

DenteMax Fee Schedule 2012 Network Fee Schedule C

These are the fees charged by most general dentists in the area; some general dentists charge more.
Please contact your dentist to confirm network participation and fees before receiving treatment.

PROCEDURE CODE	DESCRIPTION	FEE
120	PERIODIC ORAL EXAMINATION	\$ 25.00
140	LIMITED ORAL EVALUATION - PROBLEM FOCUSED	\$ 38.00
150	COMP ORAL EVALUATION - NEW/ESTABLISHED PATIENT	\$ 41.00
210	INTRAORAL - COMPLETE SERIES	\$ 72.00
220	INTRAORL - PERIAPICAL 1 FILM	\$ 14.00
230	INTRAORL - PERIAPICAL EACH ADDITIONAL FILM	\$ 12.00
272	BITEWINGS - TWO FILMS	\$ 23.00
274	BITEWINGS - FOUR FILMS	\$ 34.00
330	PANORAMIC FILM	\$ 63.00
1110	PROPHYLAXIS - ADULT	\$ 49.00
1120	PROPHYLAXIS - CHILD	\$ 36.00
1203	TOPICAL APPLICATION OF FLUORIDE - CHILD	\$ 19.00
1204	TOPICAL APPLICATION OF FLUORIDE - ADULT	\$ 19.00
1351	SEALANT - PER TOOTH	\$ 30.00
2140	AMALGAM-ONE SURFACE PRIMARY OR PERMANENT	\$ 68.00
2150	AMALGAM-TWO SURFACES PRIMARY OR PERMANENT	\$ 86.00
2330	RESIN-BASED COMPOSITE - ONE SURFACE ANTERIOR	\$ 82.00
2331	RESIN-BASED COMPOSITE - TWO SURFACES ANTERIOR	\$ 101.00
2332	RESIN-BASED COMPOSITE - THREE SURFACES ANTERIOR	\$ 124.00
2391	RESIN-BASED COMPOSITE - ONE SURFACE POSTERIOR	\$ 92.00
2392	RESIN-BASED COMPOSITE - TWO SURFACES POSTERIOR	\$ 121.00
2393	RESIN-BASED COMPOSITE - THREE SURFACES POSTERIOR	\$ 151.00
2750	CROWN - PORCELAIN FUSED TO HIGH NOBLE METAL	\$ 641.00
2950	CORE BUILDUP INCLUDING ANY PINS	\$ 139.00
3330	ROOT CANAL - MOLAR	\$ 656.00
4341	PERIO SCALING AND ROOT PLANING-PER QUADRANT	\$ 134.00
4910	PERIODONTAL MAINTENANCE	\$ 76.00
7140	EXTRACTION ERUPTED TOOTH OR EXPOSED ROOT	\$ 79.00
7210	SURG REMOVE ERUPTED TOOTH	\$ 140.00
7240	REMOVAL OF IMPACTED TOOTH - COMPLETELY BONY	\$ 279.00

These network fees are for most general dentists in the area; fees for specialists and some general dentists may be higher.

Health Economics Group, Inc. does not guarantee that a particular dentist will accept DenteMax fees as payment in full. Please note that specialists and some general dentists may charge fees that are higher than on the Fee Schedule shown on this page. **Confirm network participation and fees with your dentist before receiving treatment.** We rely upon the judgement of DenteMax as to the professional competency of dentists in their network. Our role is to make the DenteMax network available to members of this program. Our liability is limited to the fee a member pays for the card(s).

If you would like more information about any aspect of this program, please call Health Economics Group, Inc, at 800-666-6690 x 505.