METLIFE PREFERRED DENTIST PROGRAM

2018-2019 Procedure Charge Schedule - $15 Plan

How to use this chart

1) If you participate in a MetLife Preferred Dentist Program plan that uses procedure charge schedules to determine your out-of-pocket expense for covered services rendered by a participating dentist, please refer to the chart below to determine which schedule applies to you. Please remember that the schedule you should refer to relates to the area in which you receive services (i.e. the first three digits of your dentist's office ZIP code). This chart contains some of the most common dental procedures. Please see your benefit booklet or refer to www.metlife.com/mybenefits for services covered under your dental plan.

2) When your dentist suggests treatment, refer to the appropriate ADA Procedure Codes beginning on page 6 to find your out-of-pocket expense for those services.

3) Please note that procedure charges listed may not represent the full extent of your out-of-pocket expense. Some services may be subject to your dental benefits plan's alternate benefit provisions. It is strongly suggested that you obtain a pretreatment estimate of benefits before the services are rendered in order to better understand what services are covered by your plan and an estimate of what your plan will pay.

State	Zip	Area
Alabama	350	1
Alabama	355	1
Alabama	359	1
Alabama	363	1
Alabama	367	1
Alaska	996	4
Arizona	850	2
Arizona	855	2
Arizona	860	2
Arkansas	716	1
Arkansas	720	1
Arkansas	724	1
Arkansas	728	1
California	902	2
California	906	2
California	911	3
California	915	2
California	919	2
California	923	2
California	927	2
California	932	3
California	936	2
California	940	4
California	944	4
California	948	3
California	952	3
California	956	3
California	960	3
Colorado	802	2
Colorado	806	2
Colorado	810	2
Colorado	814	2
Connecticut	061	3
Connecticut	065	4
Connecticut	069	4
D.C.	204	2
Delaware	199	4
Florida	323	1
Florida	327	1
Florida	331	2

State	Zip	Area
Alabama	351	1
Alabama	356	1
Alabama	360	1
Alabama	364	1
Alabama	368	1
Alaska	997	4
Arizona	851	2
Arizona	856	2
Arizona	863	2
Arkansas	717	1
Arkansas	721	2
Arkansas	725	1
Arkansas	729	1
California	903	3
California	907	2
California	912	2
California	916	2
California	920	2
California	924	2
California	928	2
California	933	3
California	937	2
California	941	4
California	945	3
California	949	4
California	953	2
California	957	3
California	961	3
Colorado	803	2
Colorado	807	2
Colorado	811	2
Colorado	815	2
Connecticut	062	4
Connecticut	066	3
D.C.	200	3
D.C.	205	2
Florida	320	1
Florida	324	1
Florida	328	1
Florida	332	2

State	Zip	Area
Alabama	352	1
Alabama	357	1
Alabama	361	1
Alabama	365	1
Alabama	369	1
Alaska	998	4
Arizona	852	2
Arizona	857	1
Arizona	864	2
Arkansas	718	2
Arkansas	722	1
Arkansas	726	1
California	900	2
California	904	3
California	908	2
California	913	2
California	917	2
California	921	2
California	925	2
California	930	3
California	934	3
California	938	2
California	942	4
California	946	3
California	950	3
California	954	3
California	958	3
Colorado	800	2
Colorado	804	2
Colorado	808	2
Colorado	812	2
Colorado	816	4
Connecticut	063	3
Connecticut	067	3
D.C.	202	2
Delaware	197	4
Florida	321	1
Florida	325	1
Florida	329	1
Florida	333	1

State	Zip	Area
Alabama	354	1
Alabama	358	1
Alabama	362	1
Alabama	366	1
Alaska	995	4
Alaska	999	4
Arizona	853	2
Arizona	859	2
Arizona	865	2
Arkansas	719	1
Arkansas	723	1
Arkansas	727	2
California	901	2
California	905	2
California	910	3
California	914	2
California	918	2
California	922	2
California	926	2
California	931	4
California	935	3
California	939	3
California	943	4
California	947	4
California	951	4
California	955	4
California	959	3
Colorado	801	2
Colorado	805	2
Colorado	809	2
Colorado	813	2
Connecticut	060	3
Connecticut	064	3
Connecticut	068	3
D.C.	203	2
Delaware	198	4
Florida	322	1
Florida	326	1
Florida	330	2
Florida	334	1

Florida	335	1
Florida	339	2
Florida	346	1
Georgia	301	2
Georgia	305	2
Georgia	309	1
Georgia	313	2
Georgia	317	2
Guam	969	4
Idaho	833	2
Idaho	837	2
Illiniois	602	2
Illiniois	606	2
Illiniois	610	1
Illiniois	614	1
Illiniois	618	1
Illiniois	623	2
Illiniois	627	1
Indiana	461	1
Indiana	465	1
Indiana	469	1
Indiana	473	1
Indiana	477	1
Iowa	501	1
Iowa	505	2
Iowa	509	1
Iowa	513	1
Iowa	520	1
Iowa	524	1
Iowa	528	1
Kansas	664	2
Kansas	668	1
Kansas	672	2
Kansas	676	1
Kentucky	400	1
Kentucky	404	1
Kentucky	408	1
Kentucky	412	1
Kentucky	416	1
Kentucky	421	1
Kentucky	425	1
Louisiana	701	1
Louisiana	706	1
Louisiana	711	1
Maine	039	4
Maine	043	4
Maine	047	3
Maryland	207	2
Maryland	211	2
Maryland	216	1
Massachusetts	010	2
Massachusetts	014	3
Massachusetts	018	3
Massachusetts	022	3
Massachusetts	026	2

Florida	336	1
Florida	341	2
Florida	347	1
Georgia	302	2
Georgia	306	2
Georgia	310	2
Georgia	314	2
Georgia	318	2
Hawaii	967	2
Idaho	834	2
Idaho	838	2
Illiniois	603	2
Illiniois	607	2
Illiniois	611	1
Illiniois	615	1
Illiniois	619	1
Illiniois	624	1
Illiniois	628	1
Indiana	462	1
Indiana	466	2
Indiana	470	2
Indiana	474	1
Indiana	478	1
Iowa	502	2
Iowa	506	1
Iowa	510	3
Iowa	514	1
Iowa	521	1
Iowa	525	1
Kansas	660	2
Kansas	665	2
Kansas	669	1
Kansas	673	1
Kansas	677	1
Kentucky	401	1
Kentucky	405	1
Kentucky	409	1
Kentucky	413	1
Kentucky	417	1
Kentucky	422	1
Kentucky	426	1
Louisiana	703	1
Louisiana	707	1
Louisiana	712	1
Maine	040	4
Maine	044	3
Maine	048	4
Maryland	208	2
Maryland	212	1
Maryland	217	1
Massachusetts	011	3
Massachusetts	015	3
Massachusetts	019	3
Massachusetts	023	3
Massachusetts	027	2

Florida	337	1
Florida	342	2
Florida	349	2
Georgia	303	2
Georgia	307	1
Georgia	311	2
Georgia	315	2
Georgia	319	2
Hawaii	968	2
Idaho	835	2
Illiniois	600	1
Illiniois	604	2
Illiniois	608	2
Illiniois	612	1
Illiniois	616	1
Illiniois	620	1
Illiniois	625	1
Illiniois	629	1
Indiana	463	1
Indiana	467	2
Indiana	471	1
Indiana	475	1
Indiana	479	2
Iowa	503	2
Iowa	507	1
Iowa	511	3
Iowa	515	1
Iowa	522	1
Iowa	526	1
Kansas	661	1
Kansas	666	2
Kansas	670	2
Kansas	674	1
Kansas	678	2
Kentucky	402	1
Kentucky	406	1
Kentucky	410	1
Kentucky	414	1
Kentucky	418	1
Kentucky	423	1
Kentucky	427	1
Louisiana	704	1
Louisiana	708	1
Louisiana	713	1
Maine	041	4
Maine	045	4
Maine	049	4
Maryland	209	2
Maryland	214	2
Maryland	218	1
Massachusetts	012	2
Massachusetts	016	3
Massachusetts	020	3
Massachusetts	024	3
Michigan	480	2

Florida	338	2
Florida	344	1
Georgia	300	2
Georgia	304	2
Georgia	308	1
Georgia	312	1
Georgia	316	2
Georgia	398	2
Idaho	832	2
Idaho	836	2
Illiniois	601	2
Illiniois	605	2
Illiniois	609	1
Illiniois	613	1
Illiniois	617	1
Illiniois	622	1
Illiniois	626	1
Indiana	460	1
Indiana	464	1
Indiana	468	2
Indiana	472	1
Indiana	476	1
Iowa	500	1
Iowa	504	2
Iowa	508	1
Iowa	512	1
Iowa	516	2
Iowa	523	1
Iowa	527	1
Kansas	662	2
Kansas	667	1
Kansas	671	1
Kansas	675	1
Kansas	679	1
Kentucky	403	1
Kentucky	407	1
Kentucky	411	1
Kentucky	415	2
Kentucky	420	2
Kentucky	424	1
Louisiana	700	1
Louisiana	705	1
Louisiana	710	1
Louisiana	714	1
Maine	042	4
Maine	046	3
Maryland	206	1
Maryland	210	2
Maryland	215	1
Maryland	219	2
Massachusetts	013	2
Massachusetts	017	3
Massachusetts	021	3
Massachusetts	025	3
Michigan	481	2

Michigan	482	2
Michigan	486	1
Michigan	490	2
Michigan	494	2
Michigan	498	3
Minnesota	553	3
Minnesota	557	2
Minnesota	561	1
Minnesota	565	2
Mississippi	387	1
Mississippi	391	2
Mississippi	395	1
Missouri	631	2
Missouri	635	1
Missouri	639	1
Missouri	645	1
Missouri	649	1
Missouri	653	1
Missouri	657	1
Montana	592	2
Montana	596	3
Nebraska	680	1
Nebraska	685	1
Nebraska	689	1
Nebraska	693	1
Nevada	893	3
Nevada	898	4
New Hampshire	033	4
New Hampshire	037	4
New Jersey	072	2
New Jersey	076	3
New Jersey	080	2
New Jersey	084	2
New Jersey	088	3
New Mexico	872	2
New Mexico	877	2
New Mexico	881	2
New York	100	3
New York	104	1
New York	108	3
New York	112	2
New York	116	2
New York	120	1
New York	124	1
New York	128	2
New York	132	2
New York	136	2
New York	140	1
New York	144	2
New York	148	1
North Carolina	272	3
North Carolina	276	3
North Carolina	280	3
North Carolina	284	3
North Carolina	288	3

Michigan	483	2
Michigan	487	1
Michigan	491	2
Michigan	495	2
Michigan	499	2
Minnesota	554	3
Minnesota	558	2
Minnesota	562	1
Minnesota	566	1
Mississippi	388	1
Mississippi	392	1
Mississippi	396	2
Missouri	632	1
Missouri	636	1
Missouri	640	1
Missouri	646	1
Missouri	650	1
Missouri	654	1
Missouri	658	2
Montana	593	2
Montana	597	3
Nebraska	681	1
Nebraska	686	1
Nebraska	690	1
Nevada	889	2
Nevada	894	4
New Hampshire	030	4
New Hampshire	034	4
New Hampshire	038	4
New Jersey	073	2
New Jersey	077	2
New Jersey	081	2
New Jersey	085	2
New Jersey	089	3
New Mexico	873	3
New Mexico	878	3
New Mexico	882	2
New York	101	3
New York	105	3
New York	109	2
New York	113	2
New York	117	2
New York	121	1
New York	125	1
New York	129	2
New York	133	2
New York	137	2
New York	141	1
New York	145	2
New York	149	1
North Carolina	273	3
North Carolina	277	3
North Carolina	281	3
North Carolina	285	2
North Carolina	289	3

Michigan	484	2
Michigan	488	2
Michigan	492	2
Michigan	496	2
Minnesota	550	3
Minnesota	555	2
Minnesota	559	2
Minnesota	563	2
Minnesota	567	1
Mississippi	389	1
Mississippi	393	1
Mississippi	397	2
Missouri	633	1
Missouri	637	1
Missouri	641	1
Missouri	647	1
Missouri	651	1
Missouri	655	1
Montana	590	2
Montana	594	2
Montana	598	3
Nebraska	683	1
Nebraska	687	1
Nebraska	691	1
Nevada	890	2
Nevada	895	4
New Hampshire	031	4
New Hampshire	035	4
New Jersey	070	2
New Jersey	074	3
New Jersey	078	3
New Jersey	082	2
New Jersey	086	2
New Mexico	870	3
New Mexico	874	3
New Mexico	879	2
New Mexico	883	2
New York	102	3
New York	106	3
New York	110	2
New York	114	2
New York	118	2
New York	122	1
New York	126	1
New York	130	2
New York	134	2
New York	138	2
New York	142	1
New York	146	2
North Carolina	270	2
North Carolina	274	3
North Carolina	278	3
North Carolina	282	3
North Carolina	286	2
North Dakota	580	3

Michigan	485	2
Michigan	489	2
Michigan	493	2
Michigan	497	2
Minnesota	551	3
Minnesota	556	2
Minnesota	560	2
Minnesota	564	2
Mississippi	386	1
Mississippi	390	1
Mississippi	394	1
Missouri	630	2
Missouri	634	2
Missouri	638	1
Missouri	644	1
Missouri	648	1
Missouri	652	2
Missouri	656	1
Montana	591	2
Montana	595	3
Montana	599	2
Nebraska	684	1
Nebraska	688	1
Nebraska	692	1
Nevada	891	2
Nevada	897	4
New Hampshire	032	4
New Hampshire	036	4
New Jersey	071	2
New Jersey	075	3
New Jersey	079	3
New Jersey	083	2
New Jersey	087	2
New Mexico	871	2
New Mexico	875	2
New Mexico	880	2
New Mexico	884	2
New York	103	2
New York	107	3
New York	111	2
New York	115	2
New York	119	2
New York	123	1
New York	127	2
New York	131	2
New York	135	2
New York	139	2
New York	143	1
New York	147	1
North Carolina	271	3
North Carolina	275	3
North Carolina	279	3
North Carolina	283	2
North Carolina	287	3
North Dakota	581	3

North Dakota	582	2
North Dakota	586	2
Ohio	431	1
Ohio	435	1
Ohio	439	1
Ohio	443	1
Ohio	447	1
Ohio	451	2
Ohio	455	1
Ohio	459	1
Oklahoma	734	1
Oklahoma	738	1
Oklahoma	743	1
Oklahoma	747	1
Oregon	971	3
Oregon	975	3
Oregon	979	3
Pennsylvania	153	1
Pennsylvania	157	1
Pennsylvania	161	1
Pennsylvania	165	1
Pennsylvania	169	2
Pennsylvania	173	1
Pennsylvania	177	2
Pennsylvania	181	2
Pennsylvania	185	1
Pennsylvania	189	2
Pennsylvania	193	2
Puerto Rico	006	1
Rhode Island	029	3
South Carolina	293	2
South Carolina	297	2
South Dakota	571	3
South Dakota	575	2
Tennessee	371	1
Tennessee	375	1
Tennessee	379	1
Tennessee	383	1
Texas	751	1
Texas	755	1
Texas	759	1
Texas	763	1
Texas	767	1
Texas	771	1
Texas	775	1
Texas	779	1
Texas	783	2
Texas	787	1
Texas	791	1
Texas	795	1
Texas	799	1
Utah	842	1
Utah	846	1
Vermont	052	3
Vermont	057	3

North Dakota	583	2
North Dakota	587	2
Ohio	432	1
Ohio	436	1
Ohio	440	1
Ohio	444	1
Ohio	448	1
Ohio	452	1
Ohio	456	1
Oklahoma	730	1
Oklahoma	735	2
Oklahoma	739	1
Oklahoma	744	1
Oklahoma	748	1
Oregon	972	3
Oregon	976	3
Pennsylvania	150	1
Pennsylvania	154	1
Pennsylvania	158	1
Pennsylvania	162	1
Pennsylvania	166	1
Pennsylvania	170	1
Pennsylvania	174	1
Pennsylvania	178	2
Pennsylvania	182	1
Pennsylvania	186	1
Pennsylvania	190	1
Pennsylvania	194	2
Puerto Rico	007	1
South Carolina	290	2
South Carolina	294	2
South Carolina	298	2
South Dakota	572	3
South Dakota	576	2
Tennessee	372	1
Tennessee	376	2
Tennessee	380	1
Tennessee	384	1
Texas	752	1
Texas	756	1
Texas	760	1
Texas	764	1
Texas	768	1
Texas	772	1
Texas	776	1
Texas	780	1
Texas	784	2
Texas	788	1
Texas	792	1
Texas	796	1
Texas	885	2
Utah	843	1
Utah	847	1
Vermont	053	3
Vermont	058	3

North Dakota	584	3
North Dakota	588	2
Ohio	433	1
Ohio	437	1
Ohio	441	1
Ohio	445	1
Ohio	449	1
Ohio	453	1
Ohio	457	2
Oklahoma	731	1
Oklahoma	736	1
Oklahoma	740	1
Oklahoma	745	1
Oklahoma	749	1
Oregon	973	3
Oregon	977	3
Pennsylvania	151	1
Pennsylvania	155	1
Pennsylvania	159	1
Pennsylvania	163	1
Pennsylvania	167	1
Pennsylvania	171	1
Pennsylvania	175	2
Pennsylvania	179	2
Pennsylvania	183	1
Pennsylvania	187	1
Pennsylvania	191	1
Pennsylvania	195	2
Puerto Rico	009	1
South Carolina	291	2
South Carolina	295	2
South Carolina	299	2
South Dakota	573	2
South Dakota	577	2
Tennessee	373	2
Tennessee	377	2
Tennessee	381	1
Tennessee	385	1
Texas	753	1
Texas	757	1
Texas	761	1
Texas	765	1
Texas	769	1
Texas	773	1
Texas	777	1
Texas	781	1
Texas	785	1
Texas	789	1
Texas	793	1
Texas	797	1
Utah	840	1
Utah	844	1
Vermont	050	4
Vermont	054	3
Vermont	059	3

North Dakota	585	2
Ohio	430	1
Ohio	434	1
Ohio	438	1
Ohio	442	1
Ohio	446	1
Ohio	450	1
Ohio	454	1
Ohio	458	2
Oklahoma	733	1
Oklahoma	737	1
Oklahoma	741	1
Oklahoma	746	1
Oregon	970	3
Oregon	974	3
Oregon	978	3
Pennsylvania	152	1
Pennsylvania	156	1
Pennsylvania	160	1
Pennsylvania	164	1
Pennsylvania	168	1
Pennsylvania	172	1
Pennsylvania	176	2
Pennsylvania	180	1
Pennsylvania	184	1
Pennsylvania	188	1
Pennsylvania	192	1
Pennsylvania	196	2
Rhode Island	028	3
South Carolina	292	2
South Carolina	296	2
South Dakota	570	2
South Dakota	574	2
Tennessee	370	1
Tennessee	374	1
Tennessee	378	1
Tennessee	382	1
Texas	750	1
Texas	754	2
Texas	758	1
Texas	762	1
Texas	766	1
Texas	770	1
Texas	774	1
Texas	778	1
Texas	782	1
Texas	786	1
Texas	790	1
Texas	794	1
Texas	798	1
Utah	841	1
Utah	845	1
Vermont	051	4
Vermont	056	3
Virgin Islands	008	2

Virginia	201	2
Virginia	223	2
Virginia	227	1
Virginia	231	1
Virginia	235	2
Virginia	239	1
Virginia	243	1
Washington	980	4
Washington	984	3
Washington	989	3
Washington	993	4
West Virginia	249	2
West Virginia	253	1
West Virginia	257	1
West Virginia	261	2
West Virginia	265	1
Wisconsin	530	2
Wisconsin	535	2
Wisconsin	540	1
Wisconsin	544	2
Wisconsin	548	1
Wyoming	822	1
Wyoming	826	2
Wyoming	830	1

Virginia	220	2
Virginia	224	1
Virginia	228	2
Virginia	232	1
Virginia	236	2
Virginia	240	2
Virginia	244	1
Washington	981	4
Washington	985	3
Washington	990	3
Washington	994	3
West Virginia	250	1
West Virginia	254	3
West Virginia	258	2
West Virginia	262	1
West Virginia	266	1
Wisconsin	531	2
Wisconsin	537	4
Wisconsin	541	2
Wisconsin	545	2
Wisconsin	549	2
Wyoming	823	1
Wyoming	827	1
Wyoming	831	1

Virginia	221	2
Virginia	225	1
Virginia	229	2
Virginia	233	1
Virginia	237	2
Virginia	241	1
Virginia	245	2
Washington	982	4
Washington	986	3
Washington	991	3
West Virginia	247	1
West Virginia	251	1
West Virginia	255	1
West Virginia	259	2
West Virginia	263	1
West Virginia	267	1
Wisconsin	532	2
Wisconsin	538	1
Wisconsin	542	2
Wisconsin	546	2
Wyoming	820	2
Wyoming	824	1
Wyoming	828	1

Virginia	222	2
Virginia	226	2
Virginia	230	1
Virginia	234	2
Virginia	238	1
Virginia	242	1
Virginia	246	1
Washington	983	3
Washington	988	3
Washington	992	3
West Virginia	248	1
West Virginia	252	1
West Virginia	256	1
West Virginia	260	1
West Virginia	264	1
West Virginia	268	1
Wisconsin	534	2
Wisconsin	539	1
Wisconsin	543	3
Wisconsin	547	2
Wyoming	821	1
Wyoming	825	2
Wyoming	829	2

Dental Services Covered Under $15 Copay Plan

Procedure	Description	Area 1	Area 2	Area 3	Area 4
D0120	PERIODIC ORAL EVALUATION	$0	$0	$0	$0
D0140	LIMITED ORAL EVALUATION	$5	$5	$5	$10
D0145	ORAL EVALUATION UNDER AGE OF 3	$5	$5	$5	$5
D0150	COMPREHENSIVE ORAL EVALUATION	$5	$5	$5	$10
D0160	EXTENSIVE ORAL EVALUATION	$10	$10	$10	$15
D0170	LIMITED ORAL RE-EVALUATION	$5	$5	$5	$10
D0180	COMPREHENSIVE PERIO EVALUATION	$5	$5	$10	$10
D0190	SCREENING OF A PATIENT	$0	$0	$0	$0
D0191	ASSESSMENT OF A PATIENT	$0	$0	$0	$0
D0210	COMPLETE SET RADIOGRAPHIC IMAGES	$10	$10	$15	$15
D0220	PERIAPICAL RADIOGRAPHIC IMAGE	$5	$10	$10	$10
D0230	ADD'L PERIAPICAL IMAGES	$5	$5	$5	$5
D0240	OCCLUSAL RADIOGRAPHIC IMAGE	$15	$15	$15	$20
D0250	EXTRAORAL 2D RADIOGRAPHIC IMAGE	$25	$25	$30	$30
D0251	EXTRAORAL POSTERIOR IMAGE	$25	$25	$30	$30
D0270	BITEWING - SINGLE IMAGE	$0	$0	$5	$5
D0272	BITEWINGS - TWO IMAGES	$5	$5	$5	$5
D0273	BITEWINGS - THREE IMAGES	$5	$5	$5	$5
D0274	BITEWINGS - FOUR IMAGES	$5	$5	$5	$5
D0277	VERTICAL BITEWINGS 7-8 IMAGES	$5	$5	$5	$10
D0290	SKULL/FACIAL BONE IMAGE	$30	$35	$40	$40
D0330	PANORAMIC RADIOGRAPHIC IMAGE	$10	$10	$10	$15
D0340	2D CEPHALOMETRIC IMAGE	$35	$40	$45	$45
D0364	CONE BEAM LESS THAN WHOLE JAW	$225	$260	$295	$320
D0365	CONE BEAM FULL ARCH MANDIBLE	$225	$260	$295	$320
D0366	CONE BEAM FULL ARCH MAXILLA	$225	$260	$295	$320
D0367	CONE BEAM BOTH JAWS	$225	$260	$295	$320
D0368	CONE BEAM - TMJ	$225	$260	$295	$320
D0380	CONE BEAM CAPT LESS THAN ONE JAW	$225	$260	$295	$320
D0381	CONE BEAM CAPTURE - MANDIBLE	$225	$260	$295	$320
D0382	CONE BEAM CAPTURE - MAXILLA	$225	$260	$295	$320
D0383	CONE BEAM CAPTURE - BOTH JAWS	$225	$260	$295	$320
D0384	CONE BEAM CAPTURE - TMJ SERIES	$225	$260	$295	$320
D0391	INTERPRETATION-DIAGNOSTIC IMAGE	$15	$15	$15	$20
D0415	LAB TEST	$20	$20	$25	$35
D0417	SALIVA SAMPLE COLLECTION	$15	$15	$20	$25
D0460	PULP VITALITY TEST	$15	$15	$20	$20
D0470	DIAGNOSTIC CASTS	$30	$35	$40	$45
D1110	CLEANING - ADULT	$15	$15	$15	$15
D1120	CLEANING - CHILD	$15	$15	$15	$15
D1206	TOPICAL FLUORIDE-VARNISH	$5	$5	$5	$10
D1208	TOPICAL APPLICATION-FLUORIDE	$5	$5	$5	$5
D1351	SEALANT - PER TOOTH	$15	$15	$15	$20
D1352	PREVENTIVE RESIN RESTORATION	$15	$15	$20	$20
D1353	SEALANT REPAIR-PER TOOTH	$0	$0	$0	$0
D1354	INTERIM CARIES MEDICAMENT	$5	$10	$10	$10
D1510	SPACE MAINTAINER FIXED-UNILATER	$115	$135	$150	$160
D1515	SPACE MAINTAINER FIXED-BILATERAL	$160	$185	$205	$225
D1520	SPACE MAINTAINER REM-UNILATERAL	$115	$135	$150	$160
D1525	SPACE MAINTAINER REM-BILATERAL	$205	$235	$265	$280
D1550	RECEMENT SPACE MAINTAINER	$15	$20	$25	$25
D1575	DISTAL SPACE MAINTAINER FIXED	$115	$135	$150	$160
D2140	ONE SURFACE AMALGAM	$35	$40	$45	$55
D2150	TWO SURFACE AMALGAM	$40	$50	$55	$65
D2160	THREE SURFACE AMALGAM	$55	$60	$70	$85

Dental Services Covered Under $15 Copay Plan

Procedure	Description	Area 1	Area 2	Area 3	Area 4
D2161	FOUR OR MORE SURFACE AMALGAM	$60	$70	$80	$100
D2330	ONE SURFACE COMPOSITE ANTERIOR	$40	$45	$50	$60
D2331	TWO SURFACE COMPOSITE ANTERIOR	$50	$55	$65	$75
D2332	THREE SURFACE COMPOSITE ANTERIOR	$60	$70	$75	$95
D2335	4 OR MORE SURF COMPOSITE ANT	$70	$80	$90	$110
D2390	RESIN CROWN	$105	$125	$140	$175
D2391	ONE SURFACE COMPOSITE POSTERIOR	$40	$45	$55	$65
D2392	TWO SURFACE COMPOSITE POSTERIOR	$55	$65	$70	$85
D2393	3 SURFACE COMPOSITE POSTERIOR	$65	$75	$90	$105
D2394	4 OR MORE SURF COMPOSITE POST	$70	$85	$95	$120
D2410	1 SURFACE GOLD FOIL	$130	$150	$165	$180
D2420	2 SURFACE GOLD FOIL	$185	$210	$235	$255
D2430	3 SURFACE GOLD FOIL	$220	$250	$285	$300
D2510	ONE SURFACE METALLIC INLAY	$270	$305	$345	$400
D2520	TWO SURFACE METALLIC INLAY	$335	$380	$425	$485
D2530	THREE SURFACE METALLIC INLAY	$360	$405	$455	$510
D2542	TWO SURFACE METALLIC ONLAY	$410	$465	$530	$590
D2543	THREE SURFACE METALLIC ONLAY	$420	$480	$545	$600
D2544	4 OR MORE SURF. METALLIC ONLAY	$435	$500	$565	$640
D2610	ONE SURFACE PORCELAIN INLAY	$320	$360	$405	$470
D2620	2 SURFACE PORCELAIN INLAY	$355	$400	$455	$505
D2630	3 OR MORE SURF. PORCELAIN INLAY	$410	$465	$530	$575
D2642	2 SURFACES - PORCELAIN ONLAY	$475	$545	$615	$675
D2643	3 SURFACES - PORCELAIN ONLAY	$490	$560	$635	$690
D2644	4 OR MORE SURF. PORCELAIN ONLAY	$500	$570	$645	$700
D2650	1 SURFACE COMPOSITE/RESIN INLAY	$245	$275	$310	$320
D2651	2 SURFACE COMPOSITE/RESIN INLAY	$285	$320	$365	$410
D2652	3 OR MORE SURF COMP/RESIN INLAY	$315	$360	$405	$430
D2662	2 SURFACE COMPOSITE/RESIN ONLAY	$390	$445	$505	$565
D2663	3 SURFACE COMPOSITE/RESIN ONLAY	$395	$445	$505	$555
D2664	4 OR MORE SURF COMP/RESIN ONLAY	$405	$460	$515	$575
D2710	RESIN CROWN (INDIRECT)	$180	$210	$230	$255
D2712	CROWN 3/4 RESIN BASED INDIRECT	$175	$195	$220	$245
D2720	CROWN RESIN W/HIGH NOBLE METAL	$445	$505	$575	$640
D2721	CROWN RESIN W/BASE METAL	$350	$395	$445	$475
D2722	CROWN RESIN W/NOBLE METAL	$390	$440	$500	$545
D2740	CROWN PORCELAIN/CERAMIC	$470	$540	$610	$680
D2750	CROWN PORCELAIN-HIGH NOBLE METAL	$465	$535	$605	$670
D2751	CROWN PORCELAIN-BASE METAL	$425	$485	$550	$595
D2752	CROWN PORCELAIN-NOBLE METAL	$445	$505	$575	$625
D2780	CROWN 3/4 HIGH NOBLE	$460	$525	$595	$655
D2781	CROWN 3/4 BASE METAL	$425	$480	$540	$610
D2782	CROWN 3/4 CAST NOBLE METAL	$425	$485	$550	$595
D2783	CROWN 3/4 PORCELAIN/CERAMIC	$470	$540	$610	$665
D2790	CROWN HIGH NOBLE	$430	$495	$565	$640
D2791	CROWN FULL CAST/BASE METAL	$385	$440	$505	$560
D2792	CROWN FULL CAST NOBLE METAL	$395	$455	$515	$590
D2794	TITANIUM CROWN	$420	$480	$540	$590
D2910	RECEMENT INLAY, ONLAY	$30	$35	$40	$50
D2915	RECEMENT CAST - POST CORE	$30	$35	$40	$50
D2920	RECEMENT CROWN	$30	$35	$40	$55
D2929	PREFAB POR/CER CROWN-PRIMARY	$75	$85	$95	$110
D2930	STAINLESS STEEL CROWN - CHILD	$90	$100	$115	$140
D2931	STAINLESS STEEL CROWN - ADULT	$95	$110	$120	$160
D2932	RESIN CROWN	$100	$115	$130	$150

Dental Services Covered Under $15 Copay Plan

Procedure	Description	Area 1	Area 2	Area 3	Area 4
D2933	STAINLESS STEEL CROWN/RESIN	$125	$140	$165	$180
D2934	SS CROWN PRIMARY TOOTH	$95	$105	$120	$140
D2940	SEDATIVE FILLING	$20	$25	$25	$40
D2950	CORE BUILDUP	$80	$90	$100	$135
D2951	PIN RETENTION PER TOOTH	$15	$15	$20	$20
D2952	POST AND CORE	$165	$185	$210	$225
D2953	CAST POST - EACH ADDL SAME TOOTH	$20	$20	$25	$30
D2954	PREFAB POST AND CORE	$115	$130	$145	$170
D2957	STEEL POST - EACH ADDL SAME TH	$10	$15	$15	$30
D2960	RESIN LABIAL VENEER-CHAIRSIDE	$195	$220	$245	$295
D2961	RESIN LABIAL VENEER-LABORATORY	$310	$345	$390	$435
D2962	PORCELAIN LABIAL VENEER	$395	$450	$500	$590
D2971	ADDLT CROWN PROCEDURE	$75	$85	$100	$110
D2980	CROWN REPAIR	$80	$90	$100	$125
D2981	INLAY REPAIR	$80	$90	$100	$125
D2982	ONLAY REPAIR	$80	$90	$100	$125
D2983	VENEER REPAIR	$80	$90	$100	$125
D2990	RESIN INFILTRATION/SMOOTH SURF	$15	$15	$20	$20
D3110	PULP CAP-DIRECT	$20	$20	$25	$30
D3120	PULP CAP-INDIRECT	$15	$20	$25	$25
D3220	THERAPEUTIC PULPOTOMY	$40	$45	$50	$60
D3221	PULPAL DEBRIDEMENT	$25	$25	$30	$60
D3222	PARTIAL PULPOTOMY - APEXOGENESIS	$40	$45	$50	$60
D3230	PULPAL THERAPY ANT/PRIMARY TOOTH	$115	$130	$150	$155
D3240	PULPAL THERAPY POST/PRIMARY TH	$140	$160	$180	$185
D3310	ENDODONTIC THERAPY - ANTERIOR	$285	$320	$365	$420
D3320	ENDODONTIC THERAPY BICUSPID	$335	$380	$435	$495
D3330	ENDODONTIC THERAPY MOLAR	$450	$510	$580	$625
D3331	TREATMENT OF ROOT CANAL OBSTRUCT	$90	$100	$110	$120
D3332	INCOMPLETE ROOT CANAL THERAPY	$130	$150	$165	$205
D3333	ROOT PERFORATION REPAIR	$75	$85	$95	$110
D3346	ROOT CANAL RETREAT/ANTERIOR	$350	$395	$450	$510
D3347	ROOT CANAL RETREAT/BICUSPID	$395	$450	$510	$585
D3348	ROOT CANAL RETREATMENT - MOLAR	$515	$580	$665	$725
D3351	APEXIFICATION - INITIAL VISIT	$120	$135	$155	$175
D3352	APEXIFICATION/RECALCIFICATION	$70	$75	$85	$95
D3353	APEXIFICATION - FINAL VISIT	$175	$200	$225	$275
D3355	PULPAL REGENERATION - INITIAL VISIT	$70	$75	$85	$95
D3356	PULPAL REGENERATION - INTERIM MEDICATION REPLACEMENT	$35	$40	$45	$50
D3357	PULPAL REGENERATION - COMPLETION OF TREATMENT	$70	$75	$85	$95
D3410	APICOECTOMY - ANTERIOR	$265	$295	$335	$395
D3421	APICOECTOMY - BICUSPID	$300	$335	$380	$440
D3425	APICOECTOMY - MOLAR	$335	$375	$430	$485
D3426	APICOECTOMY - ADDITIONAL ROOT	$130	$145	$160	$190
D3427	PERIRADICULAR SURGERY WITHOUT APIOECTOMY	$250	$280	$320	$365
D3428	BONE GRAFT IN CONJUNCTION WITH PERIRADICULAR SURGERY	$185	$200	$225	$255
D3429	BONE GRAFT IN CONJUNCTION WITH PERIRADICULAR SURGERY	$115	$135	$150	$135
D3430	RETROGRADE FILLING - PER ROOT	$85	$90	$105	$130
D3431	BIOLOGIC MATERIALS TO AID IN SOFT AND OSSEOUS TISSUE REGENERATION	$115	$130	$145	$190
D3432	GUIDED TISSUE REGENERATION, RESORBABLE BARRIER	$170	$195	$220	$280
D3450	ROOT AMPUTATION - PER ROOT	$190	$215	$245	$270
D3920	HEMISECTION	$160	$180	$205	$220
D4210	GINGIVECTOMY/PLASTY FULL QUAD	$215	$245	$280	$305
D4211	GINGIVECTOMY/PLASTY - 1-3 TEETH	$115	$135	$150	$170
D4212	GINGIVECTOMY/PLASTY W/REST-TOOTH	$35	$40	$45	$50

Dental Services Covered Under $15 Copay Plan

Procedure	Description	Area 1	Area 2	Area 3	Area 4
D4240	GINGIVAL FLAP PROC FULL QUAD	$235	$265	$300	$335
D4241	GINGIVAL FLAP 1 - 3 TEETH	$150	$165	$190	$210
D4245	APICALLY POSITIONED FLAP	$130	$140	$160	$180
D4249	CROWN LENGTHENING	$345	$390	$450	$465
D4260	OSSEOUS SURGERY - 4 OR MORE TH	$480	$540	$620	$675
D4261	OSSEOUS SURGERY 1 - 3 TEETH	$300	$345	$395	$445
D4263	BONE GRAFT - FIRST SITE	$185	$205	$225	$255
D4264	BONE GRAFT - ADDITIONAL SITE	$115	$135	$150	$135
D4265	BIOLOGIC MATERIALS	$115	$130	$150	$190
D4266	GTR - RESORBABLE BARRIER	$175	$200	$225	$280
D4267	GTR - NONRESORBABLE BARRIER	$215	$245	$275	$325
D4268	SURGICAL REVISION PROCEDURE	$60	$65	$75	$100
D4270	PEDICLE SOFT TISSUE GRAFT	$270	$300	$335	$415
D4273	AUTOGENOUS TISSUE GRAFT	$420	$480	$545	$620
D4274	DISTAL/PROXIML WEDGE	$155	$170	$190	$240
D4275	NON AUTOGENOUS TISSUE GRAFT	$400	$455	$515	$565
D4276	COMBINED TISSUE GRAFTING/TOOTH	$430	$490	$550	$630
D4277	FREE SOFT TISSUE GRAFT 1ST TOOTH	$345	$390	$445	$505
D4278	FREE SOFT TISSUE GRAFT-ADDL TOOTH	$175	$200	$225	$255
D4283	SUBEPITHELIAL TISSUE GRAFT/ADD'L	$210	$240	$275	$310
D4285	SOFT TISSUE ALLOGRAFT ADDITIONAL	$200	$230	$260	$285
D4341	SCALING/ROOT PLANING - PER QUAD.	$85	$100	$110	$130
D4342	SCALING & ROOT PLANING 1-3 TEETH	$55	$65	$70	$85
D4346	SCALING GINGIVAL INFLAMMATION	$15	$15	$15	$15
D4355	FULL MOUTH DEBRIDEMENT	$45	$50	$55	$75
D4381	DELIVERY OF ANTIMICROBIAL AGENTS	$40	$45	$50	$60
D4910	PERIODONTAL MAINTENANCE	$35	$40	$50	$55
D4920	DRESSING CHANGE	$25	$25	$30	$35
D5110	COMPLETE UPPER DENTURE	$575	$650	$740	$825
D5120	COMPLETE LOWER DENTURE	$575	$650	$740	$825
D5130	IMMEDIATE DENTURE MAXILLARY	$615	$700	$795	$925
D5140	IMMEDIATE DENTURE MANDIBULAR	$615	$700	$795	$925
D5211	UPPER PARTIAL DENTURE - RESIN	$425	$485	$550	$615
D5212	LOWER PARTIAL DENTURE - RESIN	$425	$485	$550	$615
D5213	UPPER PARTIAL DENTURE - CAST	$700	$780	$885	$950
D5214	LOWER PARTIAL DENTURE - CAST	$700	$780	$885	$950
D5221	IMMEDIATE MAX PARTIAL RESIN	$425	$485	$550	$615
D5222	IMMEDIATE MAND PARTIAL RESIN	$425	$485	$550	$615
D5223	IMMEDIATE MAX PARTIAL METAL	$700	$780	$885	$950
D5224	IMMEDIATE MAND PARTIAL METAL	$700	$780	$885	$950
D5225	UPPER PARTIAL DENTURE - FLEXIBLE	$510	$580	$655	$725
D5226	LOWER PARTIAL DENTURE - FLEXIBLE	$510	$580	$655	$725
D5281	UNILATERAL PARTIAL DENTURE	$265	$295	$340	$435
D5410	ADJUST UPPER COMPLETE DENTURE	$25	$30	$35	$40
D5411	ADJUST LOWER COMPLETE DENTURE	$25	$30	$35	$40
D5421	ADJUST UPPER PARTIAL DENTURE	$25	$30	$35	$45
D5422	ADJUST LOWER PARTIAL DENTURE	$25	$30	$35	$45
D5511	REPAIR DENTURE BASE MANDIBULAR	$80	$85	$85	$105
D5512	REPAIR DENTURE BASE MAXILLARY	$80	$85	$85	$105
D5520	REPLACE TH ON DENTURE-PER TH	$70	$80	$90	$100
D5611	REPAIR RESIN PARTIAL MANDIBULAR	$60	$65	$65	$80
D5612	REPAIR RESIN PARTIAL MAXILLARY	$60	$65	$65	$80
D5621	REPAIR CAST PARTIAL MANDIBULAR	$75	$75	$75	$95
D5622	REPAIR CAST PARTIAL MAXILLARY	$75	$75	$75	$95
D5630	REPAIR/REPLACE BROKEN CLASP	$70	$75	$85	$105

Dental Services Covered Under $15 Copay Plan

Procedure	Description	Area 1	Area 2	Area 3	Area 4
D5640	REPLACE TOOTH ON DENTURE	$70	$80	$90	$100
D5650	ADD TOOTH TO DENTURE	$75	$85	$95	$110
D5660	ADD CLASP PARTIAL DENTURE	$95	$110	$125	$135
D5670	REPLACE MAX TEETH & FRAMEWORK	$185	$210	$240	$265
D5671	REPLACE MAND. TEETH & FRAMEWORK	$190	$215	$245	$270
D5710	REBASE COMPLETE UPPER DENTURE	$210	$240	$275	$310
D5711	REBASE COMPLETE LOWER DENTURE	$205	$235	$265	$295
D5720	REBASE UPPER PARTIAL DENTURE	$185	$210	$245	$270
D5721	REBASE LOWER PARTIAL DENTURE	$185	$215	$245	$270
D5730	RELINE UPPER DENTURE - CHAIRSIDE	$120	$135	$155	$175
D5731	RELINE LOWER DENTURE - CHAIRSIDE	$120	$135	$155	$175
D5740	RELINE UPPER DENTURE - CHAIRSIDE	$100	$110	$125	$160
D5741	RELINE LOWER DENTURE - CHAIRSIDE	$100	$110	$125	$160
D5750	RELINE UPPER DENTURE - LAB	$180	$200	$230	$250
D5751	RELINE LOWER DENTURE - LAB	$180	$200	$230	$250
D5760	RELINE UPPER DENTURE - LAB	$155	$175	$205	$225
D5761	RELINE LOWER DENTURE - LAB	$155	$175	$200	$230
D5850	TISSUE CONDITIONING - UPPER	$55	$65	$75	$85
D5851	TISSUE CONDITIONING - LOWER	$55	$65	$75	$85
D5863	OVERDENTURE - COMPLETE MAXILLARY	$755	$845	$955	$1,040
D5864	OVERDENTURE - PARTIAL MAXILLARY	$680	$770	$875	$965
D5865	OVERDENTURE - COMPLETE MANDIBULAR	$755	$845	$960	$1,045
D5866	OVERDENTURE - PARTIAL MANDIBULAR	$680	$770	$875	$965
D6010	ENDOSTEAL IMPLANT	$890	$1,010	$1,160	$1,215
D6012	PLACEMENT OF INTERIM IMPLANT	$865	$980	$1,125	$1,180
D6013	SURGICAL PLACEMENT OF MINI IMPLANT	$880	$1,000	$1,145	$1,200
D6040	EPOSTEAL IMPLANT	$1,635	$1,855	$2,110	$2,290
D6050	TRANSOSTEAL IMPLANT	$1,995	$2,265	$2,575	$2,750
D6051	INTERIM ABUTMENT	$150	$170	$195	$185
D6052	SEMI-PRECISION ATTACHMENT ABUTMENT	$400	$450	$510	$495
D6055	IMPLANT CONNECTING BAR	$390	$440	$505	$560
D6056	PREFAB IMPLANT ABUTMENT	$305	$345	$390	$375
D6057	CUSTOM IMPLANT ABUTMENT	$400	$450	$510	$495
D6058	IMPLANT CROWN - PORCELAIN	$585	$665	$755	$780
D6059	IMPLANT CROWN- PORCEL-HIGH NOBLE	$555	$630	$715	$765
D6060	IMPLANT CROWN- PORCEL BASE METAL	$500	$570	$650	$680
D6061	IMPLANT CROWN-PORCEL NOBLE METAL	$535	$605	$695	$705
D6062	IMPLANT CROWN - CAST HIGH NOBLE	$535	$605	$690	$750
D6063	IMPLANT CROWN - CAST BASE METAL	$465	$525	$595	$615
D6064	IMPLANT CROWN - CAST NOBLE METAL	$495	$565	$640	$665
D6065	IMPLANT CROWN - PORCELAIN	$570	$650	$740	$810
D6066	IMPLANT CROWN - PORCELAIN-METAL	$555	$630	$720	$780
D6067	IMPLANT CROWN - METAL	$540	$610	$695	$750
D6068	IMPLANT RETAINER - PORCELAIN	$570	$645	$730	$735
D6069	IMPLANT RETAINER - PORCEL-METAL	$545	$620	$705	$725
D6070	IMPLANT RETAINER - BASE METAL	$500	$565	$640	$645
D6071	IMPLANT RETAINER - NOBLE METAL	$530	$600	$680	$680
D6072	IMPLANT RETAINER - HIGH NOBLE	$520	$590	$670	$685
D6073	IMPLANT RETAINER - BASE METAL	$430	$485	$555	$575
D6074	IMPLANT RETAINER - NOBLE METAL	$475	$535	$610	$640
D6075	IMPLANT RETAINER - CERAMIC	$545	$615	$700	$700
D6076	IMPLANT RETAINER - HIGH NOBLE	$540	$615	$700	$745
D6077	IMPLANT RETAINER-CAST-HIGH NOBLE	$505	$575	$655	$685
D6080	IMPLANT MAINTENANCE PROCEDURES	$45	$50	$55	$70
D6081	SCALING AND DEBRIDEMENT IMPLANT	$20	$25	$30	$30

Dental Services Covered Under $15 Copay Plan

Procedure	Description	Area 1	Area 2	Area 3	Area 4
D6090	REPAIR IMPLANT PROSTHESIS	$105	$120	$135	$150
D6091	PRECISION ATTACHMENT REPLACEMENT	$180	$205	$230	$260
D6092	RECEMENT IMPLANT CROWN	$30	$35	$40	$55
D6093	RECEMENT IMPLANT FIXED DENTURE	$50	$55	$65	$80
D6094	IMPLANT CROWN - TITANIUM	$505	$570	$650	$660
D6095	REPAIR IMPLANT ABUTMENT,REPORT	$120	$135	$155	$170
D6096	REMOVE BROKEN IMPLANT SCREW	$15	$15	$15	$20
D6100	IMPLANT REMOVAL, BY REPORT	$150	$170	$190	$290
D6101	DEBRIDEMENT PERIIMPLANT DEFECT	$45	$50	$55	$65
D6102	DEBRIDE/OSS PERIIMPLANT DEFECT	$90	$105	$120	$125
D6103	BONE GRAFT/PERIIMPLANT DEFECT	$195	$230	$255	$330
D6104	BONE GRAFT IMPLANT PLACEMENT	$195	$230	$255	$335
D6110	IMPLANT OVERDENTURE-MAXILLARY	$1,145	$1,320	$1,475	$1,720
D6111	IMPLANT OVERDENTURE-MANDIBULAR	$1,145	$1,320	$1,475	$1,720
D6112	IMPLANT OVERDENTURE PARTIAL-MAX	$1,030	$1,200	$1,355	$1,555
D6113	IMPLANT OVERDENTURE PARTIAL-MAND	$1,030	$1,200	$1,355	$1,555
D6114	IMPLANT SUPP FIXED DENTURE MAX	$1,865	$2,110	$2,380	$2,320
D6115	IMPLANT SUPP FIXED DENTUREMAND	$1,865	$2,110	$2,380	$2,320
D6116	IMPLANT SUPP FIXED PARTIAL MAX	$1,930	$2,165	$2,475	$2,480
D6117	IMPLANT SUPP FIXED PARTIAL MAND	$1,930	$2,165	$2,475	$2,480
D6190	IMPLANT INDEX	$105	$120	$135	$145
D6194	IMPLANT RETAINER - TITANIUM	$485	$550	$625	$635
D6205	PONTIC - INDIRECT COMPOSITE	$325	$365	$415	$455
D6210	PONTIC - CAST HIGH NOBLE	$420	$480	$550	$615
D6211	PONTIC - CAST BASE METAL	$380	$430	$490	$550
D6212	PONTIC - CAST NOBLE METAL	$395	$450	$510	$575
D6214	PONTIC - TITANIUM	$400	$450	$515	$570
D6240	PONTIC - PORCELAIN - HIGH NOBLE	$440	$505	$575	$630
D6241	PONTIC - PORCELAIN - BASE METAL	$410	$470	$535	$565
D6242	PONTIC - PORCELAIN NOBLE METAL	$430	$490	$555	$600
D6245	PONTIC - PORCELAIN	$465	$525	$600	$665
D6250	PONTIC-RESIN W/HIGH NOBLE METAL	$445	$505	$575	$630
D6251	PONTIC - RESIN W/BASE METAL	$340	$380	$430	$475
D6252	PONTIC - RESIN W/NOBLE METAL	$365	$415	$470	$520
D6545	CAST METAL RETAINER	$180	$205	$240	$265
D6548	RETAINER - PORCELAIN/CERAMIC	$205	$230	$270	$395
D6549	RESIN RETAINER-FIXED PROSTHESIS	$155	$175	$200	$295
D6600	RETAINER INLAY CERAMIC 2 SURFACE	$420	$475	$540	$575
D6601	RETAINER INLAY CERAMIC 3 OR MORE	$430	$485	$555	$595
D6602	RETAINER INLAY HIGH NOBLE 2 SURF	$310	$350	$400	$440
D6603	RETAINER INLAY HIGH NOBLE 3-MORE	$340	$385	$435	$485
D6604	RETAINER INLAY METAL 2 SURF	$300	$340	$390	$415
D6605	RETAINER INLAY METAL 3-MORE	$320	$360	$410	$445
D6606	RETAINER INLAY CAST METAL 2 SURF	$300	$340	$390	$425
D6607	RETAINER INLAY CAST METAL 3-MORE	$335	$380	$435	$465
D6608	RETAINER ONLAY CERAMIC 2 SURF	$425	$485	$550	$590
D6609	RETAINER ONLAY CERAMIC 3 OR MORE	$440	$500	$570	$605
D6610	RETAINER ONLAY HIGH NOBLE 2 SURF	$360	$400	$455	$485
D6611	RETAINER ONLAY HIGH NOBLE 3 OR MORE	$405	$455	$520	$565
D6612	RETAINER ONLAY BASE METAL 2 SURF	$345	$385	$435	$460
D6613	RETAINER ONLAY BASE METAL 3 OR MORE	$390	$445	$505	$550
D6614	RETAINER ONLAY CAST NOBLE 2 SURF	$350	$390	$440	$470
D6615	RETAINER ONLAY CAST NOBLE 3 OR MORE	$400	$450	$510	$550
D6624	RETAINER INLAY - TITANIUM	$290	$330	$375	$405
D6634	RETAINER ONLAY - TITANIUM	$345	$385	$440	$460

Dental Services Covered Under $15 Copay Plan

Procedure	Description	Area 1	Area 2	Area 3	Area 4
D6710	RETAINER CROWN INDIRECT RESIN	$330	$370	$420	$440
D6720	RETAINER CROWN-RESIN HIGH NOBLE	$445	$505	$575	$630
D6721	RETAINER CROWN-RESIN BASE METAL	$355	$400	$450	$475
D6722	RETAINER CROWN-RESIN NOBLE METAL	$380	$430	$490	$535
D6740	RETAINER CROWN-PORCELAIN/CERAMIC	$480	$550	$625	$695
D6750	RETAINER CROWN-PORC-HIGH NOBLE	$465	$535	$605	$670
D6751	RETAINER CROWN-PORC-BASE METAL	$425	$485	$550	$600
D6752	RETAINER CROWN-PORC-NOBLE METAL	$440	$505	$570	$625
D6780	RETAINER CROWN 3/4 CAST HIGH NOBLE	$440	$505	$570	$635
D6781	RETAINER CROWN 3/4 BASE METAL	$390	$440	$500	$545
D6782	RETAINER CROWN-3/4 NOBLE METAL	$405	$465	$525	$580
D6783	RETAINER CROWN-3/4 PORCELAIN	$465	$525	$600	$645
D6790	RETAINER CROWN FULL CAST HIGH	$430	$495	$560	$625
D6791	RETAINER CROWN-FULL CAST BASE	$380	$435	$495	$555
D6792	RETAINER CROWN-FULL CAST NOBLE	$400	$460	$520	$595
D6794	RETAINER CROWN - TITANIUM	$410	$470	$535	$585
D6920	CONNECTOR BAR	$290	$330	$375	$400
D6930	RECEMENT BRIDGE	$50	$55	$65	$80
D6980	BRIDGE REPAIR, BY REPORT	$75	$85	$95	$120
D7111	EXTRACT CORONAL REMNANTS	$45	$50	$60	$70
D7140	EXTRACT ERUPT TOOTH/EXPOSED ROOT	$50	$60	$65	$85
D7210	EXTRACT ERUPTED TOOTH - SURGICAL	$90	$105	$120	$145
D7220	EXTRACT IMPACTED TOOTH SOFT TISS	$115	$135	$150	$175
D7230	EXTRACT IMPACTED TOOTH PART BONY	$145	$165	$190	$215
D7240	EXTRACT IMPACTED TOOTH COMP BONY	$185	$210	$240	$260
D7241	EXT IMPACTED TOOTH BONY W/COMPL	$210	$235	$275	$290
D7250	REMOVE RESIDUAL ROOT	$95	$110	$125	$155
D7251	CORONECTOMY	$185	$210	$240	$260
D7260	OROANTRAL FISTULA SURGERY	$310	$355	$400	$430
D7261	PRIM. SINUS PERFORATION CLOSURE	$330	$370	$420	$445
D7270	TOOTH REPLANTATION	$165	$190	$215	$265
D7272	TOOTH TRANSPLANTATION	$160	$185	$210	$230
D7280	UNERUPTED TOOTH ACCESS	$185	$210	$240	$285
D7282	MOBILIZE TO AID ERUPTION	$165	$185	$210	$240
D7287	CYTOLOGY SAMPLE	$35	$40	$45	$65
D7288	BRUSH BIOPSY	$35	$40	$45	$70
D7290	REPOSITION TEETH - SURGICAL	$175	$200	$225	$255
D7310	ALVEOPLASTY - WITH EXTRACTIONS	$85	$100	$110	$130
D7311	ALVEOPLASTY W/EXTRACTIONS 1-3	$50	$60	$70	$75
D7320	ALVEOPLASTY W/O EXTRACTION	$135	$150	$170	$215
D7321	ALVEOPLASTY W/O EXTRACTION	$80	$90	$105	$130
D7340	VESTIBULOPLASTY	$435	$490	$555	$590
D7350	VESTIBULOPLASTY	$1,150	$1,300	$1,480	$1,590
D7450	REMOVE ODONTOGENIC CYST/TUMOR	$165	$185	$215	$255
D7451	REMOVE ODONTOGENIC CYST/TUMOR	$395	$445	$500	$510
D7471	REMOVAL OF EXOSTOSIS	$240	$270	$315	$330
D7472	REMOVE TORUS PALATINUS	$240	$270	$310	$325
D7473	REMOVE TORUS MANDIBULARIS	$245	$280	$320	$335
D7485	REDUCE OSSEOUS TUBEROSITY	$130	$150	$170	$210
D7510	ABSCESS - INTRAORAL INCISION	$70	$75	$85	$110
D7511	ABSCESS - INTRAORAL INCISION	$70	$75	$85	$100
D7520	ABSCESS - EXTRAORAL INCISION	$110	$125	$145	$175
D7521	ABSCESS - EXTRAORAL INCISION	$105	$120	$135	$165
D7921	COLLECT - APPLY AUTOLOGOUS PRODUCT	$115	$130	$145	$190
D7950	BONE GRAFTS- MANDIBLE OR MAXILLA	$840	$840	$840	$850

Dental Services Covered Under $15 Copay Plan

Procedure	Description	Area 1	Area 2	Area 3	Area 4
D7951	SINUS AUGMENTATION-LATERAL	$1,190	$1,190	$1,190	$1,195
D7952	SINUS AUGMENTATION - VERTICAL	$1,190	$1,190	$1,190	$1,195
D7953	BONE GRAFT	$195	$230	$255	$330
D7960	FRENULECTOMY - SEPARATE	$135	$150	$175	$220
D7963	FRENULOPLASTY	$130	$145	$170	$195
D7970	EXCISION HYPERPLASTIC TISSUE	$155	$175	$195	$220
D7971	EXCISE PERICORONAL GINGIVA	$70	$75	$85	$110
D7972	REDUCE FIBROUS TUBEROSITY	$145	$165	$185	$220
D9110	EMERGENCY RELIEF OF PAIN	$25	$25	$30	$40
D9120	BRIDGE SECTIONING	$55	$60	$70	$70
D9222	DEEP SEDATION/GEN ANES 1ST 15	$75	$80	$80	$95
D9223	DEEP SEDATION/GENERAL ANES	$75	$85	$100	$105
D9239	INTRAVENOUS SEDATION 1ST 15	$65	$70	$70	$80
D9243	INTRAVENOUS SEDATION	$65	$75	$85	$95
D9310	CONSULTATION	$50	$55	$65	$70
D9311	CONSULT W/MEDICAL PROFESSIONAL	$25	$30	$30	$35
D9610	INJECT DRUG - THERAPEUTIC	$25	$30	$30	$35
D9612	MULTIPLE THERAPEUTIC DRUGS	$40	$45	$55	$60
D9910	APPLY DESENSITIZING MEDICINE	$20	$25	$25	$30
D9911	DESENSITIZING RESIN	$20	$25	$25	$30
D9930	POST-SURGICAL COMPLICATIONS	$35	$40	$45	$60
D9932	CLEAN INSPECT COMPLETE UPPER	$45	$50	$55	$70
D9933	CLEAN INSPECT COMPLETE LOWER	$45	$50	$55	$70
D9934	CLEAN INSPECT PARTIAL UPPER	$45	$50	$55	$70
D9935	CLEAN INSPECT PARTIAL LOWER	$45	$50	$55	$70
D9940	OCCLUSAL GUARDS	$235	$270	$305	$330
D9942	REPAIR / RELINE OCCLUSAL GUARD	$75	$85	$95	$105
D9943	OCCLUSAL GUARD ADJUSTMENT	$20	$20	$25	$25
D9951	ADJUST OCCLUSION - LIMITED	$35	$45	$50	$55
D9952	ADJUST OCCLUSION - COMPLETE	$170	$200	$225	$270

Orthodontics If your plan covers orthodontics, payments will be based on a percentage of the total benefit available. A lifetime orthodontic benefit maximum applies. Please refer to your plan overview for more details.

Like most group insurance policies, MetLife group dental policies contain certain exclusions, waiting periods, reductions of benefits, limitations and terms for keeping them in force. For information about costs and complete details, contact your Human Resources department or MetLife benefits representative.

Alternate Benefits: Where two or more professionally acceptable dental treatments for a dental condition exist, reimbursement is based on the least costly treatment alternative. If you and your dentist have agreed on a treatment that is more costly than the treatment upon which the plan benefit is based, you will be responsible for any additional payment responsibility. To avoid any misunderstandings, we suggest you discuss treatment options with your dentist before services are rendered, and obtain a pretreatment estimate of benefits prior to receiving certain high cost services such as crowns, bridges or dentures. You and your dentist will each receive an Explanation of Benefits (EOB) outlining the services provided, your plan's reimbursement for those services, and your out-of-pocket expense. Actual payments may vary from the pretreatment estimate depending upon annual maximums, plan frequency limits, deductibles and other limits applicable at time of payment.

Copay plans are not available for ***insured*** cases in Texas, including plans sitused in Texas or covering Texas residents.
Copay plans are also not available for ***insured*** cases in Connecticut, Illinois, Louisiana, Montana, and Nevada.



Metropolitan Life Insurance Company | 200 Park Avenue | New York, NY 10166
L0917498935[exp0919][All States][DC,GU,MP,PR,VI] © 2017 METLIFE, INC.