium	\$798
2799	Provisional crown - further tx	\$250
2910	Recem/rebond inlay veneer/part cov rest	\$55
2915	Recem/rebond indir fab/ prefab post/core	\$62
2920	Re-cement or re-bond crown	\$65
2929	Prefab porce/ceram crown - primary tth	\$212
2930	Prefab stainless steel crown primary	\$179
2931	Prefab stainless steel crown prem	\$200
2932	Prefabricated resin crown	\$208
2933	Prefab stainless steel crown resin face	\$200
2934	Prefab esth coat stainless steel crown/prim	\$183
2940	Protective restoration	\$55
2950	Core build includ any pins when req	\$158
2951	Pin reten per tooth in add to restor	\$27
2952	Cast post and core in addition to crown	\$233
2953	Each additional cast post - same tooth	\$96
2954	Prefab post & core in add to crown	\$211
2955	Post removal	\$212
2957	Each add prefab post - same tooth	\$40
2960	Labial veneer (resin lam) chairside	\$295
2961	Labial veneer (resin lam) lab	\$467
2962	Labial veneer (porcelain lam) lab	\$769
2971	Proc to cons new crown under ex part dent frm	\$70
2975	Coping	\$350
2980	Crown repair necess by restor material fail	\$131
2981	Inlay repair necess by restor material fail	\$128
2982	Onlay repair necess by restor material fail	\$144
2983	Veneer repair necess by restor material fail	\$144
2990	Resin inflit of incipient smooth surf lesions	\$159

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<b>ENDODONTICS*</b>		
3110	Pulp cap direct	\$48
3120	Pulp cap indirect	\$44
3220	Pulpotomy	\$104
3221	Pulpal debridement primary or perm.	\$94
3222	Part pulp for apexogenesis- perm tooth	\$105
3230	Pulpal therapy anterior primary tooth	\$171
3240	Pulpal therapy posterior primary tooth	\$200
3310	Endodontic therapy , anterior tooth	\$443
3320	Endodontic therapy, premolar tooth	\$533
3330	Endodontic therapy, molar tooth	\$735
3331	Treatment of root canal obstruction	\$366
3332	Incomplete endodontic therapy	\$276
3333	Internal root repair of perforation defects	\$477
3346	Re-tx of prev root canal therapy anterior	\$610
3347	Re-tx of prev root canal therapy premolar	\$689
3348	Re-txof prev root canal therapy molar	\$870
3351	Apexification/recalci initial visit	\$258
3352	Apexification/recalci inter	\$127
3353	Apexificiation/recalci final visit	\$416
3410	Apicoectomy - anterior	\$527
3421	Apicoectomy - premolar (first root)	\$558
3425	Apicoectomy - molar (first root)	\$658
3426	Apicoectomy - each additional root	\$181
3430	Retrograde filling- per root	\$159
3450	Root amputation-per root	\$283
3470	Intentional reimplantation	\$568
3910	Surg proc for isol of tth with rubber dam	\$140
3920	Hemisect includ root remov exclud rt canal	\$273
<b>PERIODONTICS*</b>		
4210	Gingivect/gingivoplas-4 or more contig	\$378
4211	Gingvect/gingivopla- 1 to 3 teeth	\$239
4212	Gingiv or gingp to allow access for rest proc per tth	\$239
4230	Anatomic crown expos - 4 or more contig	\$742
4231	Anatomical crown expos - one to three teeth	\$428
4240	Ging flap includ root planing 4 or more contig teeth	\$435
4241	Ging flap includ root planing 1 to 3 teeth per quad	\$265
4245	Apically positioned flap	\$583
4249	Clinical crown lengthening, hard tissue	\$509
4260	Osseous surgery	\$763
4261	Osseous surgery 1 to 3 contiguous teeth	\$451
4263	Bone repl graft retain natur tth first site in quad	\$348
4264	Bone repl graft retain natur tth each site in quad	\$297
4265	Bio materials to aid soft/osseous tissue regen	\$327
4268	Surgical revision procedure per tooth	\$598
4270	Pedicle soft tissue graft procedure	\$454
4320	Provisional splinting- intracoronal	\$273
4321	Provisional splinting extracoronal	\$300
4341	Root planing/perio scaling- 4 or more cont. teeth	\$167
4342	Root planing/perio scaling-1 to 3 teeth per quad	\$102
4346	Scaling in presence of gen mod/severe	\$70
4355	Full mouth debride to enable a comp oral exm	\$95
4381	Local deliv of antimicro agnts via a cntrl reuse veh	\$63
4910	Periodontal maintenance	\$86
<b>REMOVABLE PROSTHODONTICS*</b>		
5110	Complete denture, maxillary	\$1,064
5120	Complete denture, mandibular	\$1,064
5130	Immediate denture, maxillary	\$1,240
5140	Immediate denture, mandibular	\$1,240
5211	Maxillary partial denture - resin base	\$751
5212	Mandibular partial denture	\$751
5213	Maxillary partial denture	\$1,047

continued on back

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5214	Mandibular partial denture	\$1,047
5221	Immediate maxillary partial denture	\$799
5222	Immediate mand part dent-resin base	\$799
5223	Immed maxi part dent cast mtl fwork with resin	\$1,135
5224	Immedi mand part dentcast metal fwork w resin	\$1,135
5225	Maxillary partial denture - flexible	\$1,054
5226	Mandibular partial denture - flexible base	\$1,054
5282	Remov unil part dent one piece cast metal -max	\$624
5283	Remov unil part dent one piece cast mtl mand	\$624
5284	Remove unilat part dent 1pc flexible pr qd	\$589
5286	Remove unilat part dent 1pc resin pr qd	\$589
5410	Adjust complete denture - maxillary	\$54
5411	Adjust complete denture - mandibular	\$54
5421	Adjust partial denture - maxillary	\$55
5422	Adjust partial denture - mandibular	\$55
5511	Repair broken complete dent base, mand	\$124
5512	Repair broken complete dent base, max	\$124
5520	Replace miss or brkn teeth comp dent	\$140
5611	Repair resin partial denture base, madibular	\$115
5612	Repair resin partial denture base, maxillary	\$115
5621	Repair cast partial framework, madibular	\$180
5622	Repair cast partial framework, maxillary	\$180
5630	Repair or replace broken clasp - per tooth	\$172
5640	Replace broken teeth - per tooth	\$140
5650	Add tooth to existing partial denture	\$134
5660	Add clasp to existing part dent per tooth	\$158
5670	Replace all teeth & acryl on cast mtl fwork (max)	\$654
5671	Replace all teeth & acryl on cast mtl fwork (mand)	\$655
5710	Rebase complete maxillary denture	\$348
5711	Rebase complete mandibular dent	\$348
5720	Rebase maxillary partial denture	\$360
5721	Rebase mandib part dent	\$360
5730	Reline complete maxill denture (chair)	\$208
5731	Reline complete mandi denture (chair)	\$208
5740	Reline partial maxill denture (chair)	\$185
5741	Reline partial mandi denture (chair)	\$185
5750	Reline complete maxi denture (lab)	\$310
5751	Reline complete mandi denture (lab)	\$310
5760	Reline partial maxillary denture (lab)	\$310
5761	Reline partial mandibular denture (lab)	\$310
5810	Interim complete denture - maxillary	\$499
5811	Interim complete denture - mandibular	\$499
5820	Interim partial denture - maxillary	\$450
5821	Interim partial denture - mandibular	\$414
5850	Tissue conditioning - maxillary	\$96
5851	Tissue conditioning - mandibular	\$96
5862	Precision attachment, by report	\$443
5867	Replc of replc part of semi-prec or prec attach	\$135
5875	Mod of remov prosth following implant surg	\$508
<b>FIXED PROSTHODONTICS*</b>		
6205	Pontic indirect resin based composite	\$494
6210	Pontic cast high noble metal	\$716
6211	Pontic cast predominantly base metal	\$598
6212	Pontic cast noble metal	\$675
6214	Pontic titanium	\$765
6240	Pontic porcelain fused to high noble metal	\$768
6241	Pontic porcelain fused to predom base met	\$660
6242	Pontic porcelain fused to noble metal	\$712
6245	Pontic - porcelain, ceramic	\$745
6250	Pontic resin with high noble metal	\$602
6251	Pontic resin with predominantly base metal	\$470
6252	Pontic resin with noble metal	\$540
6253	Provi pontic furt tx/comp of dx neces prior to fnl imp	\$139
6545	Retainer cast matallic for resin bonded fix prosthes	\$350
6548	Retain - porce/ceram for resin bond fxd prosth	\$585
6549	Resin retain - for resin bond fxd proth	\$350
6600	Retain inlay porc/ceramic 2 surfaces	\$629
6601	Retain inlay porc/ceramic 3 surf	\$639

ADA Code	Procedure Name	Member Pays Dentist
6602	Retain inlay cast high noble metal 2 surf	\$580
6603	Retain inlay cast high nbl mtl 3 or more surf	\$600
6604	Retain inlay cast pred base mtl 2 surf	\$523
6605	Retain inlay cast pred base mtl 3 or more surf	\$561
6606	Retain inlay cast nbl mtl 2 surf	\$536
6607	Retain inlay cast nbl mtl 3 or more surf	\$580
6608	Retain onlay porc/ceramic 2 surfaces	\$685
6609	Retain onlay porc/ceramic 3 or more surf	\$714
6610	Retain onlay cast high nbl mtl 2 surf	\$677
6611	Retain onlay cast high nbl mtl 3 or more surf	\$726
6612	Retain onlay cast pred base mtl 2 surf	\$643
6613	Retain onlay cast pred base mtl 3 or more	\$695
6614	Retain onlay cast nbl mtl 2 surf	\$666
6615	Retain onlay cst nble mtl 3 or more	\$724
6624	Retainer inlay titanium	\$643
6634	Retainer onlay titanium	\$754
6710	Retain crown indir resin based comp	\$642
6720	Retain crown resin with high noble metal	\$659
6721	Retain crown resin with pred base mtl	\$611
6722	Retain crown resin with noble metal	\$625
6740	Retainer crown - porcelain/ceramic	\$798
6750	Retain crown porc fused to high noble mtl	\$815
6751	Retain crown porc fused to pred base mtl	\$686
6752	Retain crown porc fused to nbl mtl	\$746
6780	Retainer crown 3/4 cast high noble metal	\$769
6781	Retain crown - 3/4 cast predom base metal	\$634
6782	Retain crown - 3/4 cast noble metal	\$649
6783	Retain crown - 3/4 porc/ceram	\$705
6790	Retainer crown full cast high noble metal	\$800
6791	Retain crown full cast predom base mtl	\$652
6792	Retainer crown full cast noble metal	\$730
6793	Provisional retainer crown	\$239
6794	Retainer crown - titanium	\$801
6920	Connector bar	\$478
6930	Recem or rebond fixed part dent	\$77
6940	Stress breaker	\$240
6950	Precision attachment	\$353
6976	Each additional cast post - same tooth	\$170
6980	Fixed part dent repair neces by restor mat fail	\$247
6985	Ped part dent fixed	\$127
<b>ORAL SURGERY*</b>		
7111	Extract, coronal remnants, prim tooth	\$48
7140	Extraction erupted tooth or exposed root	\$82
7210	Extr - erupt th req remov of bone and/or sect	\$145
7220	Removal of impacted tooth - soft tissue	\$174
7230	Removal of impacted tooth - partial bony	\$265
7240	Removal of impacted tooth - complete bony	\$275
7241	Remov of impact compl bony w complic	\$290
7250	Removal of residual tooth roots	\$147
7251	Coronectomy - intent part tooth remov	\$390
7260	Oroantral fistula closure	\$461
7261	Prim closure of a sinus perfor	\$461
7270	Tooth replant &/or stabiliz of ev/displa	\$268
7272	Tooth transplantation	\$341
7280	Exposure of an unerupted tooth	\$283
7282	Mobil of erupt or malpos tooth to aid erupt	\$86
7283	Place of devic to facili erupt of impact tth	\$275
7285	Incisional biopsy of oral tissue - hard	\$178
7286	Incisional biopsy of oral tissue - soft	\$168
7320	Alveoplasty not in conjunct w extract quad	\$221
7510	Incision & drain of abscess, intra soft tissue	\$115
7511	Incision & drain of abscess, extra soft tissue	\$270
7520	Incision & drainage of abscess, extraoral soft	\$144
7521	Incis & drain of abscess, intra soft tiss	\$256
7530	Remov of forgn body from muc, skin, sub	\$168
7540	Remov of reaction pro foreign bodies	\$256
7550	Part ostectomy/sequest for remov of nonvital	\$359
7560	Maxi sinus for remov of tooth frag or foriegn	\$675

ADA Code	Procedure Name	Member Pays Dentist
7910	Suture of recent small wound up to 5 cm	\$89
7911	Complicated suture - up to 5 cm	\$199
7912	Complicated suture - greater than 5 cm	\$380
7960	Frenulectomy - separate procedure	\$231
7963	Frenulectomy	\$227
7970	Excision of hyperplastic tissue, per arch	\$240
<b>ORTHODONTICS</b>		
8010	Limited ortho tx of the primary denti	\$2,136
8020	Limited ortho tx of the trans dent	\$2,372
8030	Limited ortho tx of the adolescent dent	\$2,798
8040	Limited ortho tx of the adult dent	\$3,101
8050	Interceptive ortho tx of the prim dent	\$2,710
8060	Interceptive ortho tx of the trans dent	\$2,782
8070	Compre ortho tx of the trans dent	\$4,998
8080	Compre ortho tx of the adoles dent	\$5,148
8090	Comp ortho tx of the adult dent	\$5,642
8210	Removable appliance therapy	\$715
8220	Fixed appliance therapy	\$863
8670	Perio ortho tx visit	\$252
8680	Orthodontic retention	\$650
8681	Removable ortho retainer adjust	\$52
8690	Ortho tx alternative billing	\$150
8695	Remov of fxd ortho appl for reas other	\$39
8696	Repair of ortho appliance max	\$194
8697	Repair of ortho appliance mand	\$194
8698	Re-cement/Rebond retainer max	\$150
8699	Re-cement/Rebond retainer mand	\$150
8701	Repair of fixed retainer incl reattch max	\$150
8702	Repair of fixed retainer incl reattch mand	\$150
8703	Replace lost/broken retainer max	\$95
8704	Replace lost/broken retainer mand	\$95
<b>OTHER SERVICES</b>		
9110	Palliative ER tx of dental pain, minor proc	\$84
9120	Fixed partial denture section	\$89
9210	Local anesth not in conj w op or surg proc	\$24
9211	Regional block anesthesia	\$31
9212	Trigeminal division block anesthesia	\$50
9215	Local anesthesia	\$30
9219	Eval for deep sed or gen anesth	\$55
9222	Deep sedation/gen anesth first 15 min	\$110
9223	Deep seda/gen anesth each sub 15 min inc	\$110
9230	Analgesia, anxiety inha lof nitrous	\$33
9239	Intrav mod(con) sed/analge first 15 min	\$112
9243	Intrav mod sed/analge -each sub 15 min inc	\$112
9248	Non-intravenous (con) sedation	\$65
9310	Consultation	\$0
9410	House/extended care facility call	\$54
9420	Hospital call	\$140
9430	Office visit for observation	\$35
9440	Office visit after regular hours	\$83
9941	Fabrication of athletic mouthguard	\$180
9942	Repair and/or reline of occlu grd	\$77
9943	Occlusal guard adjustment	\$52
9944	Occlusal guard-hard appl full arch	\$322
9945	Occlusal guard-soft appl, full arch	\$341
9946	Occlusal guard-hard appl, partial arch	\$85
9950	Occlusion analysis - mounted cast	\$220
9951	Occlusal adjustment limited	\$100
9952	Occlusal adjustment complete	\$490
9972	External bleach per arch	\$83
9973	External bleaching, per tooth	\$232

\* If services of a specialist are required (for Oral Surgery, Endodontics, Periodontics, Pediatric or Prosthodontics) these co-payments do not apply. Members will receive a significant percentage reduction of the usual specialist fee. See provider list. Taxes not included.