

SELE-DENT, INC
 FEE SCHEDULE
 2021

Proc Code	EXPLANATION OF CODE	Fee Amount	Proc Code	EXPLANATION OF CODE	Fee Amount
120	ORAL EXAM(PERIODIC)	15.00	2510	INLAY-METALLIC 1 SURF	135.00
140	LIMITED ORAL EVALUATION	15.00	2520	INLAY-METALLIC 2 SURF	160.00
150	COMP ORAL EVALUATION	15.00	2530	INLAY-METALLIC 3 SURF	200.00
160	EXTENSIVE ORAL EXAM	28.00	2544	ONLAY METALLIC PER	150.00
170	RE-EVALUATION LIMITED	15.00	2610	INLAY-PORCELAIN 1SURF	80.00
171	RE-EVALUATION POST OP OFFICE VISIT	15.00	2620	INLAY-PORC/CERAMIC 1 SURF	80.00
180	COMP PERIO EVAL	15.00	2630	INLAY PORC/CERAMIC 2 SURF	350.00
190	SCREENING OF PATIENT	15.00	2642	ONLAY PORC/CERAMIC 2 SURF	350.00
191	ASSESSMENT OF PATIENT	15.00	2643	ONLAY-PORC/CERAMIC 3 SURF	350.00
210	XRYS INT COMP SERIES	25.00	2644	ONLAY PORC/CERAMIC 4 SURF	350.00
220	XRYS INT PER 1ST FILM	4.00	2710	CROWN ACRYLIC	225.00
230	XRYS INT PER ADD FILM	3.00	2720	CROWN ACRYLIC W/GOL	225.00
240	XRYS INT OCCLUSAL	9.00	2740	CROWN PORCELAIN	330.00
250	XRYS-EXTRA ORAL	18.00	2750	CROWN PORCELAIN/ MET	330.00
260	XRYS EXTRA ORAL ADD	18.00	2751	CROWN PORC/BASE MET	330.00
270	XRYS BITEWING EACH	5.00	2752	CROWN PORC/NOBEL MET	330.00
272	XRYS 2 BITEWINGS	9.00	2790	CROWN GOLD(FULL)	275.00
273	XRYS 3 BITEWINGS	13.00	2799	PROVISIONAL CROWN	200.00
274	XRYS 4 BITEWINGS	17.00	2910	RECEMENT INLAY	15.00
277	XRYS 7 BITEWINGS	29.00	2915	RECEMENT POST	15.00
320	XRYS TEMPORO-MAND TMJ	25.00	2920	RECEMENT CROWN	15.00
322	TOMOGRAPHIC SURVEY	375.00	2930	CROWN-STNLESS PRIMARY TOOTH	60.00
330	XRYS PANORAMIC FILM	39.00	2930	CROWN-STNLESS PERMANENT TOOTH	60.00
340	XRYS-CEPHAL FILM	25.00	2932	PREFABRICATED RESIN CROWN	38.00
364	CONE BEAM CT CAPTURE	75.00	2940	SEDATIVE FILLING	15.00
365	CONE BEAM CT CAP MANDIBLE	75.00	2950	CORE BUILD UP INCLUDING ANY PINS	28.00
366	CONE BEAM CT CAP MAXILLA	75.00	2951	PIN RETENTION	28.00
367	CONE BEAM CT CAP MAN/MAX	75.00	2952	CRN-CAST POST/CORE	80.00
368	CONE BEAM CT CAP TMJ SERIES	75.00	2954	PREFABRICATED POST & CORE	80.00
369	MAXILLOFACIAL MRI	75.00	2955	POST REMOVAL	125.00
380	CONE BEAN CT LIMITED VIEWS	75.00	2957	EACH ADD PREFABRICATED POST & CORE	40.00
381	CONE BEAN CT ONE FULL ARCH MAND	75.00	2960	LAMINATE VENEER DIRECT (RESIN)	175.00
382	CONE BEAN CT ONE FULL ARCH MAX	75.00	2961	LAMINATE VENEER INDIRECT (RESIN)	175.00
383	CONE BEAN CT BOTH JAWS	75.00	2962	LAMINATE VENEER INDIRECT (PORCELAIN)	175.00
431	ADJUNCTIVE PRE-DIAG TEST	50.00	2980	CROWN REPAIR PER REPORT	25.00
460	PULP VITALITY TEST	10.00	3110	PULP CAP DIRECT	12.50
470	DIAGNOSTIC STUDY	20.00	3120	PULP CAP INDIRECT	11.00
1110	PROPHYLAXIS – ADULT	25.00	3220	PULPOTOMY-THERAP	22.00
1120	PROPHYLAXIS – CHILD	20.00	3221	VITAL PULPOTOMY-PRIM AND PERM TEETH	30.00
1206	FLUORIDE TOPICAL VARNISH	12.00	3240	PULP THERAPY RESORBABLE FILLINGS	100.00
1208	FLUORIDE TOPICAL W/O VARNISH	12.00	3310	ROOT CANAL 1 CANAL	135.00
1310	DIET PLANNING	12.00	3320	ROOT CANAL 2 CANALS	220.00
1330	DENTAL HYGIENE INSTR	10.00	3330	ROOT CANAL 3 CANALS	300.00
1351	TOP APPL OF SEALANTS	12.00	3331	ROOT CANAL OBSTRUCTION	175.00
1354	INTERIM CARIES	40.00	3346	RETREAT 1 CANAL	135.00
1510	SPACE MAINT FIXED UNI	75.00	3347	RETREAT 2 CANALS	220.00
1516	FIXED SPACE MAINT MAXILLARY	100.00	3348	RETREAT 3 CANALS	300.00
1517	FIXED SPACE MAINT MANDIBULAR	100.00	3351	APEXIFCATION/RECALCIFICATION	12.50
1520	SPACE MAINT-REMOVABLE UNILATERAL	100.00	3410	APICOECTOMY ANTERIOR	70.00
1526	SPACE MAINT- REMOVABLE MAXILLARY	95.00	3421	APICOECTOMY PREMOLAR	105.00
1527	SPACE MAINT- REMOVABLE MANDIBULAR	95.00	3425	APICOECTOMY MOLOR	200.00
1550	RECEMENT SPACE MAINTAINER	20.00	3426	APICOECTOMY / ADD ROOT	36.00
1555	REMOVAL OF FIXED SPACE MAINT	30.00	3430	RETROGRADE FILLING	50.00
2140	AMALGAM 1 SURFACE	16.50	3450	ROOT AMPUTATION	85.00
2150	AMALGAM 2 SURFACE	28.00	3910	ISOLAT OF TTH W/RUBBER DAM	200.00
2160	AMALGAM 3 SURFACE	38.00	3920	ENDO-HEMISECTION	110.00
2161	AMALGAM 4 SURFACE	40.00	3950	CANAL PREP FOR POST	60.00
2330	RESIN-BASED COMP/1SUF	28.00	4210	GING PER QUADRANT	155.00
2331	RESIN-BASED COMP/2SUF	44.00	4211	GING PER SECTANT	80.00
2332	RESIN-BASED COMP/3SUF	80.00	4212	GINGIVECTOMY PER TOOTH	20.00
2335	RESIN-BASED COMP/4SUF	80.00	4231	ANATOMICAL CRN EXPOSURE	330.00
2391	RES BAS COMP 1 SURF POST	38.00	4240	GINGIVAL FLAP PROCEDURE	100.00
2392	RES BAS COMP 2 SURF POST	54.00	4241	GINGIVAL FLAP CURETTAGE	50.00

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2393	RES BAS COMP 3 SURF POST	90.00	4249	CROWN LENGTHENING	80.00
2394	RBC COMP 4 SURF OR MORE	100.00	4260	OSSEOUS SURGERY QUAD	325.00
2510	INLAY-METALLIC 1 SURF	135.00	4261	OSS SURG 1 TO 3 PER QUAD	162.50
2520	INLAY-METALLIC 2 SURF	160.00	4263	BONE REPLACE GRAFT FIRST QUAD	150.00
2530	INLAY-METALLIC 3 SURF	200.00	4264	BONE REPLACE GRAFT EACH ADD	150.00
2544	ONLAY METALLIC PER	150.00	4265	OSSEOUS TISSUE REGENERAT	60.00
2610	INLAY-PORCELAIN 1SURF	80.00	4266	GUIDED TISSUE REGION	75.00
2620	INLAY-PORC/CERAMIC 1 SURF	80.00	4267	GUIDED TISSUE REG./ NON	150.00
2630	INLAY PORC/CERAMIC 2 SURF	350.00	4268	SURGICAL REVISION, PER TTH	375.00
2642	ONLAY PORC/CERAMIC 2 SURF	350.00	4270	PEDICLE SOFT TISSUE GRAFT	80.00
2643	ONLAY-PORC/CERAMIC 3 SURF	350.00	4273	AUTO CONNECT TISSUE GRAFT	100.00
4320	PROV SPLINTING INTRACORONAL	55.00	6241	PONTIC-PORCELAIN/BASE METAL	265.00
4321	PROV SPLINTING EX	80.00	6242	PONTIC- PORCELAIN/NOBLE METAL	265.00
4341	PERIO SCALING	22.50	6245	PONTIC PORCELAIN/CERAMIC	265.00
4342	PERIO SCAL ROOT PLAN 1-3 TTH	11.25	6250	PONTIC-RESIN/HIGH NOBLE METAL	265.00
4346	PERIO SCALING FULL MOUTH	90.00	6251	PONTIC-RESIN/BASE METAL	265.00
4355	FULL MOUTH DEBRIDEMENT	60.00	6252	PONTIC- RESIN/NOBLE METAL	265.00
4381	ACTISITE	40.00	6545	RETAINER-CAST METAL FIXED PROSTHESIS	330.00
4910	PERIO PROPHYLAXIS	40.00	6710	RETAINER CROWN RESIN BASED COMP	135.00
4921	GINGIVAL IRRIGATION	25.00	6720	RETAINER CROWN HIGH NOBLE METAL	265.00
5110	DENTURES-COMP UPPER	385.00	6722	RETAINER CROWN HIGH NOBLE METAL	175.00
5120	DENTURES COMP LOWER	385.00	6740	RETAINER CROWN PORCELAIN/CERAMIC	330.00
5130	DENTURES IMM UPPER	410.00	6750	RETAINER CROWN PORCELAIN/H NOBLE METAL	330.00
5140	DENTURES IMM LOWER	410.00	6751	RETAINER CROWN PORCELAIN BASE METAL	330.00
5211	PRTL DENT UPP 2 CLSP	360.00	6752	RETAINER CROWN NOBLE METAL	330.00
5212	PRTL DENT LOW 2 CLSP	360.00	6780	RETAINER CROWN 3/4 HIGH NOBLE METAL	200.00
5213	PRTL DEN CAST 2 CLSP	375.00	6790	RETIANER CROWN FULL HIGH NOBLE METAL	275.00
5214	PRTL DEN CAST 2 CLSP	375.00	6792	RETAINER CROWN FULLNOBLE METAL	275.00
5221	IMMEDIATE MAX PART DENTURE RESIN	375.00	6793	PROVISIONAL RETAINER CROWN	135.00
5222	IMMEDIATE MAN PART DENTURE RESIN	375.00	6930	RECEMENT BRIDGE	25.00
5223	IMMEDIATE MAX PART DENTURE METAL	375.00	6940	STRESS BREAKER	38.00
5224	IMMEDIATE MAN PART DENTURE METAL	375.00	6950	PRECISION ATTACH	55.00
5225	PART UPP DENT-FLEX BASE	375.00	6985	PEDIATRIC PARTIAL DENT FIXED	55.00
5226	PART LOW DENT-FLEX BASE	375.00	7111	DECIDUOUS TOOTH EXTRACTION	35.00
5282	PRTL DENT UNI REMOV MAXILLARY	165.00	7140	ERUPT TTH EXPOSED ROOT EXT	65.00
5283	PRTL DENT UNI REMOV MANDIBULAR	165.00	7210	EXTRACT ERUOTED TTH	100.00
5410	ADJ.COMPL.DENT UPPER	65.00	7220	EXTRACT IMPACT TTH	110.00
5411	ADJ.COMPL. DENT LOWER	38.00	7230	EXTRACT IMPACT PART	160.00
5421	ADJ PRTL DENT UPPER	38.00	7240	EXTRACT IMPACT FULL	245.00
5422	ADJ PRTL DENT LOWER	28.00	7241	EXTRACT IMPACT FULL W/ SURGICAL COMP.	245.00
5511	REPAIR BROKEN COMPLETE DENT MAN	60.00	7250	TOOTH RECOVERY	65.00
5512	REPAIR BROKEN COMPLETE DENT MAX	60.00	7260	ORAL ANT FISTULA	155.00
5520	REPL MISSING/BROKEN TTH	28.00	7261	MAX SINUSOTOMY	155.00
5611	REPAIR RESIN PARTIAL MAN	35.00	7270	TOOTH REIMPLANT	155.00
5612	REPAIR RESIN PARTIAL MAX	35.00	7272	TTH TRANSPLANTATION	200.00
5621	REPAIR CAST PARTIAL FRAME MAN	35.00	7280	EXPOSE IMPACT UNCOPL	55.00
5622	REPAIR CAST PARTIAL FRAME MAX	35.00	7282	MOBILIZATION MALPOSITION TTH	135.00
5630	PRTL DENT ADD TTH	18.00	7283	DEVICE FACILITATE ERUPT IMP	200.00
5640	REPLACE BROKEN TEETH -PER TOOTH	28.00	7285	BIOPSY HARD TISSUE	55.00
5650	ADD TOOTH TO EXISTING PARTIAL DENT	44.00	7286	BIOPSY SOFT TISSUE	35.00
5660	PRTL DENTADD'L CLASP	62.00	7287	CYTOLOGY	55.00
5670	REP ALL TEETH (MAX)	36.00	7290	SURGICAL REPOSITION	85.00
5671	REP ALL TEETH (MANDI)	44.00	7310	ALVEOL W/EXTRACT 4 OR MORE TEETH	90.00
5710	DENT COMP UP REBASE	200.00	7311	ALVEOL W/EXTRACT 1 TO 3 TEETH	90.00
5711	DENT COMP LOWER REBASE	200.00	7320	ALVEOL NON EXTRACT 4 OR MORE TEETH	135.00
5720	DENT PART UPPER REBASE	165.00	7321	ALVEOL NON EXTRACT 1 TO 3 TEETH	67.50
5721	DENT PART LOWER REBASE	165.00	7340	VESTIBIOPLASTY RIDGE EXTENSION	60.00
5730	RELINING COMPL UPPER DIRECT	85.00	7350	VESTIBIOPLASTY RIDGE EXTENSION INC GRAFTS	82.00
5731	RELINING COMPL LOWER DIRECT	85.00	7410	RADICAL EXCISION <5"	60.00
5740	DENT RELINE COMP UPPER DIRECT	62.00	7411	EXC BENIGN LESION > 1.25 CM	60.00
5741	DENT RELINE COMP LOWER DIRECT	62.00	7412	EXC BENIGN LESION COMP	82.00

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5750	RELINING COMP UPPER LAB INDIRECT	90.00	7413	EXC MALIG LES UP TO 1.25 CM	82.00
5751	RELINING COMP LOWER LAB INDIRECT	90.00	7450	ODO CYST <5"	125.00
5760	DENT RELINE PRTL UPPER INDIRECT	77.00	7451	ODO CYST >5"	180.00
5761	DENT RELINE PRTL LOWER INDIRECT	77.00	7472	REMOVAL OF TORUS PALATINUS	82.00
5810	TEMP COMP UPPER DENT	85.00	7473	REMOVAL TORUS MANDIBULARIS	110.00
5811	TEMP COMP LOWER DENT	85.00	7485	SURG REDUCTION OF OSSEOUS	190.00
5820	TEMP PART UPPER DENT	55.00	7490	RADICAL RESECT MAND	1265.00
5821	TEMP PART LOWER DENT	55.00	7510	INCISION & DRAINAGE ABCESS INTRAORAL SOFT TISSUE	65.00
5850	TISSUE CONDITIONING UPPER	25.00	7511	INCISION & DRAINAGE ABCESS INTRAORAL SOFT TISSUE COMPLICATED	142.00
5851	TISSUE CONDITIONING LOWER	25.00	7520	INCISION & DRAINAGE ABCESS EXTRAORAL SOFT TISSUE	142.00
5862	PRECISION ATTACHMENT	75.00	7530	REMOVE FOREIGN BODY	60.00
6210	PONTIC- CAST HIGH NOBLE METAL	200.00	7610	FRAC SIM MAXILLA OP	360.00
6212	PONTIC- CAST NOBLE METAL	120.00	7620	FRAC SIM MAXILLA CL	250.00
6240	PONTIC- PORCELAIN/HIGH NOBLE METAL	265.00	7630	FRAC SIMP MAND OPEN	375.00
7640	FRAC SIMP MAN CLOSED	440.00			
7650	MALAR/ZYG ARCH OPEN	440.00			
7660	MALAR/ZYG ARCH CLOS	165.00			
7670	ALVEOLUS, RED SPLINT	110.00			
7671	ALVEOLUS - OPEN REDUCTION	110.00			
7710	MAXILLA, OPEN	550.00			
7720	MAXILLA, CLOSED	250.00			
7730	MANDIBLE, OPEN	575.00			
7750	MALAR/ZYG ARCH OPEN	440.00			
7760	MALAR/ZYG ARCH CLOS	190.00			
7770	ALVEOLUS, RED SPLINT	110.00			
7771	FX ALEVEOLUS CLOSED REDUCT	110.00			
7810	OPEN REDUC OF DISLOC	440.00			
7820	CLOS REDUC OF DISLOC	105.00			
7830	MANIPU UNDER ANESTH	65.00			
7880	OCCLUS ORTHIC APPLIAN	100.00			
7910	SUTURE WOUND <2"	55.00			
7943	OSTEOTOMY-BONY GRAFT	450.00			
7950	OSTEOPERIOSTEAL by report	400.00			
7951	SINUS AUGMENTATION	400.00			
7953	BONE REPLACEMENT GRAFT	225.00			
7955	REPAIR MAXILLOFACIAL SOFT/HARD	400.00			
7960	FRENECTOMY	60.00			
7972	SURGICAL REDUCTION OF FIBROUS	60.00			
9110	PALLIATIVE TRTMENT (EMERGENCY)	18.00			
9120	FIXED PARTIAL DENTURE SECTIONING	100.00			
9210	LOCAL ANESTHESIA	15.00			
9211	REGIONAL BLOCK ANESTHESIA	28.00			
9212	TRIGEMINAL DIV BLOCK ANES	38.00			
9215	LOCAL ANEST W/OPER OR SURG	75.00			
9222	GENERAL ANESTHESIA FIRST 15MINS	75.00			
9223	GENERAL ANESTHESIA + ADD 15MINS	75.00			
9230	ANALGESIA	75.00			
9239	IV- SEDATION/ANALGESIA 15MINS	75.00			
9243	IV- MODERATE SEDATION 15MINS	75.00			
9248	NON-IV CONSCIOUS SEDATION 15MINS	75.00			
9310	CONSULTATION	75.00			
9450	CASE PRESENT DETAIL/EXTEN	75.00			
9610	THERAPEUTIC DRUG INJ	40.00			
9612	THERAP PARENTERAL DRUG	40.00			
9910	DESENSITIZING MEDICATION	30.00			
9911	DESENSITIZING RESIN PER TTH	32.00			
9944	OCCLUSAL GUARD HARD APPLIANCE FULL	150.00			
9945	OCCLUSAL GUARD SOFT APPLIANCE FULL	150.00			
9946	OCCLUSAL GUARD HARD APPLIANCE PARTIAL	150.00			
9950	OCCLUSION ANALYSIS MOUNTED CASE	155.00			
9951	OCCLUSAL ADJUST LIMITED	60.00			
9952	OCCLUSAL ADJUST COMPLETE	135.00			

ORTHODONTICS SERVICES
LIFETIME MAXIMUM OF \$ 4,400
*** AS LONG AS MEMBERSHIP ACTIVE**