

Schedule Detail Listing
 Schedule: 702 (U.T.I.T. ISLAND TREES) From: 1/1/2009
 Procedure Range: ALL

Proc Code	Description	Full Amount	Prof. Amount	F/U Days	Anes. Unit	Anes. Value
D0120	PERIODIC ORAL EVALUATION ESTABLISHED PATIENT	\$32.00	\$0.00	0	0	\$0.00
D0140	LIMITED ORAL EVALUATION - PROBLEM FOCUSED	\$33.00	\$0.00	0	0	\$0.00
D0150	COMP ORAL EVALUATION - NEW/ESTABLISHED PATIENT	\$35.00	\$0.00	0	0	\$0.00
D0160	DTL&EXT ORAL EVALUATION - PROBLEM FOCUSED REPORT	\$38.00	\$0.00	0	0	\$0.00
D0170	RE-EVALUATION - LIMITED PROBLEM FOCUSED	\$25.00	\$0.00	0	0	\$0.00
D0180	COMP PERIODONTAL EVALUATION - NEW/EST PATIENT	\$32.00	\$0.00	0	0	\$0.00
D0210	INTRAORAL-COMPLETE SERIES	\$50.00	\$0.00	0	0	\$0.00
D0220	INTRAORAL-PERIAPICAL-FIRST FILM	\$9.00	\$0.00	0	0	\$0.00
D0230	INTRAORAL-PERIAPICAL-EACH ADDITIONAL FILM	\$7.00	\$0.00	0	0	\$0.00
D0240	INTRAORAL - OCCLUSAL FILM	\$15.00	\$0.00	0	0	\$0.00
D0250	EXTRAORAL - FIRST FILM	\$16.00	\$0.00	0	0	\$0.00
D0260	EXTRAORAL - EACH ADDITIONAL FILM	\$14.00	\$0.00	0	0	\$0.00
D0270	BITEWING - SINGLE FILM	\$8.00	\$0.00	0	0	\$0.00
D0272	BITEWINGS - TWO FILMS	\$15.00	\$0.00	0	0	\$0.00
D0274	BITEWINGS - FOUR FILMS	\$24.00	\$0.00	0	0	\$0.00
D0277	VERTICAL BITEWINGS - 7 TO 8 FILMS	\$33.00	\$0.00	0	0	\$0.00
D0290	POST-ANTILAT SKULL&FACIAL BONE SURVEY FILM	\$44.00	\$0.00	0	0	\$0.00
D0330	PANORAMIC FILM	\$45.00	\$0.00	0	0	\$0.00
D0340	CEPHALOMETRIC FILM	\$47.00	\$0.00	0	0	\$0.00
D0350	ORAL/FACIAL PHOTOGRAPHIC IMAGES	\$23.00	\$0.00	0	0	\$0.00
D0470	DIAGNOSTIC CASTS	\$45.00	\$0.00	0	0	\$0.00
D0471	DIAGNOSTIC PHOTOGRAPHS	\$13.00	\$0.00	0	0	\$0.00
D1110	PROPHYLAXIS - ADULT	\$55.00	\$0.00	0	0	\$0.00
D1120	PROPHYLAXIS - CHILD	\$25.00	\$0.00	0	0	\$0.00
D1201	TOPICAL APPLICATION OF FLUORIDE - CHILD	\$45.00	\$0.00	0	0	\$0.00
D1203	TOPICAL APPLICATION OF FLUORIDE - CHILD	\$25.00	\$0.00	0	0	\$0.00
D1351	SEALANT - PER TOOTH	\$22.00	\$0.00	0	0	\$0.00
D1510	SPACE MAINTAINER - FIXED-UNILATERAL	\$145.00	\$0.00	0	0	\$0.00
D1515	SPACE MAINTAINER - FIXED-BILATERAL	\$225.00	\$0.00	0	0	\$0.00
D1520	SPACE MAINTAINER - REMOVABLE-UNILATERAL	\$130.00	\$0.00	0	0	\$0.00
D1525	SPACE MAINTAINER - REMOVABLE-BILATERAL	\$230.00	\$0.00	0	0	\$0.00

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D1550	RECEMENTATION OF SPACE MAINTAINER	\$30.00	\$0.00	0	0	\$0.00
D2110	AMALGAM ONE SURFACE PRIMARY	\$42.00	\$0.00	0	0	\$0.00
D2120	AMALGAM TWO SURFACES PRIMARY	\$50.00	\$0.00	0	0	\$0.00
D2130	AMALGAM THREE SURFACES PRIMARY	\$65.00	\$0.00	0	0	\$0.00
D2131	AMALGAM FOUR/MORE SURFACES PRIMARY	\$70.00	\$0.00	0	0	\$0.00
D2140	AMALGAM-ONE SURFACE PRIMARY OR PERMANENT	\$45.00	\$0.00	0	0	\$0.00
D2150	AMALGAM-TWO SURFACES PRIMARY OR PERMANENT	\$55.00	\$0.00	0	0	\$0.00
D2160	AMALGAM-THREE SURFACES PRIMARY OR PERMANENT	\$70.00	\$0.00	0	0	\$0.00
D2161	AMALGAM-FOUR/MORE SURFACES PRIMARY/PERMANENT	\$80.00	\$0.00	0	0	\$0.00
D2210	SILICATE CEMENT-PER RESTORATION	\$26.00	\$0.00	0	0	\$0.00
D2330	RESIN-BASED COMPOSITE - ONE SURFACE ANTERIOR	\$60.00	\$0.00	0	0	\$0.00
D2331	RESIN-BASED COMPOSITE - TWO SURFACES ANTERIOR	\$65.00	\$0.00	0	0	\$0.00
D2332	RESIN-BASED COMPOSITE - THREE SURFACES ANTERIOR	\$85.00	\$0.00	0	0	\$0.00
D2335	RESIN COMPOS - 4/MORE SURFACES/INVLV INCISAL ANG	\$110.00	\$0.00	0	0	\$0.00
D2380	RESIN ONE SURFACE POSTERIOR PRIMARY	\$0.00	\$0.00	0	0	\$0.00
D2391	RESIN-BASED COMPOSITE - ONE SURFACE POSTERIOR	\$110.00	\$0.00	0	0	\$0.00
D2392	RESIN-BASED COMPOSITE - TWO SURFACES POSTERIOR	\$130.00	\$0.00	0	0	\$0.00
D2393	RESIN-BASED COMPOSITE - THREE SURFACES POSTERIOR	\$150.00	\$0.00	0	0	\$0.00
D2394	RESIN COMPOS - FOUR OR MORE SURFACES POSTERIOR	\$165.00	\$0.00	0	0	\$0.00
D2510	INLAY - METALLIC - ONE SURFACE	\$245.00	\$0.00	0	0	\$0.00
D2520	INLAY - METALLIC - TWO SURFACES	\$250.00	\$0.00	0	0	\$0.00
D2530	INLAY - METALLIC - THREE OR MORE SURFACES	\$375.00	\$0.00	0	0	\$0.00
D2542	ONLAY - METALLIC - TWO SURFACES	\$300.00	\$0.00	0	0	\$0.00
D2543	ONLAY METALLIC THREE SURFACES	\$345.00	\$0.00	0	0	\$0.00
D2544	ONLAY METALLIC FOUR OR MORE SURFACES	\$375.00	\$0.00	0	0	\$0.00
D2610	INLAY - PORCELAIN/CERAMIC - ONE SURFACE	\$250.00	\$0.00	0	0	\$0.00
D2620	INLAY - PORCELAIN/CERAMIC - TWO SURFACES	\$275.00	\$0.00	0	0	\$0.00
D2630	INLAY - PORCELAIN/CERAMIC - THREE/MORE SURFACES	\$325.00	\$0.00	0	0	\$0.00
D2640	ONLAY PORCELAIN/CERAMIC PER TOOTH (ADD TO INLAY)AY	\$90.00	\$0.00	0	0	\$0.00
D2642	ONLAY - PORCELAIN/CERAMIC - TWO SURFACES	\$325.00	\$0.00	0	0	\$0.00
D2643	ONLAY - PORCELAIN/CERAMIC - THREE SURFACES	\$350.00	\$0.00	0	0	\$0.00

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Proc Code	Description	Full Amount	Prof. Amount	F/U Days	Anes. Unit	Anes. Value
D2644	ONLAY - PORCELAIN/CERAMIC - 4 OR MORE SURFACES	\$400.00	\$0.00	0	0	\$0.00
D2650	INLAY - RESIN COMPOS COMPOSITE/RESIN - 1 SURFACE	\$150.00	\$0.00	0	0	\$0.00
D2651	INLAY - RESIN COMPOS COMPOS/RESIN - 2 SURFACES	\$250.00	\$0.00	0	0	\$0.00
D2652	INLAY - RSN COMPOS COMPOS/RSN - 3/MORE SURFACES	\$275.00	\$0.00	0	0	\$0.00
D2662	ONLAY - RESIN COMPOS COMPOS/RESIN - 2 SURFACES	\$235.00	\$0.00	0	0	\$0.00
D2663	ONLAY - RESIN COMPOS COMPOS/RESIN - 3 SURFACES	\$275.00	\$0.00	0	0	\$0.00
D2664	ONLAY - RSN COMPOS COMPOS/RSN - 4/MORE SURFACES	\$300.00	\$0.00	0	0	\$0.00
D2710	CROWN RESINBASED COMPOSITE INDIRECT	\$246.00	\$0.00	0	0	\$0.00
D2720	CROWN - RESIN WITH HIGH NOBLE METAL	\$605.00	\$0.00	0	0	\$0.00
D2721	CROWN - RESIN WITH PREDOMINANTLY BASE METAL	\$568.00	\$0.00	0	0	\$0.00
D2722	CROWN - RESIN WITH NOBLE METAL	\$580.00	\$0.00	0	0	\$0.00
D2740	CROWN - PORCELAIN/CERAMIC SUBSTRATE	\$622.00	\$0.00	0	0	\$0.00
D2750	CROWN - PORCELAIN FUSED TO HIGH NOBLE METAL	\$614.00	\$0.00	0	0	\$0.00
D2751	CROWN - PORCELAIN FUSED PREDOMINANTLY BASE METAL	\$571.00	\$0.00	0	0	\$0.00
D2752	CROWN - PORCELAIN FUSED TO NOBLE METAL	\$585.00	\$0.00	0	0	\$0.00
D2790	CROWN - FULL CAST HIGH NOBLE METAL	\$592.00	\$0.00	0	0	\$0.00
D2791	CROWN - FULL CAST PREDOMINANTLY BASE METAL	\$561.00	\$0.00	0	0	\$0.00
D2792	CROWN - FULL CAST NOBLE METAL	\$571.00	\$0.00	0	0	\$0.00
D2810	CROWN-3/4 CAST METALLIC	\$400.00	\$0.00	0	0	\$0.00
D2910	RECEMENT INLAY ONLAY/PART COVERAGE RESTORATION	\$39.00	\$0.00	0	0	\$0.00
D2920	RECEMENT CROWN	\$39.00	\$0.00	0	0	\$0.00
D2940	SEDATIVE FILLING	\$40.00	\$0.00	0	0	\$0.00
D2950	CORE BUILDUP INCLUDING ANY PINS	\$115.00	\$0.00	0	0	\$0.00
D2951	PIN RETENTION - PER TOOTH ADDITION RESTORATION	\$25.00	\$0.00	0	0	\$0.00
D2952	POST AND CORE ADDITION TO CROWN INDIRECTLY FAB	\$180.00	\$0.00	0	0	\$0.00
D2954	PREFABRICATED POST AND CORE IN ADDITION TO CROWN	\$150.00	\$0.00	0	0	\$0.00
D2955	POST REMOVAL	\$90.00	\$0.00	0	0	\$0.00
D2960	LABIAL VENEER - CHAIRSIDE	\$250.00	\$0.00	0	0	\$0.00
D2961	LABIAL VENEER - LABORATORY	\$335.00	\$0.00	0	0	\$0.00
D2962	LABIAL VENEER - LABORATORY	\$350.00	\$0.00	0	0	\$0.00
D2980	CROWN REPAIR BY REPORT	\$90.00	\$0.00	0	0	\$0.00

Schedule Detail Listing

Proc Code	Description	Full Amount	Prof. Amount	F/U Days	Anes. Unit	Anes. Value
D3110	PULP CAP - DIRECT	\$36.00	\$0.00	0	0	\$0.00
D3220	TX PULP-REMV PULP CORONAL DENTINOCEMENTL JUNC	\$87.00	\$0.00	0	0	\$0.00
D3221	PULPAL DEBRIDEMENT PRIMARY AND PERMANENT TEETH	\$55.00	\$0.00	0	0	\$0.00
D3310	ANTERIOR	\$366.00	\$0.00	0	0	\$0.00
D3320	BICUSPID	\$447.00	\$0.00	0	0	\$0.00
D3330	MOLAR	\$577.00	\$0.00	0	0	\$0.00
D3331	TREATMENT RC OBSTRUCTION; NON-SURGICAL ACCESS	\$100.00	\$0.00	0	0	\$0.00
D3346	RETREATMENT PREVIOUS RC THERAPY - ANTERIOR	\$493.00	\$0.00	0	0	\$0.00
D3347	RETREATMENT PREVIOUS RC THERAPY - BICUSPID	\$581.00	\$0.00	0	0	\$0.00
D3348	RETREATMENT PREVIOUS ROOT CANAL THERAPY - MOLAR	\$699.00	\$0.00	0	0	\$0.00
D3410	APICOECTOMY/PERIRADICULAR SURGERY - ANTERIOR	\$419.00	\$0.00	0	0	\$0.00
D3420	APICOECTOMY-PERFORM IN CONJUNC WITH ENDORT	\$301.00	\$0.00	0	0	\$0.00
D3421	APICOECTOMY/PERIRADICULAR SURGERY - BICUSPID	\$458.00	\$0.00	0	0	\$0.00
D3425	APICOECTOMY/PERIRADICULAR SURGERY - MOLAR	\$518.00	\$0.00	0	0	\$0.00
D3426	APICOECTOMY/PERIRADICULAR SURGERY	\$173.00	\$0.00	0	0	\$0.00
D3430	RETROGRADE FILLING - PER ROOT	\$126.00	\$0.00	0	0	\$0.00
D3450	ROOT AMPUTATION - PER ROOT	\$257.00	\$0.00	0	0	\$0.00
D3920	HEMISECTION NOT INCLUDING ROOT CANAL THERAPY	\$201.00	\$0.00	0	0	\$0.00
D4210	GINGIVECT/PLSTY 4/>CNTIG/BOUND TEETH SPACES-QUAD	\$335.00	\$0.00	0	0	\$0.00
D4211	GINGIVECT/PLSTY 1-3 CNTIG/BOUND TEETH SPACE-QUAD	\$143.00	\$0.00	0	0	\$0.00
D4220	GING CURET SURG/QUAD BR	\$120.00	\$0.00	0	0	\$0.00
D4240	INGL FLP PROC 4/> CONTIG/BOUND TEETH SPACE-QUAD	\$494.00	\$0.00	0	0	\$0.00
D4249	CLINICAL CROWN LENGTHENING - HARD TISSUE	\$398.00	\$0.00	0	0	\$0.00
D4260	OSSEOUS SURG 4/> CONTIG/BOUND TEETH SPACES-QUAD	\$638.00	\$0.00	0	0	\$0.00
D4263	BONE REPLACEMENT GRAFT - FIRST SITE IN QUADRANT	\$241.00	\$0.00	0	0	\$0.00
D4264	BONE REPLACEMENT GRAFT - EA ADD SITE QUADRANT	\$150.00	\$0.00	0	0	\$0.00
D4266	GUID TISSUE REGEN - RESORBABLE BARRIER PER SITE	\$325.00	\$0.00	0	0	\$0.00
D4267	GUID TISSUE REGEN - NONRESORB BARRIER PER SITE	\$374.00	\$0.00	0	0	\$0.00
D4270	PEDICLE SOFT TISSUE GRAFT PROCEDURE	\$472.00	\$0.00	0	0	\$0.00
D4271	FREE SOFT TISSUE GRAFT PROCEDURE	\$485.00	\$0.00	0	0	\$0.00
D4273	SUBEPITHEL. CONNECTIVE TISSUE GRAFT PROC PER TOOTH	\$518.00	\$0.00	0	0	\$0.00

Schedule Detail Listing
Schedule: 702 (U.T.I.T. ISLAND TREES) From: 1/1/2009
Procedure Range: ALL

Proc Code	Description	Full Amount	Prof. Amount	F/U Days	Anes. Unit	Anes. Value
D4274	DISTAL OR PROXIMAL WEDGE PROCEDURE	\$183.00	\$0.00	0	0	\$0.00
D4320	PROVISIONAL SPLINTING - INTRACORONAL	\$233.00	\$0.00	0	0	\$0.00
D4321	PROVISIONAL SPLINTING - EXTRACORONAL	\$205.00	\$0.00	0	0	\$0.00
D4341	PRDONTAL SCALING&ROOT PLANING 4/MORE TEETH-QUAD	\$127.00	\$0.00	0	0	\$0.00
D4342	PRDONTAL SCALING&ROOT PLANING 1-3 TEETH-QUAD	\$31.00	\$0.00	0	0	\$0.00
D4355	FULL MOUTH DEBRID ENABLE COMP EVALUATION&DX	\$84.00	\$0.00	0	0	\$0.00
D4381	LOC DEL ANTIMICROBL AGTS CREVICULR TISS TOOTH BR	\$80.00	\$0.00	0	0	\$0.00
D4910	PERIODONTAL MAINTENANCE	\$76.00	\$0.00	0	0	\$0.00
D5110	COMPLETE DENTURE - MAXILLARY	\$600.00	\$0.00	0	0	\$0.00
D5120	COMPLETE DENTURE - MANDIBULAR	\$600.00	\$0.00	0	0	\$0.00
D5211	MAXILLARY PARTIAL DENTURE - RESIN BASE	\$525.00	\$0.00	0	0	\$0.00
D5212	MANDIBULAR PARTIAL DENTURE - RESIN BASE	\$525.00	\$0.00	0	0	\$0.00
D5213	MAX PART DENTUR-CAST METL FRMWRK W/RSN BASE	\$620.00	\$0.00	0	0	\$0.00
D5214	MAND PART DENTUR- CAST METL FRMWRK W/RSN BASE	\$620.00	\$0.00	0	0	\$0.00
D5281	RENV UNILAT PART DENTUR - 1 PIECE CAST METAL	\$267.00	\$0.00	0	0	\$0.00
D6410	ADJUST COMPLETE DENTURE - MAXILLARY	\$25.00	\$0.00	0	0	\$0.00
D6411	ADJUST COMPLETE DENTURE - MANDIBULAR	\$35.00	\$0.00	0	0	\$0.00
D6421	ADJUST PARTIAL DENTURE - MAXILLARY	\$35.00	\$0.00	0	0	\$0.00
D6422	ADJUST PARTIAL DENTURE - MANDIBULAR	\$30.00	\$0.00	0	0	\$0.00
D6510	REPAIR BROKEN COMPLETE DENTURE BASE	\$75.00	\$0.00	0	0	\$0.00
D6520	REPLACE MISSING/BROKEN TEETH - COMPLETE DENTURE	\$70.00	\$0.00	0	0	\$0.00
D6610	REPAIR RESIN DENTURE BASE	\$70.00	\$0.00	0	0	\$0.00
D6620	REPAIR CAST FRAMEWORK	\$75.00	\$0.00	0	0	\$0.00
D6630	REPAIR OR REPLACE BROKEN CLASP	\$85.00	\$0.00	0	0	\$0.00
D6640	REPLACE BROKEN TEETH - PER TOOTH	\$70.00	\$0.00	0	0	\$0.00
D6650	ADD TOOTH TO EXISTING PARTIAL DENTURE	\$80.00	\$0.00	0	0	\$0.00
D6660	ADD CLASP TO EXISTING PARTIAL DENTURE	\$100.00	\$0.00	0	0	\$0.00
D6710	REBASE COMPLETE MAXILLARY DENTURE	\$125.00	\$0.00	0	0	\$0.00
D6711	REBASE COMPLETE MANDIBULAR DENTURE	\$125.00	\$0.00	0	0	\$0.00
D6720	REBASE MAXILLARY PARTIAL DENTURE	\$125.00	\$0.00	0	0	\$0.00
D6721	REBASE MANDIBULAR PARTIAL DENTURE	\$125.00	\$0.00	0	0	\$0.00

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D5730	RELINE COMPLETE MAXILLARY DENTURE CHAIRSIDE	\$140.00	\$0.00	0	0	\$0.00
D5731	RELINE COMPLETE MANDIBULAR DENTURE CHAIRSIDE	\$140.00	\$0.00	0	0	\$0.00
D5740	RELINE MAXILLARY PARTIAL DENTURE CHAIRSIDE	\$85.00	\$0.00	0	0	\$0.00
D5741	RELINE MANDIBULAR PARTIAL DENTURE CHAIRSIDE	\$85.00	\$0.00	0	0	\$0.00
D5750	RELINE COMPLETE MAXILLARY DENTURE LABORATORY	\$150.00	\$0.00	0	0	\$0.00
D5751	RELINE COMPLETE MANDIBULAR DENTURE LABORATORY	\$150.00	\$0.00	0	0	\$0.00
D5760	RELINE MAXILLARY PARTIAL DENTURE LABORATORY	\$145.00	\$0.00	0	0	\$0.00
D5761	RELINE MANDIBULAR PARTIAL DENTURE LABORATORY	\$145.00	\$0.00	0	0	\$0.00
D6010	SURG PLACEMENT IMPLANT BODY: ENDOSTEAL IMPLANT	\$1,000.00	\$0.00	0	0	\$0.00
D6020	ABUT PLACEMENT/SUBSTITUTION: ENDOSTEAL IMPLANT	\$150.00	\$0.00	0	0	\$0.00
D6030	ENDOSSEOUS IMPLANT (IN THE BONE)	\$1,000.00	\$0.00	0	0	\$0.00
D6040	SURGICAL PLACEMENT: EPOSTEAL IMPLANT	\$1,000.00	\$0.00	0	0	\$0.00
D6050	SURGICAL PLACEMENT: TRANSOSTEAL IMPLANT	\$1,000.00	\$0.00	0	0	\$0.00
D6057	CUSTOM ABUTMENT INCLUDES PLACEMENT	\$300.00	\$0.00	0	0	\$0.00
D6059	ABUT SUPP PORCELAIN TO METL CROWN HI NOBLE METL	\$400.00	\$0.00	0	0	\$0.00
D6060	ABUT SUPP PORCELAIN TO MTL CROWN PREDOM BASE MTL	\$700.00	\$0.00	0	0	\$0.00
D6061	ABUT SUPP PORCELAIN TO METAL CROWN NOBLE METAL	\$700.00	\$0.00	0	0	\$0.00
D6066	IMPLANT SUPPORTED PORCELAIN FUSED TO METAL CROWN	\$650.00	\$0.00	0	0	\$0.00
D6210	PONTIC - CAST HIGH NOBLE METAL	\$550.00	\$0.00	0	0	\$0.00
D6211	PONTIC - CAST PREDOMINANTLY BASE METAL	\$514.00	\$0.00	0	0	\$0.00
D6212	PONTIC - CAST NOBLE METAL	\$535.00	\$0.00	0	0	\$0.00
D6240	PONTIC - PORCELAIN FUSED TO HIGH NOBLE METAL	\$542.00	\$0.00	0	0	\$0.00
D6241	PONTIC - PORCELN FUSED PREDOMINANTLY BASE METAL	\$501.00	\$0.00	0	0	\$0.00
D6242	PONTIC - PORCELAIN FUSED TO NOBLE METAL	\$528.00	\$0.00	0	0	\$0.00
D6250	PONTIC - RESIN WITH HIGH NOBLE METAL	\$535.00	\$0.00	0	0	\$0.00
D6251	PONTIC - RESIN WITH PREDOMINANTLY BASE METAL	\$494.00	\$0.00	0	0	\$0.00
D6252	PONTIC - RESIN WITH NOBLE METAL	\$509.00	\$0.00	0	0	\$0.00
D6645	RETAINER - CAST METAL RESIN BONDED FIX PROSTH	\$180.00	\$0.00	0	0	\$0.00
D6720	CROWN - RESIN WITH HIGH NOBLE METAL	\$605.00	\$0.00	0	0	\$0.00
D6721	CROWN RESIN W/PREDOMINANTLY BASE METAL-DENTURE	\$568.00	\$0.00	0	0	\$0.00
D6722	CROWN - RESIN WITH NOBLE METAL	\$585.00	\$0.00	0	0	\$0.00

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D6740	CROWN - PORCELAIN/CERAMIC	\$350.00	\$0.00	0	0	\$0.00
D6750	CROWN PORCELAIN FUSED TO HI NOBLE METAL-DENTURE	\$614.00	\$0.00	0	0	\$0.00
D6751	CROWN - PORCELAIN FUSED PREDOMINANTLY BASE METAL	\$568.00	\$0.00	0	0	\$0.00
D6752	CROWN - PORCELAIN FUSED TO NOBLE METAL	\$585.00	\$0.00	0	0	\$0.00
D6780	CROWN - 3/4 CAST HIGH NOBLE METAL	\$585.00	\$0.00	0	0	\$0.00
D6790	CROWN FULL CAST HIGH NOBLE METAL-DENTURE	\$592.00	\$0.00	0	0	\$0.00
D6791	CROWN FULL CAST PREDOMINANTLY BASE METAL-DENTURE	\$561.00	\$0.00	0	0	\$0.00
D6792	CROWN FULL CAST NOBLE METAL-DENTURE	\$571.00	\$0.00	0	0	\$0.00
D6930	RECEMENT FIXED PARTIAL DENTURE	\$50.00	\$0.00	0	0	\$0.00
D6980	FIXED PARTIAL DENTURE REPAIR BY REPORT	\$85.00	\$0.00	0	0	\$0.00
D7110	SINGLE TOOTH	\$90.00	\$0.00	0	0	\$0.00
D7111	EXTRACTION CORONAL REMNANTS DECIDUOUS TOOTH	\$70.00	\$0.00	0	0	\$0.00
D7120	EACH ADDITIONAL TOOTH	\$85.00	\$0.00	0	0	\$0.00
D7130	ROOT REMOVAL EXPOSED ROOTS	\$115.00	\$0.00	0	0	\$0.00
D7140	EXTRACTION ERUPTED TOOTH OR EXPOSED ROOT	\$90.00	\$0.00	0	0	\$0.00
D7210	SURG REMV ERUPTED TOOTH RQR ELEV FLP&REMY BONE	\$143.00	\$0.00	0	0	\$0.00
D7220	REMOVAL OF IMPACTED TOOTH - SOFT TISSUE	\$179.00	\$0.00	0	0	\$0.00
D7230	REMOVAL OF IMPACTED TOOTH - PARTIALLY BONY	\$238.00	\$0.00	0	0	\$0.00
D7240	REMOVAL OF IMPACTED TOOTH - COMPLETELY BONY	\$280.00	\$0.00	0	0	\$0.00
D7241	REMY IMP TOOTH - CMPL BONY W/UNUSUAL SURG COMPS	\$352.00	\$0.00	0	0	\$0.00
D7250	SURGICAL REMOVAL OF RESIDUAL TOOTH ROOTS	\$150.00	\$0.00	0	0	\$0.00
D7260	OROLANTRAL FISTULA CLOSURE	\$500.00	\$0.00	0	0	\$0.00
D7270	TOOTH REMPL &OR STBL ACC EVLUSED/DISPLCD TOOTH	\$300.00	\$0.00	0	0	\$0.00
D7272	TOOTH TRANSPLANTATION	\$315.00	\$0.00	0	0	\$0.00
D7280	SURGICAL ACCESS OF AN UNERUPTED TOOTH	\$337.00	\$0.00	0	0	\$0.00
D7281	SURG EXPOS IMPACT/UNERUPTED TOOTH AID ERUPTION	\$285.00	\$0.00	0	0	\$0.00
D7285	BIOPSY OF ORAL TISSUE HARD	\$250.00	\$0.00	0	0	\$0.00
D7286	BIOPSY OF ORAL TISSUE SOFT	\$175.00	\$0.00	0	0	\$0.00
D7310	ALVEOLOPLASTY W/EXTRACTION 4/> TEETH/SPACE QUAD	\$133.00	\$0.00	0	0	\$0.00
D7320	ALVEOLOPLASTY NOT W/EXTRACTIONS 4/> TEETH/SPACE	\$250.00	\$0.00	0	0	\$0.00
D7410	EXCISION OF BENIGN LESION UP TO 1.25 CM	\$190.00	\$0.00	0	0	\$0.00

Schedule Detail Listing
 Schedule: 702 (U.T.I.T. ISLAND TREES) From: 1/1/2009
 Procedure Range: ALL

Proc Code	Description	Full Amount	Prof Amount	F/U Days	Anes. Unit	Anes. Value
D7420	RADCL EXC LES > 1.25CM	\$120.00	\$0.00	0	0	\$0.00
D7430	EXC BEN TUMOR/LES TO 1.25CM	\$250.00	\$0.00	0	0	\$0.00
D7431	EXC BEN TUMOR/LES > 1.25CM	\$300.00	\$0.00	0	0	\$0.00
D7480	PART OSTEC (GUTTERING/SAUCER)	\$200.00	\$0.00	0	0	\$0.00
D7510	INCISION & DRAINAGE ABSCESS-INTRAORAL SOFT TISS	\$159.00	\$0.00	0	0	\$0.00
D7950	OSSEOUS OSTEOPERIOSTEAL/CARTILAGE GRAFT MAND/MAX	\$215.00	\$0.00	0	0	\$0.00
D7963	BONE REPLCMT GRAFT RIDGE PRESERVATION PER SITE	\$135.00	\$0.00	0	0	\$0.00
D7965	REPAIR MAXILOFACIAL SOFT &/ HARD TISSUE DEFECT	\$450.00	\$0.00	0	0	\$0.00
D7960	FRENULLECTOMY SEPARATE PROCEDURE	\$350.00	\$0.00	0	0	\$0.00
D9110	PALLIATIVE TREATMENT DENTAL PAIN - MINOR PROC	\$35.00	\$0.00	0	0	\$0.00
D9220	DEEP SEDATION/GENERAL ANESTHESIA-1ST 30 MINUTES	\$110.00	\$0.00	0	0	\$0.00
D9221	DEEP SEDATION/GENERAL ANESTHESIA-EA ADD 15 MIN	\$50.00	\$0.00	0	0	\$0.00
D9310	CONSULT DX SERV DENT/PHY NOT REQUESTING DENT/PHY	\$45.00	\$0.00	0	0	\$0.00
D9410	HOUSE/EXTENDED CARE FACILITY CALL	\$40.00	\$0.00	0	0	\$0.00
D9610	THERAPEUTIC PARENTERAL DRUG SINGL ADMINISTRATION	\$25.00	\$0.00	0	0	\$0.00
D9951	OCCCLUSAL ADJUSTMENT - LIMITED	\$60.00	\$0.00	0	0	\$0.00
D9952	OCCCLUSAL ADJUSTMENT - COMPLETE	\$175.00	\$0.00	0	0	\$0.00
D9999	UNSPECIFIED ADJUNCTIVE PROC BY REPORT (04/2008)	\$0.00	\$0.00	0	0	\$0.00

*** End of Report ***