



Please Note:

- This schedule applies to services provided by American Dental Care participating general dentists only.
- Any services provided by participating general dentists with a code not listed on this schedule will be billed at a 30% discount from normal pricing
- All services by participating dental specialists will be billed at a 25% discount from normal pricing
- Dental plans are not dental insurance. Members will pay providers directly for their services. Discuss all fees with Dentist prior to treatment.
- For all treatments, Lab Fees may be charged in addition to scheduled fees at provider's normal rates

Diagnostic And Preventative (Performed by a General Dentist)

ADA Codes	Procedure Description	Average Price	Member's Price	Savings
D0120	Periodic oral exam	\$75	\$25	67%
D0140	Limited Oral Evaluation - problem focus	\$85	\$49	42%
D0150	Comprehensive oral evaluation, new or established patient	\$95	\$49	48%
D0180	Comprehensive periodontal exam	\$140	\$40	71%
D0210	Intraoral x-rays, complete series including bitewings	\$180	\$60	67%
D0220	Intraoral x-ray, periapical, each and additional film	\$40	\$10	75%
D0230	Each additional periapical x-ray image	\$35	\$10	71%
D0270	Bitewing x-ray, single film	\$40	\$10	75%
D0272	Bitewing x-rays, two films	\$65	\$10	85%
D0273	Bitewing x-rays, three films	\$75	\$10	87%
D0274	Bitewing x-rays, four films	\$90	\$10	89%
D0330	Panoramic x-ray films	\$150	\$50	67%
D1110	Adult cleaning, above the gum line	\$130	\$59	55%
D1120	Child cleaning above the gum line	\$95	\$39	59%
D1206	Topical application of fluoride	\$50	\$25	50%
D1351	Sealant, per tooth	\$75	\$29	61%



Restoration Services, Filling, Inlay/Onlay And Crowns (Performed by a General Dentist)

ADA Codes	Procedure Description	Average Price	Member's Price	Savings
D2330	Resin/composite filling, one surface, anterior (front tooth)	\$230	\$88	62%
D2331	Resin/composite filling, two surfaces, anterior (front tooth)	\$285	\$116	50%
D2332	Resin/composite filling, three surfaces, anterior (front tooth)	\$340	\$142	58%
D2335	Resin/composite filling, four surfaces, anterior (front tooth)	\$430	\$162	62%
D2391	Resin/composite filling, one surfaces, posterior (back tooth)	\$250	\$91	64%
D2392	Resin/composite filling, two surfaces, posterior (back tooth)	\$325	\$134	59%
D2393	Resin/composite filling, three surfaces, posterior (back tooth)	\$400	\$156	61%
D2394	Resin/composite filling, four surfaces, posterior (back tooth)	\$465	\$178	62%
D2610	Inlay, Porcelain, one surface	\$1300	\$522	60%
D2620	Inlay, Porcelain, two surfaces	\$1350	\$539	60%
D2630	Inlay, Porcelain, three surfaces	\$1385	\$588	58%
D2642	Onlay, Porcelain, two surfaces	\$1385	\$622	55%
D2643	Onlay, Porcelain, three surfaces	\$1400	\$639	54%
D2644	Onlay, Porcelain, four plus surfaces	\$1475	\$688	53%
D2740	Crown, porcelain/ceramic/Zirconia	\$1525	\$749	51%
D2799	Provisional crown (also known as a temporary crown)	\$500	\$117	77%
D2910	Recement inlays/onlays	\$160	\$58	64%
D2920	Recement crowns	\$160	\$58	64%
D2950	Core buildup, including any pins	\$375	\$134	64%
D2954	Prefabricated post & cord	\$450	\$168	63%
D2960	Labial Veneer (Resin Laminated) - direct	\$930	30% Discount	30%
D2962	Labial Veneer (Resin Laminated) - indirect	\$930	30% Discount	30%

Endodontic Services, and Root Canals (Performed by a General Dentist)

ADA Codes	Procedure Description	Average Price	Member's Price	Savings
D3310	Anterior root canal, excluding final restoration	\$1025	\$448	56%
D3320	Bicuspid root canal, excluding final restoration	\$1175	\$546	54%
D3330	Molar root canal, excluding final restoration	\$1400	\$688	51%
D3331	Treatment of root canal obstructions, non-surgical access	\$850	\$226	73%
D3332	Incomplete endo therapy, unrestorable tooth	\$620	\$226	64%

Periodontic Services (Performed by a General Dentist)

ADA Codes	Procedure Description	Average Price	Member's Price	Savings
D4210	Gingivectomy or gingivoplasty, 4 + bound teeth per quadrant	\$860	\$392	54%
D4211	Gingivectomy or gingivoplasty, 1 to 3 teeth	\$450	\$146	68%
D4263	Bone replacement, first site	\$950	\$244	74%
D4341	Periodontal scaling and root planing, 4+teeth per quadrant	\$350	\$148	58%
D4342	Periodontal scaling and root planing, 1 to 3 teeth	\$275	\$94	66%
D4355	Full mouth debridement to enable evaluation and diagnosis	\$250	\$148	41%
D4910	Periodontal maintenance	\$180	\$90	50%

Prosthodontic Services, Dentures, Partials, etc. (Performed by a General Dentist)

ADA Codes	Procedure Description	Average Price	Member's Price	Savings
D5110	Complete denture, upper	\$2400	\$978	59%
D5120	Complete denture, lower	\$2400	\$978	59%
D5130	Immediate denture, upper	\$2550	\$1048	59%
D5140	Immediate denture, lower	\$2550	\$1048	59%



D5211	Partial, upper, resin base	\$1900	\$934	51%
D5212	Partial, lower, resin base	\$1900	\$934	51%
D5410	Adjust complete denture, upper	\$125	\$52	58%
D5411	Adjust complete denture, lower	\$125	\$52	58%
D5421	Adjust partial denture, upper	\$125	\$52	58%
D5422	Adjust partial denture, lower	\$125	\$52	58%
D5510	Repair broken complete denture base	\$250	\$159	36%
D5520	Replace missing or broken teeth, complete denture	\$250	\$98	61%
D5630	Repair or replace broken clasp	\$350	\$149	57%
D5640	Replace broken teeth, per tooth	\$250	\$91	64%
D5650	Add tooth to existing partial denture	\$250	\$132	47%
D5660	Add clasp to existing partial denture	\$350	\$159	55%
D5710	Rebase, complete upper denture	\$650	\$388	40%
D5711	Rebase, complete lower denture	\$650	\$388	40%
D5720	Rebase, upper partial denture	\$650	\$388	40%
D5721	Rebase, lower partial denture	\$650	\$388	40%
D6740- D6999	Bridges/Retainer crown - porcelain/ceramic - and other procedures	Varies	30% Discount	30%

Implant Services (Performed by a General Dentist)

ADA Codes	Procedure Description	Average Price	Member's Price	Savings
D6010 - D6093	All procedures in the implant service section	\$3500 - \$6000	30% Discount	30%

Oral & Maxillofacial Surgery Services (Performed by a General Dentist)

ADA Codes	Procedure Description	Average Price	Member's Price	Savings
D7111	Extraction, coronal remnants, deciduous teeth	\$180	\$79	56%
D7140	Extraction, erupted tooth or exposed root	\$250	\$95	62%



D7210	Surgical extraction of erupted tooth requiring elevation	\$390	\$172	56%
D7220	Removal of impacted tooth, soft tissue	\$400	\$185	54%
D7230	Removal of impacted tooth, partially bony	\$525	\$259	51%
D7240	Removal of impacted tooth, completely bony	\$600	\$298	50%
D7241	Removal of impacted tooth - Complete bony with unusual surgical complications	\$750	\$388	48%
D7250	Surgical removal of residual tooth roots	\$325	\$162	50%
D7280	Surgical access of erupted tooth	\$700	\$362	48%
D7285	Biopsy of oral tissue (hard)	\$600	\$433	28%
D7286	Biopsy of oral tissue (soft)	\$450	\$248	45%

Orthodontics (Performed by a Specialist)

ADA Codes	Procedure Description	Average Price	Member's Price	Savings
D8080	Comprehensive orthodontic treatment of the adolescent dentition/braces or invisalign	\$5000 - \$6800	25% Discount	25%
D8090	Comprehensive orthodontic treatment of the adult dentition/braces or invisalign	\$5000 - \$6800	25% Discount	25%

Adjunctive General Services (Performed by a General Dentist)

ADA Codes	Procedure Description	Average Price	Member's Price	Savings
D9110	Palliative (emergency) treatment of dental pain	\$100	\$45	55%
D9230	Inhalation of nitrous oxide, analgesia, anxiolysis	\$115	\$45	61%
D9440	Emergency office visit, after regularly scheduled hours	\$200	\$59	71%
D9910	Application of desensitizing medicaments	\$90	\$25	72%
D9911	Application of desensitizing resin, per tooth	\$110	\$35	68%
D9940	Occlusal guards - full arch, hard appliance	\$900	\$485	46%
D9941	Fabrication of athletic mouthguard	\$375	\$98	74%
D9950	Occlusion analysis - mounted case	\$500	\$156	69%