	Avia Dental Plan- Schedule of Dental Fees-Plan	n 102	PLEASE CALL 1-888-431-2273
	Effective January 1, 2024		FOR MEMBER VERIFICATION
<u>Code</u>	<u>Procedure</u>	*National Average Fee	Avia Members Pay
	DIAGNOSTIC		
D0120	Periodic Oral Exam- Established Patient	\$70.00	\$18.00
D0140	Limited Oral Exam-Problem focused	\$101.00	\$25.00
D0150	Comprehensive Oral Exam- New or established patient	\$115.00	\$25.00
D0210	Full Mouth X-rays Intraoral-complete series, including bitewing	\$180.00	\$50.00
D0220	Intraoral-periapical-first film	\$40.00	\$13.00
D0230	Intraoral-periapical-each additional film	\$33.00	\$10.00
D0272	Bitewing X-rays-two films	\$60.00	\$17.00
D0273	Bitewing X-rays-three films	\$70.00	\$23.00
D0274	Bitewing X-rays-four films	\$85.00	\$27.00
D0330	Panoramic X-ray	\$155.00	\$48.00
	PREVENTIVE		
D1110	Prophylaxis-Adult Cleaning (includes scaling and polishing)	\$122.00	\$38.00
D1120	Prophylaxis Child Cleaning (includes scaling & polishing)	\$90.00	\$30.00
D1351	Sealant- per tooth	\$72.00	\$26.00
D1510	Space maintainer-fixed, unilateral-per quad	\$398.00	\$120.00
D1516	Space maintainer-fixed-bilateral, maxillary	\$525.00	\$190.00
	RESTORATIVE		
D2140	Amalgam-one surface, primary or permanent	\$194.00	\$50.00
D2150	Amalgam-two surfaces, primary or permanent	\$239.00	\$68.00
D2160	Amalgam-three surfaces, primary or permanent	\$290.00	\$78.00
D2161	Amalgam-four or more surfaces, primary or permanent	\$345.00	\$90.00
D2330	Resin-based composite-one surface. anterior	\$220.00	\$65.00
D2331	Resin-based composite-two surfaces, anterior	\$265.00	\$78.00
D2332	Resin -based composite-three surfaces, anterior	\$320.00	\$95.00
D2335	Resin-based composite- four or more surfaces-anterior	\$390.00	\$125.00
D2391	Resin-based composite-one surface-posterior	\$240.00	\$83.00
D2392	Resin- based composite-two surfaces-posterior	\$305.00	\$118.00
D2393	Resin- based composite-three surfaces-posterior	\$372.00	\$140.00
D2394	Resin- based composite-four or more surfaces-posterior	\$435.00	\$175.00
D2740	Crown-Porcelain/ Ceramic	\$1,495.00	\$595.00
D2750	Crown-porcelain fused to high noble metal	\$1,500.00	\$595.00
D2752	Crown-porcelain fused to noble metal	\$1,410.00	\$575.00
D2920	Recement or re-bond Crown	\$152.00	\$48.00
D2930	Crown-prefabricated stainless steel, primary	\$350.00	\$115.00
D2931	Crown-prefabricated stainless steel, permanent	\$414.00	\$135.00
D2940	Protective restoration	\$163.00	\$47.00
D2950	Core buildup, including pins	\$357.00	\$115.00
D2952	Post and core, in addition to crown, indirectly fabricated	\$506.00	\$180.00
D2954	Prefabricated post and core in addition to crown	\$432.00	\$145.00
	ENDODONTICS		
D3110	Pulp cap-direct (excluding final restoration)	\$112.00	\$28.00
D3120	Pulp cap-indirect(excluding final restoration)	\$112.00	\$28.00
D3220	Therapeutic pulpotomy (excluding final restoration)	\$267.00	\$65.00
D3310	Endodontic Therapy- Anterior Root Canal (excluding final restoration)	\$1,007.00	\$350.00
D3320	Endodontic Therapy- Premolar Root Canal (excluding final restoration)	\$1,154.00	\$420.00
D3330	Endodontic Therapy- Molar Root Canal (excluding final restoration)	\$1,415.00	\$535.00

	PERIODONTICS		
D4210	Gingivectomy or gingivoplasty-per quad	\$839.00	\$350.00
D4341	Periodontal scaling & Root planing-per quad	\$340.00	\$120.00
D4910	Periodontal maintenance	\$188.00	\$80.00
	PROSTHODONTICS		
D5110	Complete denture-Maxillary	\$2,297.00	\$750.00
D5120	Complete denture Mandibular	\$2,297.00	\$750.00
D5211	Partial denture-Maxillary-resin base	\$1,800.00	\$690.00
D5212	Partial denture -Mandibular- resin base	\$1,808.00	\$690.00
D5520	Replace missing or broken teeth (each tooth)	\$255.00	\$65.00
D5650	Add tooth to existing partial denture	\$297.00	\$70.00
D5660	Add clasp to existing partial denture	\$350.00	\$85.00
D5730	Reline complete Maxillary denture (chairside)	\$497.00	\$157.00
D5731	Reline complete Mandibular denture (chairside)	\$496.00	\$157.00
D5750	Reline complete Maxillary denture (lab)	\$610.00	\$200.00
D5751	Reline complete Mandibular denture (lab)	\$603.00	\$200.00
D6210	Pontic-cast high noble metal	\$1,450.00	\$530.00
D6240	Pontic-porcelain fused to high noble metal	\$1,458.00	\$530.00
D6750	Retainer Crown-porcelain fused to high noble metal	\$1,487.00	\$565.00
	ORAL AND MAXILLOFACIAL SURGERY		
D7140	Simple Extraction- erupted tooth or exposed root	\$250.00	\$63.00
D7210	Extraction, erupted tooth, requiring removal of bone	\$375.00	\$140.00
D7220	Removal of impacted tooth, soft tissue	\$413.00	\$145.00
D7230	Removal of impacted tooth, partially bony	\$534.00	\$180.00
D7240	Removal of impacted tooth, completely bony	\$645.00	\$250.00
D7250	Surgical Removal of residual tooth roots (cutting procedure)	\$396.00	\$138.00
D7310	Alveolplasty- in conjunction with extractions (per quad)	\$420.00	\$115.00
D7320	Alveolplasty- not in conjunction with extractions (per quad)	\$599.00	\$165.00
	ORTHODONTICS		
D8070	Comprehensive Orthodontic treatment of the transitional dentition	\$6,410.00	25% off normal fees
D8080	Comprehensive Orthodontic treatment of the adolescent dentition	\$6,125.00	25% off normal fees
D8090	Comprehensive Orthodontic treatment of the adult dentition	\$6,380.00	25% off normal fees
	GENERAL		
D9110	Pallative (emergency) treatment	\$170.00	\$42.00
D9215	Local Anesthesia	\$75.00	\$16.00
D9230	Analgesia-Nitrous oxide	\$100.00	\$27.00
Member is Dental Ge normal fe fees with prior notic treatment need to so dentist ar not quara Participati from any	ational Average Fees are based on the 80th percentile of the survey of despensible for all charges at the time of service. This entire fee schedule neral Dentists only. Cosmetic and any other procedures not listed are 25 e. Some fees may vary where unusual services and/or materials are required dentist prior to treatment. Lab fees are additional. Fees schedules are succeed to members. Be sure to verify that a dentist is a participating Avia procedure another participating provider. Any dental procedures performed by the charged dentist's normal fees. Not all types of dentists may be available intended the quality of service of the providers.  Ing Specialists do not charge according to this fee schedule. Avia Member participating specialists including Oral surgeons, Orthodontists, Periodonists, Prosthodontists and Endodontists will receive a 25% discount off the	le is for participating Avia 5% off the provider's uired. Please discuss all ubject to change without vider before seeking tist leaves plan, you will y a non participating e in your area. Avia does	
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