

# Fee Schedule Report



Delta Dental of Washington

**Filed Fee ID:** G9392

**As of:** 1/1/2018

Procedure Code	Description	Fee
D0120	Periodic Oral Evaluation - established patient	\$34.00
D0140	Limited Oral Evaluation-problem focused	\$46.70
D0145	Oral Evaluation Under Three Years of Age	\$34.00
D0150	Comprehensive Oral Evaluation-new/est. patient	\$54.10
D0160	Extensive Oral Evaluation-problem focused	\$46.70
D0170	Re-evaluation - Limited Problem Focused	\$46.70
D0180	Comprehensive Periodontal Evaluation-new/est. pt	\$86.40
D0190	Screening of a patient	\$17.00
D0191	Assessment of a patient	\$17.00
D0210	Intraoral-complete series of radiographic images	\$82.30
D0220	Intraoral - periapical first radiographic image	\$17.60
D0230	Intraoral-periapical each addl radiographic image	\$16.30
D0240	Intraoral - occlusal radiographic image	\$27.00
D0270	Bitewing - single radiographic image	\$17.60
D0272	Bitewings - two radiographic images	\$27.80
D0273	Bitewings - three radiographic images	\$39.40
D0274	Bitewings - four radiographic images	\$39.40
D0277	Vertical bitewings - 7 to 8 radiographic images	\$59.30
D0322	Tomographic Survey	\$170.10
D0330	Panoramic radiographic image	\$71.70
D0340	Cephalometric radiographic image	\$82.20
D0350	Oral/Facial Photographic Images intra/extraorally	\$29.40
D0460	Pulp Vitality Tests	\$35.70
D0470	Diagnostic Casts	\$68.30
D0600	Non-ionizing diag proc of enamel	\$35.70
D1110	Prophylaxis - Adult	\$69.40
D1120	Prophylaxis - Child	\$44.40
D1206	Topical Fluoride Varnish	\$24.50
D1208	Topical application of fluoride	\$24.50
D1351	Sealant - per tooth	\$34.10
D1352	Preventive Resin Restoration - permanent tooth	\$51.15
D1353	Sealant repair - per tooth	\$30.00
D1510	Space Maintainer - fixed - unilateral	\$212.10
D1515	Space Maintainer - fixed - bilateral	\$305.60
D1520	Space Maintainer - removable - unilateral	\$190.80
D1525	Space Maintainer - removable - bilateral	\$293.90
D1550	Recementation of Space Maintainer	\$52.50
D1575	Distal shoe space maintainer-fixed-unilateral	\$212.10
D2140	Amalgam - 1 surface, primary or permanent	\$79.00
D2150	Amalgam - 2 surfaces, primary or permanent	\$107.70
D2160	Amalgam - 3 surfaces, primary or permanent	\$132.90
D2161	Amalgam - 4 or more surfaces, prim. or perm.	\$159.20
D2330	Resin-based Composite - 1 surface anterior	\$96.10
D2331	Resin-based Composite - 2 surfaces anterior	\$125.70
D2332	Resin-based Composite - 3 surfaces anterior	\$158.10
D2335	Resin Composite-4 or more surfaces or incisal angl	\$184.80

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D2390	Resin-based Composite Crown, Anterior	\$210.00
D2391	Resin-based Composite - 1 surface, posterior	\$96.10
D2392	Resin-based Composite - 2 surfaces, posterior	\$125.70
D2393	Resin-based Composite - 3 surfaces, posterior	\$158.10
D2394	Resin-based Comp. - 4 or more surfaces, posterior	\$184.80
D2410	Gold Foil - 1 surface	\$242.60
D2420	Gold Foil - 2 surfaces	\$273.00
D2430	Gold Foil - 3 surfaces	\$309.80
D2510	Inlay - metallic - 1 surface	\$356.00
D2520	Inlay - metallic - 2 surfaces	\$396.90
D2530	Inlay - metallic - 3 or more surfaces	\$425.30
D2542	Onlay - metallic - 2 surfaces	\$401.10
D2543	Onlay - metallic - 3 surfaces	\$438.90
D2544	Onlay - metallic - 4 or more surfaces	\$438.90
D2610	Inlay - porcelain/ceramic - 1 surface	\$357.00
D2620	Inlay - porcelain/ceramic - 2 surfaces	\$380.10
D2630	Inlay - porcelain/ceramic - 3 or more surfaces	\$436.80
D2642	Onlay - porcelain/ceramic - 2 surfaces	\$447.30
D2643	Onlay - porcelain/ceramic - 3 surfaces	\$480.90
D2644	Onlay - porcelain/ceramic - 4 or more surfaces	\$480.90
D2651	Inlay - resin-based composite - 2 surfaces	\$305.00
D2652	Inlay - resin-based composite - 3 or more surfaces	\$329.30
D2662	Onlay - resin-based composite - 2 surfaces	\$401.10
D2663	Onlay - resin-based composite - 3 surfaces	\$438.90
D2664	Onlay - resin-based composite - 4 or more surfaces	\$438.90
D2710	Crown - resin-based composite (indirect)	\$377.00
D2720	Crown - resin with high noble metal	\$409.50
D2721	Crown - resin with predominantly base metal	\$409.50
D2722	Crown - resin with noble metal	\$409.50
D2740	Crown - porcelain/ceramic substrate	\$435.80
D2750	Crown - porcelain fused to high noble metal	\$435.80
D2751	Crown - porcelain fused to predominant base metal	\$435.80
D2752	Crown - porcelain fused to noble metal	\$435.80
D2780	Crown - 3/4 cast high noble metal	\$435.80
D2781	Crown - 3/4 cast predominantly base metal	\$435.80
D2782	Crown - 3/4 cast noble metal	\$435.80
D2783	Crown - 3/4 porcelain/ceramic	\$435.80
D2790	Crown - full cast high noble metal	\$435.80
D2791	Crown - full cast predominantly base metal	\$435.80
D2792	Crown - full cast noble metal	\$435.80
D2910	Recement Inlay, Onlay or Partial Cov Rest	\$49.70
D2920	Recement Crown	\$62.20
D2921	Reattachmt of tooth fragment, incisal edge or cusp	\$184.80
D2929	Prefab porcelain/ceramic crown - primary tooth	\$107.10
D2930	Prefab. stainless steel crown - primary tooth	\$107.10
D2931	Prefab. stainless steel crown - permanent tooth	\$136.50

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D2932	Prefabricated Resin Crown	\$136.50
D2933	Prefabricated stainless steel crown w/resin window	\$136.50
D2934	Prefab Esthetic Stainless Steel Crn-primary tooth	\$107.10
D2940	Protective Restoration	\$65.10
D2941	Interim therapeutic restoration-primary dentition	\$65.10
D2949	Restorative foundation for an indirect restoration	\$133.40
D2950	Core buildup, including any pins when required	\$133.40
D2951	Pin Retention - per tooth, in add. to restoration	\$27.30
D2952	Post and Core in addition to crown-indirect	\$174.30
D2954	Prefabricated Post and Core in addition to crown	\$133.40
D2957	Each Additional Prefabricated Post - same tooth	\$57.20
D2960	Labial Veneer (resin laminate) - chairside	\$244.80
D2961	Labial Veneer (resin laminate) - laboratory	\$354.90
D2962	Labial Veneer (porcelain laminate) - laboratory	\$419.00
D3110	Pulp Cap - Direct (excluding final restoration)	\$52.50
D3120	Pulp Cap - Indirect (excluding final restoration)	\$54.10
D3220	Therapeutic Pulpotomy (exclud. final restoration)	\$121.80
D3221	Pulpal Debridement, primary and permanent teeth	\$121.80
D3240	Pulpal Therapy - post. primary (excl. final rest.)	\$121.80
D3310	Endo therapy-anterior(excl. final rest.)	\$427.40
D3320	Endo therapy-bicuspid(excl. final rest.)	\$528.70
D3330	Endo therapy-molar (excl. final rest.)	\$747.30
D3331	Treatment of Root Canal Obstruct; non-surg. access	\$747.30
D3332	Incomplete Endo Thrpy; inop,unrestore or fracture	\$106.10
D3333	Internal Root Repair of Perforation Defects	\$176.40
D3346	Retreatment of prev. root canal therapy-anterior	\$550.20
D3347	Retreatment of prev. root canal therapy-biscuspid	\$665.70
D3348	Retreatment of prev. root canal therapy-molar	\$890.40
D3351	Apexificatn/Recalcificatn-Initial Visit	\$227.90
D3352	Apexificatn/Recalcificatn-Inerimt Med Replacement	\$174.30
D3353	Apexification/Recalcification Final Visit	\$341.30
D3410	Apicoectomy - anterior	\$588.10
D3421	Apicoectomy - bicuspid (first root)	\$690.90
D3425	Apicoectomy - molar (first root)	\$634.20
D3426	Apicoectomy (each additional root)	\$246.80
D3427	Periradicular surgery without apicoectomy	\$588.10
D3428	Bone grft/periradicular surgery-per th,single site	\$420.00
D3429	Bone grft/periradicular surgery-each addl contg th	\$294.80
D3430	Retrograde Filling - per root	\$176.40
D3450	Root Amputation - per root	\$335.90
D3460	Endodontic Endosseous Implant	\$928.20
D3920	Hemisection, not including root canal therapy	\$289.80
D3950	Canal Prep. & Fitting of Preformed Dowel or Post	\$106.10
D4210	Gingivectomy or gingivoplasty-4+ teeth per quad	\$420.00
D4211	Gingivectomy or gingivoplasty - 1-3 teeth per quad	\$149.10
D4212	Gingivectomy or gingivoplasty - per tooth	\$149.10

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Procedure Code	Description	Fee
D4240	Gingival Flap Proc - 4 or more teeth per quad	\$480.90
D4241	Gingival Flap Proc - 1-3 teeth per quad	\$480.90
D4249	Clinical crown lengthening - hard tissue	\$609.00
D4260	Osseous Surgery - 4+ contiguous teeth per quad	\$908.40
D4261	Osseous Surgery 1-3 teeth per quad	\$908.40
D4263	Bone replacement graft - first site in quadrant	\$420.00
D4264	Bone replacement graft - each addit. site in quad	\$294.80
D4270	Pedicle Soft Tissue Graft Procedure	\$588.10
D4273	Autogen conn tissue graft procedure-1st tooth	\$605.10
D4277	Free soft tissue graft - first tooth	\$529.20
D4278	Free soft tissue graft - additional tooth	\$264.60
D4283	Autogen conn tissue graft procedure-each addl	\$302.55
D4320	Provisional splinting - intracoronal	\$315.00
D4321	Provisional splinting - extracoronal	\$315.00
D4341	Perio scaling/root planing - 4+ teeth per quad	\$159.60
D4342	Perio scaling/root planing - 1-3 teeth per quad	\$159.60
D4346	Scaling in presence of gingival inflammation-FM	\$69.40
D4355	Full Mouth Debridement to enable comp. eval & diag	\$263.60
D4910	Periodontal Maintenance	\$113.60
D5110	Complete denture - maxillary	\$661.50
D5120	Complete denture - mandibular	\$661.50
D5130	Immediate denture - maxillary	\$661.50
D5140	Immediate denture - mandibular	\$661.50
D5211	Maxillary partial denture - resin base	\$404.30
D5212	Mandibular partial denture - resin base	\$404.30
D5213	Maxillary partial denture-cast frame w/resin base	\$682.50
D5214	Mandibular partial denture-cast frame w/resin base	\$682.50
D5221	Immediate maxillary partial denture - resin base	\$424.51
D5222	Immediate mandibular partial denture - resin base	\$424.51
D5223	Immediate maxillary partial denture - cast metal	\$716.62
D5224	Immediate mandibular partial denture - cast metal	\$716.62
D5225	Maxillary Partial Denture - flexible base	\$682.50
D5226	Mandibular Partial Denture - flexible base	\$682.50
D5281	Rem. unilateral partial denture-1 piece cast metal	\$404.30
D5410	Adjust complete denture - maxillary	\$39.90
D5411	Adjust complete denture - mandibular	\$39.90
D5421	Adjust partial denture - maxillary	\$39.90
D5422	Adjust partial denture - mandibular	\$39.90
D5511	Repair broken complete denture base, mandibular	\$87.40
D5512	Repair broken complete denture base, maxillary	\$87.40
D5520	Replace missing or broken tooth - complete denture	\$83.10
D5611	Repair resin partial denture base, mandibular	\$87.40
D5612	Repair resin partial denture base, maxillary	\$87.40
D5621	Repair cast partial framework, mandibular	\$87.40
D5622	Repair cast partial framework, maxillary	\$87.40
D5640	Replace Broken Teeth - Per Tooth	\$83.10

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**As of:** 1/1/2018

Procedure Code	Description	Fee
D5650	Add Tooth to Existing Partial Denture	\$102.10
D5660	Add Clasp to Existing Partial Denture-Per tooth	\$109.20
D5670	Repl. all teeth & acrylic on cast frame-maxillary	\$78.50
D5671	Repl. all teeth & acrylic on cast frame-mandibular	\$78.50
D5710	Rebase complete maxillary denture	\$283.50
D5711	Rebase complete mandibular denture	\$283.50
D5720	Rebase maxillary partial denture	\$283.50
D5721	Rebase mandibular partial denture	\$283.50
D5730	Reline complete maxillary denture (chairside)	\$286.20
D5731	Reline complete mandibular denture (chairside)	\$286.20
D5740	Reline maxillary partial denture (chairside)	\$286.20
D5741	Reline mandibular partial denture (chairside)	\$286.20
D5750	Reline complete maxillary denture (laboratory)	\$286.20
D5751	Reline complete mandibular denture (laboratory)	\$286.20
D5760	Reline maxillary partial denture (laboratory)	\$286.20
D5761	Reline mandibular partial denture (laboratory)	\$286.20
D5810	Interim complete denture (maxillary)	\$393.80
D5811	Interim complete denture (mandibular)	\$393.80
D5820	Interim partial denture (maxillary)	\$273.00
D5821	Interim partial denture (mandibular)	\$273.00
D5850	Tissue Conditioning, maxillary	\$84.00
D5851	Tissue Conditioning, mandibular	\$84.00
D5863	Overdenture - complete maxillary	\$840.00
D5865	Overdenture - complete mandibular	\$840.00
D6010	Surg. placement of implant body, endosteal implant	\$869.40
D6011	Second stage implant surgery	\$149.10
D6013	Surgical placement of mini implant	\$869.40
D6056	Prefabricated Abutment-includes placement	\$357.00
D6058	Abutment Supported Porcelain/Ceramic Crown	\$435.80
D6059	Abutment Supported Porcelain/High Noble Metal Crn	\$435.80
D6060	Abutment Supported Porcelain/Base Metal Crown	\$435.80
D6061	Abutment Supported Porcelain/Noble Metal Crown	\$435.80
D6062	Abutment Supported Cast High Noble Metal Crown	\$435.80
D6063	Abutment Supported Cast Base Metal Crown	\$435.80
D6064	Abutment Supported Cast Noble Metal Crown	\$435.80
D6065	Implant Supported Porcelain/Ceramic Crown	\$435.80
D6066	Implant Supported Porcelain/High Noble Metal Crown	\$435.80
D6067	Implant Supported High Noble Metal Crown	\$435.80
D6068	Abutment Supported Retainer Porc/Ceramic FPD	\$435.80
D6069	Abutment Supported Retainer Porc/High Noble FPD	\$435.80
D6070	Abutment Supported Retainer Porc/Base Metal FPD	\$435.80
D6071	Abutment Supported Retainer Porc/Noble Metal FPD	\$435.80
D6072	Abutment Supported Retainer High Noble Metal FPD	\$435.80
D6073	Abutment Supported Retainer Base Metal FPD	\$435.80
D6074	Abutment Supported Retainer Noble Metal FPD	\$435.80
D6081	Scaling and debridement of a single implant	\$159.60

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Procedure Code	Description	Fee
D6092	Recement implant supported crown	\$49.70
D6093	Recement implant supported FPD	\$49.70
D6110	Implant/abut supported removable denture-comp-U	\$869.40
D6111	Implant/abut supported removable denture-comp-L	\$869.40
D6112	Implant/abut supported removable denture-partial-U	\$869.40
D6113	Implant/abut supported removable denture-partial-L	\$869.40
D6210	Pontic - Cast High Noble Metal	\$420.00
D6211	Pontic - Cast Predom. Base Metal	\$420.00
D6212	Pontic - Cast Noble Metal	\$420.00
D6240	Pontic - Porcelain Fused to High Noble Metal	\$420.00
D6241	Pontic - Porcelain Fused to Pred. Base Metal	\$420.00
D6242	Pontic - Porcelain Fused to Noble Metal	\$420.00
D6245	Pontic - Porcelain/Ceramic	\$420.00
D6250	Pontic - Resin with High Noble Metal	\$420.00
D6251	Pontic - Resin with Predom. Base Metal	\$420.00
D6252	Pontic - Resin with Noble Metal	\$420.00
D6545	Retainer-Cast Metal for resin bonded fixed prosth	\$262.50
D6549	Resin retainer - for resin bonded fixed prosthesis	\$262.50
D6600	Rtnr Inlay-Porcelain/Ceramic 2 surfaces	\$396.90
D6601	Rtnr Inlay-Porcelain/Ceramic 3 or more surfaces	\$425.30
D6602	IRtnr Inlay-Cast High Noble Metal 2 surfaces	\$291.90
D6603	Rtnr Inlay-Cast High Noble Metal 3 or more surf	\$425.30
D6604	Rtnr Inlay-Cast Predom Base Metal 2 surfaces	\$396.90
D6605	Rtnr Inlay-Cast Predom Base Metal 3 or more surf	\$425.30
D6606	Rtnr Inlay-Cast Noble Metal 2 surfaces	\$396.90
D6607	Rtnr Inlay-Cast Noble Metal 3 or more surfaces	\$425.30
D6608	Rtnr Onlay-Porcelain/Ceramic 2 surfaces	\$401.10
D6609	Rtnr Onlay-Porcelain/Ceramic 3 or more surfaces	\$438.90
D6610	Rtnr Onlay-Cast High Noble Metal 2 surfaces	\$401.10
D6611	Rtnr Onlay-Cast High Noble Metal 3 or more surf	\$438.90
D6612	Rtnr Onlay-Cast Pred Base Metal 2 surfaces	\$401.10
D6613	Rtnr Onlay-Cast Pred Base Metal 3 or more surf	\$438.90
D6614	Rtnr Onlay-Cast Noble Metal 2 surfaces	\$401.10
D6615	Rtnr Onlay-Cast Noble Metal 3 or more surfaces	\$438.90
D6710	Rtnr Crown-indirect resin based composite	\$210.00
D6720	Rtnr Crown-Resin with Noble Metal	\$430.50
D6721	Rtnr Crown-Resin with Predom Base Metal	\$430.50
D6722	Crown-Resin with Noble Metal	\$430.50
D6740	Rtnr Crown-Porcelain/Ceramic	\$430.50
D6750	Rtnr Crown-Porcelain fused to High Noble Metal	\$430.50
D6751	Rtnr Crown-Porcelain fused to Pred Base Metal	\$430.50
D6752	Rtnr Crown-Porcelain fused to Noble Metal	\$430.50
D6780	Rtnr Crown-3/4 Cast High Noble Metal	\$430.50
D6781	Crown-3/4 Cast Predominantly Base Metal	\$430.50
D6782	Rtnr Crown-3/4 Cast Predom Base Metal	\$430.50
D6783	Rtnr Crown-3/4 Porcelain/Ceramic	\$430.50

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D6790	Rtnr Crown -Full Cast High Noble Metal	\$430.50
D6791	Rtnr Crown-Full Cast Predom Base Metal	\$430.50
D6792	Rtnr Crown-Full Cast Noble Metal	\$430.50
D6930	Recement Fixed Partial Denture	\$92.10
D7111	Extract Coronal Remnants - Decid Tooth	\$90.80
D7140	Extraction, Erupted Tooth or Exposed Root	\$90.80
D7210	Extraction, erupted tooth requiring bone removal	\$178.70
D7220	Removal of impacted tooth - soft tissue	\$198.50
D7230	Removal of impacted tooth - partially bony	\$261.50
D7240	Removal of impacted tooth - completely bony	\$320.30
D7241	Removal of impacted tooth - complete bony w/comp	\$392.70
D7250	Removal of residual tooth roots-cutting procedure	\$196.40
D7251	Coronectomy - Intentional Partial Tooth Removal	\$320.30
D7270	Tooth Reimplant &/or stab. of accid. evulsed tooth	\$315.00
D7280	Exposure of an unerupted tooth	\$383.30
D7285	Biopsy of oral tissue - hard (bone, tooth)	\$246.80
D7286	Biopsy of oral tissue - soft	\$211.10
D7290	Surgical Repositioning of teeth	\$87.00
D7295	Harvest of Bone for use in Autogenous Grafting Pro	\$246.80
D7310	Alveoplasty in conj. w/extractions - 4+ teeth	\$188.00
D7320	Alveoplasty not in conj. w/extractions - 4+ teeth	\$144.10
D7340	Vestibuloplasty (Secondary Epithelialization)	\$139.20
D7350	Vestibuloplasty (Including Grafts, Reattach, Mgmt)	\$139.20
D7410	Excision of Benign Lesion up to 1.25 cm	\$201.60
D7450	Rem of benign odontogenic cyst/tumor-up to 1.25 cm	\$201.60
D7451	Rem of benign odontogenic cyst/tumor-over 1.25 cm	\$201.60
D7460	Rem of benign nonodontog. cyst/tumor-up to 1.25 cm	\$201.60
D7461	Rem of benign nonodontog. Cyst/tumor-over 1.25 cm	\$201.60
D7471	Removal of lateral exostosis (maxilla or mandible)	\$377.00
D7510	Incision/Drain of Abscess - Intraoral soft tissue	\$147.00
D7771	Comp. Fract Alveolus-closed red stabiliz of teeth	\$315.00
D7880	Occlusal Orthotic Device, By Report	\$408.50
D7881	Occlusal orthotic device adjustment	\$39.90
D7953	Bone replacemt grft for ridge preservatn-per site	\$210.00
D7960	Frenulectomy - separate procedure	\$284.10
D7963	Frenuloplasty	\$284.10
D7971	Excision of Periocoronal Gingiva	\$149.10
D9110	Palliative (Emerg.) Tmt of dental pain-minor proc	\$83.50
D9219	Evaluation for deep sedation or general anesthesia	\$34.00
D9222	Deep sedation/general anesthesia-first 15 min	\$160.15
D9223	Deep sedation/general anesthesia-15 min increment	\$160.15
D9239	Intravenous conscious sedation-first 15 min	\$53.75
D9243	Intravenous conscious sedation-15 min increment	\$53.75
D9310	Consultation (by Dr other than requesting Dr)	\$86.40
D9410	House/extended care facility call	\$148.10
D9420	Hospital or ambulatory surgical center call	\$157.50

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Procedure Code	Description	Fee
D9430	Office Visit for observation-reg. hrs-no svc perf	\$48.00
D9440	Office Visit-after regularly scheduled hours	\$104.70
D9910	Application of Desensitizing Medicament	\$31.50
D9911	Application of Desensitizing Resin, per tooth	\$31.50
D9940	Occlusal Guard, By Report	\$408.50
D9943	Occlusal Guard Adjustment	\$39.90
D9951	Occlusal Adjustment - limited	\$84.00
D9952	Occlusal Adjustment - complete	\$378.00



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Filed Fee ID	Group/Subgroup	Assignment of Schedule	Group Contract Type
G9392	09392	Group	ASC - Cost Plus