

When using our Sandia Plan dental providers, you pay directly to the orthodontic office:

ADA	Procedure Name	Member Pays
8010	Limited Ortho – Primary Dentition	\$2,136
8020	Limited Ortho – Transitional Dentition	\$2,372
8030	Limited Ortho – Adolescent Dentition	\$2,798
8040	Limited Ortho – Adult Dentition	\$3,101
8050	Interceptive Ortho – Primary Dentition	\$2,710
8060	Interceptive Ortho – Transitional Dentition	\$2,782
8070	Comprehensive Ortho – Transitional Dentition	\$4,998
8080	Comprehensive Ortho – Adolescent Dentition	\$5,148
8090	Comprehensive Ortho – Adult Dentition	\$5,642
8210	Removable Appliance Therapy	\$ 715
8220	Fixed Appliance Therapy	\$ 863
8670	Periodic Orthodontic Visit (contract)	\$ 252
8680	Retention Removal of Appliances	\$ 650
9697	Appliance Repair Mandible	\$ 194
8696	Appliance Repair Maxillary	\$ 194
8703	Lost or Broken Retainer	\$ 95
8698	Rebonding or Repair of Fixed Retainer	\$ 150
0322	Tomographic Survey *	\$ 170
0330	Panoramic Film *	\$ 69
0340	Cephalometric Film *	\$ 72
0350	Oral Facial Images *	\$ 52
0470	Diagnostic Costs *	\$ 65

* Included in total Orthodontic fee.