Schedule of benefits

Managed dental plan

For all full-time, salaried, employees of Truist Financial Corporation, located in California.

If this is an ERISA plan, you have certain rights under this plan. If the contract holder is a church group or a government group this may not apply. Please contact the contract holder for additional information.

Prepared for:

Contract holder: Truist Financial Corporation

Contract holder number: GP-0141938-CA

Schedule of benefits: 1A

Group agreement effective date: January 1, 2024

Plan name: Dental Maintenance Organization - California

Plan effective date: January 1, 2024
Plan issue date: December 21, 2023

Underwritten by Aetna Dental of California Inc. in the state of California



Schedule of benefits

This schedule of benefits lists the **eligible dental services**, office visit **copayments**, maximums, and any limits that apply to the services you get under this plan.

How to read your schedule of benefits

- When we say "in-network coverage" we mean that you get care from in-network providers.
- You must pay any office visit **copayment** and your part of the **copayment**.
- You must pay the full amount of any dental care services you get that is not a covered benefit.
- This plan also has limits for some **covered benefits**. For example, these could be visit limits. See later in this schedule of benefits for more information about limits.

Important note:

All **covered benefits** are subject to an office visit **copayment** and **copayment** unless otherwise noted in the schedule of benefits below.

Eligible dental services for **teledentistry** are paid the same as the **eligible dental service** that you get in person.

How to contact us for help

We are here to answer your questions:

- Register and log onto our self-service website available 24/7 at https://www.aetna.com/
- Call us at 1-877-238-6200

Aetna Dental of California Inc.'s group agreement provides the coverage described in this schedule of benefits. This schedule replaces any schedule of benefits previously in use. Keep it with your evidence of coverage (EOC).

General coverage provisions

This section explains the:

• Dental emergency services maximum

Dental emergency services maximum

The most the plan will pay for **eligible dental services** incurred by any one covered person for any one **dental emergency** is called the **dental emergency services maximum**.

Your financial responsibility and determination of benefits provisions

Your financial responsibility for the cost of services is based on when the service or supply is provided, not when payment is made. Benefits will be pro-rated to account for treatment that occurs in more than one **Calendar Year**. Determinations regarding when benefits are covered are subject to the terms and conditions of the EOC.

Plan features

Other charges In-network plan features

Expense	Copayment
Office visit	\$0 per visit

Expense	Copayment
Comprehensive orthodontic treatment	\$2,800
of adolescent and adult dentition	\$2,000

Maximums	Amounts
Dental emergency services maximum	\$100

Eligible dental services

In-network coverage

This dental care schedule applies to **eligible dental services** provided by **primary care dentists** (**PCDs**) and other **in-network providers** upon **referral** from your **PCD**. The plan covers only the **eligible dental services** listed below.

Eligible Dental Services	Limitations	Copayment Amounts
Periodic oral evaluation - established patient		\$0
Limited oral evaluation - problem focused		\$0
Oral evaluation for a patient under three	_	
years of age and counseling with a primary		
caregiver		\$0
Comprehensive oral evaluation – new or		
established patient	_	\$0
Detailed and extensive oral evaluation –		1.0
problem focused, by report	-	\$0
Re-evaluation - limited, problem focused		40
(established patient; not post-operative visit)	-	\$0
Comprehensive periodontal evaluation - new or established patient		\$0
Intraoral - complete series of radiographic		ŞU
images		\$0
Intraoral - periapical, first radiographic image		\$0
Intraoral - periapical, each additional		70
radiographic image		\$0
Intraoral - occlusal radiographic image		\$0
Extra-oral, first radiographic image		\$0
Extra-oral, posterior radiographic image		\$0
Bitewing - single radiographic image		\$0
Bitewings - 2 radiographic images		\$0
Bitewings - 3 radiographic images		\$0
Bitewings - 4 radiographic images		\$0
Vertical bitewings - 7 to 8 radiographic		-
images		\$0
Panoramic radiographic image		\$0
Interpretation of diagnostic image by a		
practitioner not associated with capture of		
the image, including report		\$0
Diagnostic casts		\$0
Accession of tissue, gross examination,		
preparation and transmission of written		
report		\$0

Accession of tissue, gross and microscopic		
examination, preparation and transmission of		
written report		\$0
Accession of tissue, gross and microscopic		
exam, including assessment of surgical		
margins for presence of disease, preparation		40
and transmission of written report		\$0
Prophylaxis – adult		\$0
Prophylaxis – child		\$0
Topical application of fluoride varnish if you		4 -
are under age 16		\$0
Topical application of fluoride- excluding		
varnish if you are under age 16		\$0
Oral hygiene instruction		\$0
Sealant - per tooth if you are under age 16	For permanent molars	\$0
Preventive resin restoration in a moderate to		
high risk caries patient – permanent tooth if		
you are under age 16		\$0
Sealant repair - per tooth, if you are under	For permanent molars	
age 16		\$0
Application of caries arresting medicament –		
per tooth if you are under age 16		\$0
Caries preventive medicament application -		
per tooth if you are under age 16		\$0
Space maintainer - fixed - unilateral - per	Only when needed to preserve	
quadrant	space resulting from premature	
	loss of deciduous teeth; includes all	
	adjustments within 6 months after	
	installation	\$0
Space maintainer – fixed – bilateral, maxillary	Only when needed to preserve	
	space resulting from premature	
	loss of deciduous teeth; includes all	
	adjustments within 6 months after	4.0
	installation	\$0
Space maintainer – fixed – bilateral,	Only when needed to preserve	
mandibular	space resulting from premature	
	loss of deciduous teeth; includes all	
	adjustments within 6 months after installation	60
Space maintainer, removable wellsterel		\$0
Space maintainer - removable - unilateral -	Only when needed to preserve	
per quadrant	space resulting from premature loss of deciduous teeth; includes all	
	adjustments within 6 months after	
	installation	\$0
Space maintainer – removable – bilateral,	Only when needed to preserve	70
maxillary	space resulting from premature	
THANHAI Y	Space resulting from premature	
	loss of deciduous teeth; includes all	
		\$0

Space maintainer – removable – bilateral, mandibular	Only when needed to preserve space resulting from premature loss of deciduous teeth; includes all adjustments within 6 months after installation	\$0
Re-cement or re-bond bilateral space		
maintainer – maxillary		\$12
Re-cement or re-bond bilateral space		
maintainer – mandibular		\$12
Re-cement or re-bond unilateral space		66
maintainer - per quadrant		\$6
Removal of fixed unilateral space maintainer - per quadrant		\$6
Removal of fixed bilateral space maintainer –		30
maxillary		\$12
Removal of fixed bilateral space maintainer –		712
mandibular		\$12
Distal shoe space maintainer– fixed –		
unilateral - per quadrant		\$0
Amalgam – 1 surface, primary or permanent		\$0
Amalgam – 2 surfaces, primary or permanent		\$0
Amalgam – 3 surfaces, primary or permanent		\$0
Amalgam – 4+ surfaces, primary or		
permanent		\$0
Resin-based composite – 1 surface, anterior		\$0
Resin-based composite – 2 surfaces, anterior		\$0
Resin-based composite – 3 surfaces, anterior		\$0
Resin-based composite – 4+ surfaces or		
involving incisal angle, anterior		\$40
Resin-based composite crown, anterior		\$40
Resin-based composite – 1 surface, posterior		\$35
Resin-based composite – 2 surfaces, posterior		\$45
Resin-based composite – 3 surfaces, posterior		\$55
Resin-based composite – 4+ surfaces, posterior		\$75
Inlay – metallic - 1 surface		\$190
Inlay – metallic - 2 surfaces		\$190
Inlay – metallic - 3 or more surfaces		\$190
Onlay – metallic - 2 surfaces		\$200
Onlay – metallic - 3 surfaces		\$200
Onlay - metallic – 4 or more surfaces		\$200
Inlay, porcelain/ceramic – 1 surface		\$190
Inlay, porcelain/ceramic – 1 surfaces		·
Inlay, porcelain/ceramic – 2 surfaces		\$190
		\$190
Onlay, porcelain/ceramic – 2 surfaces		\$200
Onlay, porcelain/ceramic – 3 surfaces		\$200

Onlaw manadain/aanamia Alan mana	
Onlay, porcelain/ceramic – 4 or more surfaces	\$200
Inlay, resin based composite – 1 surface	\$190
Inlay, resin based composite – 2 surfaces	\$190
Inlay, resin based composite – 3 or more surfaces	\$190
Onlay, resin based composite – 2 surfaces	\$200
Onlay, resin based composite – 3 surfaces	\$200
Onlay, resin based composite – 4 or more	
surfaces	\$200
Crown – resin-based composite, indirect	\$225
Crown – 3/4 resin-based composite, indirect	\$180
Crown – resin with high noble metal	\$225
Crown – resin with predominantly base metal	\$225
Crown – resin with noble metal	\$225
Crown – porcelain/ ceramic	\$225
Crown – porcelain fused to high noble metal	\$225
Crown – porcelain fused to predominantly	
base metal	\$225
Crown – porcelain fused to noble metal	\$225
Crown – porcelain fused to titanium and	
titanium alloys	\$225
Crown – 3/4 cast high noble metal	\$225
Crown – 3/4 cast predominantly base metal	\$225
Crown – 3/4 cast noble metal	\$225
Crown – 3/4 cast porcelain/ceramic	\$225
Crown – full cast high noble metal	\$225
Crown – full cast predominantly base metal	\$225
Crown – full cast noble metal	\$225
Crown – titanium and titanium alloys	\$225
Re-cement or re-bond inlay, onlay, veneer or	
partial coverage restoration	\$5
Re-cement or re-bond indirectly fabricated or	4-
prefabricated post and core	\$3
Re-cement or re-bond crown	\$5
Reattachment of tooth fragment, incisal edge	
or cusp Prefabricated porcelain/ceramic crown –	\$4
primary tooth	\$0
Prefabricated stainless steel crown – primary	, yo
tooth	\$0
Prefabricated stainless steel crown -	
permanent tooth	\$40
Prefabricated esthetic coated stainless steel	
crown – primary tooth	\$0
Protective restoration	\$0

Into vivo the vego position and to realize a series and		
Interim therapeutic restoration – primary dentition		\$0
		\$0
Core buildup, including any pins when required		\$60
Pin retention – per tooth, in addition to		300
restoration		\$10
Post & core in addition to crown, indirectly		310
fabricated		\$80
Resin infiltration of incipient smooth surface	1 application every 3 years	700
lesions if you are under age 16	2 application every 3 years	\$0
Pulp cap – direct (excluding final restoration)		\$0
Pulp cap – indirect (excluding final		70
restoration)		\$0
Therapeutic pulpotomy (excluding final		70
restoration)		\$0
Pulpal debridement, primary and permanent		70
teeth		\$10
Partial pulpotomy for apexogenesis –		
permanent tooth with incomplete root		
development		\$0
Pulpal therapy (resorbable filling) – anterior,		
primary tooth (excluding final restoration)		\$0
Pulpal therapy (resorbable filling) – posterior,		
primary tooth (excluding final restoration)		\$0
Endodontic therapy, anterior tooth (excluding		
final restoration)		\$50
Endodontic therapy, premolar tooth		
(excluding final restoration)		\$70
Endodontic therapy, molar tooth (excluding		
final restoration)		\$175
Treatment of root canal obstruction; non-		
surgical access		\$50
Incomplete endodontic therapy; inoperable,		
unrestorable or fractured tooth		\$35
Internal root repair of perforation defects		\$40
Retreatment of previous root canal therapy –		
anterior		\$150
Retreatment of previous root canal therapy –		
premolar		\$170
Retreatment of previous root canal therapy –		
molar		\$275
Apicoectomy – anterior		\$65
Apicoectomy – premolar (first root)		\$65
Apicoectomy – molar (first root)		\$80
Apicoectomy – each additional root		\$40
Retrograde filling – per root		\$20
Root amputation – per root		\$60
Surgical repair of root resorption - anterior		\$29
0p		Y_3

Surgical repair of root resorption – premolar		\$39
Surgical repair of root resorption – molar		\$49
Surgical exposure of root surface without		
apicoectomy or repair of root resorption –		
anterior		\$54
Surgical exposure of root surface without		
apicoectomy or repair of root resorption –		
premolar		\$72
Surgical exposure of root surface without		
apicoectomy or repair of root resorption –		
molar		\$90
Gingivectomy or gingivoplasty – 4 or more	1 per quadrant every 3 years	
contiguous teeth or tooth bounded spaces		4
per quadrant		\$100
Gingivectomy or gingivoplasty – 1-3	1 per quadrant every 3 years	
contiguous teeth or tooth bounded spaces		¢20
per quadrant	1	\$30
Gingivectomy or gingivoplasty to allow access	1 per quadrant every 3 years	¢12
for restorative procedure, per tooth	1 nor guadrant avery 2 years	\$12
Gingival flap procedure, including root planing – 4 or more contiguous teeth or tooth	1 per quadrant every 3 years	
bounded spaces per quadrant		\$110
Gingival flap procedure, including root	1 per quadrant every 3 years	7110
planing – 1-3 contiguous teeth or tooth	i per quadrant every 5 years	
bounded spaces per quadrant		\$66
Apically positioned flap		\$90
Clinical crown lengthening – hard tissue		\$150
Osseous surgery (including elevation of a full	1 per quadrant every 3 years	7130
thickness flap and closure) – four or more	i per quadrant every 5 years	
contiguous teeth or tooth bounded spaces		
per quadrant		\$250
Osseous surgery (including elevation of a full	1 per quadrant every 3 years	
thickness flap and closure) – one to three		
contiguous teeth or tooth bounded spaces		
per quadrant		\$150
Surgical revision procedure, per tooth		\$100
Pedicle soft tissue graft procedure		\$190
Autogenous connective tissue graft		,
procedure (including donor and recipient		
surgical sites) first tooth, implant or		
edentulous tooth position		\$115
Non-autogenous connective tissue graft		
(including recipient site and donor material)		
first tooth, implant, or edentulous tooth		
position in graft		\$230
Combined connective tissue and pedicle		
graft, per tooth		\$190

Free soft tissue graft procedure (including		
recipient and donor surgical sites) first tooth,		
implant, or edentulous tooth position in graft		\$82
Free soft tissue graft procedure (including		
recipient and donor surgical sites) each		
additional contiguous tooth, implant, or		
edentulous tooth position in same graft site		\$41
Autogenous connective tissue graft		
procedure (including donor and recipient		
surgical sites) – each additional contiguous		
tooth, implant or edentulous tooth position		
in same graft site		\$63
Non-autogenous connective tissue graft		
procedure (including recipient surgical site		
and donor material) – each additional		
contiguous tooth, implant or edentulous		
tooth position in same graft site		\$127
Periodontal scaling and root planing, 4 or	4 separate quadrants every 2 years	
more teeth per quadrant		\$50
Periodontal scaling and root planing – 1-3	4 per site every 2 years	
teeth per quadrant		\$30
Scaling in presence of generalized moderate	2 treatments per year	
or severe gingival inflammation – full mouth,		
after oral evaluation		\$30
Full mouth debridement to enable a	1 per lifetime	
comprehensive oral evaluation and diagnosis		
on a subsequent visit		\$60
Periodontal maintenance following active	2 per year	
therapy		\$30
Unscheduled dressing change (by someone		
other than treating dentist or their staff)		\$10
Complete denture – maxillary	Relines/rebases/adjustments are	
	not separately eligible within 6	
	months of placement of the	
	denture	\$275
Complete denture – mandibular	Relines/rebases/adjustments are	
	not separately eligible within 6	
	months of placement of the	
	denture	\$275
Immediate denture – maxillary	Relines/rebases are separately	
	eligible within 6 months of	
	placement of the immediate	
	denture	\$325
Immediate denture – mandibular	Relines/rebases are separately	
	eligible within 6 months of	
	placement of the immediate	
	denture	\$325

Maxillany partial depture recip base	Polinos/robasos/adjustments are	
Maxillary partial denture – resin base	Relines/rebases/adjustments are	
(including retentive/clasping materials, rests	not separately eligible within 6	
and teeth)	months of placement of the	40
	denture	\$275
Mandibular partial denture – resin base	Relines/rebases/adjustments are	
(including retentive/clasping materials, rests	not separately eligible within 6	
and teeth)	months of placement of the	
	denture	\$275
Maxillary partial denture – cast metal	Relines/rebases/adjustments are	
framework with resin denture bases	not separately eligible within 6	
(including retentive/clasping materials, rests	months of placement of the	
and teeth)	denture	\$325
Mandibular partial denture – cast metal	Relines/rebases/adjustments are	
framework with resin denture bases	not separately eligible within 6	
(including retentive/clasping materials, rests	months of placement of the	
and teeth)	denture	\$325
Immediate maxillary partial denture – resin	Relines/rebases are separately	7020
base (including retentive/clasping materials,	eligible within 6 months of	
rests and teeth)	placement of the immediate	
lests and teeting	1 -	¢216
The second state of the se	denture	\$316
Immediate mandibular partial denture – resin	Relines/rebases are separately	
base (including retentive/clasping materials,	eligible within 6 months of	
rests and teeth)	placement of the immediate	
	denture	\$316
Immediate maxillary partial denture – cast	Relines/rebases are separately	
metal framework with resin denture bases	eligible within 6 months of	
(including retentive/clasping materials, rests	placement of the immediate	
and teeth)	denture	\$374
Immediate mandibular partial denture – cast	Relines/rebases are separately	
metal framework with resin denture bases	eligible within 6 months of	
(including retentive/clasping materials, rests	placement of the immediate	
and teeth)	denture	\$374
Maxillary partial denture – flexible base	Relines/rebases/adjustments are	
(including any clasps, rests and teeth)	not separately eligible within 6	
(months of placement of the	
	denture	\$330
Mandibular partial denture – flexible base	Relines/rebases/adjustments are	,
(including any clasps, rests and teeth)	not separately eligible within 6	
including any clusps, rests and teeting	months of placement of the	
	denture	\$330
Immediate mavillary partial dentura flavible		333U
Immediate maxillary partial denture - flexible	Relines/rebases are separately	
base (including any clasps, rests and teeth)	eligible within 6 months of	
	placement of the immediate	6220
	denture	\$330
Immediate mandibular partial denture -	Relines/rebases are separately	
flexible base (including any clasps, rests and	eligible within 6 months of	
teeth)	placement of the immediate	
	denture	\$330

remitovator inimitar partial denture one piece cast metal (including retentive/clasping materials, rests, and teeth), maxillary Removable unilateral partial denture one piece cast metal (including retentive/clasping materials, rests, and teeth), maxillary Removable unilateral partial denture – one-piece cast metal (including retentive/clasping materials, rests, and teeth), mandibular Removable unilateral partial denture – one-piece flexible base (including retentive/clasping materials, rests, and teeth) – per quadrant Removable unilateral partial denture – one-piece resin (including retentive/clasping materials, rests, and teeth) – per quadrant Adjust complete denture – maxillary Adjust complete denture – maxillary Adjust complete denture – maxillary Adjust partial denture – maxillary Adjust partial denture – maxillary Includes all adjustments within 6 months after insertion Adjust partial denture – maxillary Includes all adjustments within 6 months after insertion Adjust partial denture – maxillary Adjust partial denture – maxillary Includes all adjustments within 6 months after insertion S10 Adjust partial denture – maxillary Adjust partial denture – maxillary Includes all adjustments within 6 months after insertion S10 Adjust partial denture – maxillary Repair broken complete denture base, maxillary Repair broken complete denture base, maxillary Repair resin partial denture base, maxillary Repair resin partial denture base, maxillary Repair cast partial framework, maxillary Repair cast partial denture – per tooth Add clasp to existing partial denture – per tooth Rebase complete maxillary denture Includes all adjustments within 6 months after insertion Includes all adjustments within 6 months after insertion S100 Rebase complete maxillary denture Includes all adjustment	Demovable unilatoral partial denture and	Dolines/rehases/adjustments are	
materials, rests, and teeth), maxillary Removable unilateral partial denture one piece cast metal (including retentive/clasping materials, rests, and teeth), mandibular denture one piece flexible base (including retentive/clasping materials, rests, and teeth), mandibular denture one-piece flexible base (including retentive/clasping materials, rests, and teeth) – per quadrant Removable unilateral partial denture – one-piece flexible base (including retentive/clasping materials, rests, and teeth) – per quadrant Removable unilateral partial denture – one-piece resin (including retentive/clasping materials, rests, and teeth) – per quadrant Adjust complete denture – maxillary Adjust complete denture – mandibular Adjust partial denture – mandibular Aliques all adjustments within 6 months after insertion Includes all adjustments within 6 months after insertion \$10 Adjust partial denture – mandibular Adjust partial denture – mandibular Repair broker complete denture base, maxillary Repair broken complete denture base, maxillary Repair resin partial denture base, mandibular Repair resin partial fenture base, mandibular Repair resin partial fenture base, mandibular Repair or replace broken retentive/clasping materials - per tooth Repair or replace broken retentive/clasping materials - per tooth \$35 Repair cast partial framework, maxillary \$35 Repair cast partial framework, maxillary \$35 Repair cast partial fenture base, maxillary \$35 Repair cast partial framework, maxillary \$35 Repair cast partial framework maxillary \$35 Re	Removable unilateral partial denture one	Relines/rebases/adjustments are	
denture Relines/rebases/adjustments are not separately eligible within 6 months of placement of the denture \$275			
Removable unilateral partial denture one piece cast metal (including retentive/clasping materials, rests, and teeth), mandibular on this of placement of the denture prevails be base (including retentive/clasping materials, rests, and teeth) per quadrant or separately eligible within 6 months of placement of the denture prevails partial denture prevails prevails partial denture prevails p	materials, rests, and teetin, maximary		¢275
piece cast metal (including retentive/clasping materials, rests, and teeth), mandibular denture — systs, and teeth), mandibular denture — systs, and teeth), mandibular denture — one-piece flexible base (including retentive/clasping materials, rests, and teeth) — per quadrant denture — one-piece resin (including retentive/clasping materials, rests, and teeth) — per quadrant denture — one-piece resin (including retentive/clasping materials, rests, and teeth) — per quadrant denture — one-piece resin (including retentive/clasping materials, rests, and teeth) — per quadrant denture — maxillary denture base, mandibular denture base, mandibular denture base, maxillary denture (each tooth) denture base, maxillary denture denture base, maxillary denture denture base, maxillary denture denture denture denture denture base, maxillary denture denture denture denture denture denture base, maxillary denture	Pamayahla unilatoral partial dentura ana		\$275
materials, rests, and teeth), mandibular Removable unilateral partial denture – one- piece flexible base (including retentive/clasping materials, rests, and teeth) — per quadrant denture — one- piece resin (including retentive/clasping materials, rests, and teeth) — per quadrant denture — one- piece resin (including retentive/clasping materials, rests, and teeth) — per quadrant denture — maxillary Adjust complete denture — maxillary Adjust complete denture — mandibular denture — maxillary Adjust partial denture — mandibular denture denture denture size in sertion lincludes all adjustments within 6 months after insertion size in sertion size in se	•		
denture \$275 Relines/rebases/adjustments are piece flexible base (including retentive/clasping materials, rests, and teeth) per quadrant Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since parately eligible within 6 months of placement of the denture Since par	, , , , , , , , , , , , , , , , , , , ,	, , ,	
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piece flexible base (including retentive/clasping materials, rests, and teeth) - per quadrant	Pomovable unilatoral partial denture - one		\$273
retentive/clasping materials, rests, and teeth)	•		
regrouped a complete denture — one- piece resin (including retentive/clasping materials, rests, and teeth) — per quadrant denture — one- piece resin (including retentive/clasping materials, rests, and teeth) — per quadrant denture — maxillary denture — maxillary lincludes all adjustments within 6 months after insertion solution includes all adjustments within 6 months after insertion solution includes all adjustments within 6 months after insertion solution includes all adjustments within 6 months after insertion solution includes all adjustments within 6 months after insertion solution includes all adjustments within 6 months after insertion solution includes all adjustments within 6 months after insertion solution includes all adjustments within 6 months after insertion solution includes all adjustments within 6 months after insertion solution includes all adjustments within 6 months after insertion solution solution includes all adjustments within 6 months after insertion solution solution includes all adjustments within 6 months after insertion solution solution includes all adjustments within 6 months after insertion solution solution includes all adjustments within 6 months after insertion solution solution includes all adjustments within 6 months after insertion solution solution includes all adjustments within 6 months after insertion solution solution includes all adjustments are partial solution includes all adjustments are partial solution includes all adjustments within 6 months after insertion solution s	1.	1	
Removable unilateral partial denture – one- piece resin (including retentive/clasping materials, rests, and teeth) – per quadrant Adjust complete denture – maxillary Adjust complete denture – maxillary Adjust complete denture – maxillary Includes all adjustments within 6 months after insertion Adjust partial denture – maxillary Includes all adjustments within 6 months after insertion S10 Adjust partial denture – maxillary Includes all adjustments within 6 months after insertion S10 Adjust partial denture – mandibular Includes all adjustments within 6 months after insertion S10 Repair broker complete denture base, mandibular Repair broker complete denture base, mandibular Repair resin partial framework, mandibular Repair cast partial framework, mandibular Repair cast partial framework, maxillary Repair or replace broken retentive/clasping materials - per tooth Add tooth to existing partial denture Add clasp to existing partial denture - per tooth Add clasp to existing partial denture - per tooth Replace all teeth and acrylic on cast metal framework - maxillary Replace all teeth and acrylic on cast metal framework - maxillary Replace all teeth and acrylic on cast metal framework - mandibular Rebase complete mandibular denture Includes all adjustments within 6 months after insertion S10 Relace all delicent mandibular Rebase complete mandibular denture Includes all adjustments within 6 months after insertion S10 Rebase complete mandibular denture		·	\$165
piece resin (including retentive/clasping materials, rests, and teeth) – per quadrant denture Adjust complete denture – maxillary Adjust complete denture – maxillary Adjust complete denture – maxillary Includes all adjustments within 6 months after insertion Adjust partial denture – maxillary Includes all adjustments within 6 months after insertion Adjust partial denture – maxillary Includes all adjustments within 6 months after insertion Adjust partial denture – mandibular Includes all adjustments within 6 months after insertion \$10 Adjust partial denture – mandibular Includes all adjustments within 6 months after insertion \$10 Repair broker complete denture base, mandibular Repair broken complete denture base, maxillary Repair resin partial denture base, mandibular Repair resin partial denture base, mandibular Repair resin partial denture base, maxillary Repair cast partial framework, mandibular Repair cast partial framework, maxillary Repair or replace broken retentive/clasping materials – per tooth Replace broken teeth – per tooth Add tooth to existing partial denture Add clasp to existing partial denture – per tooth Replace all teeth and acrylic on cast metal framework – maxillary Replace all teeth and acrylic on cast metal framework – maxillary Replace all teeth and acrylic on cast metal framework – mandibular Rebase complete maxillary denture Includes all adjustments within 6 months after insertion			\$103
materials, rests, and teeth) – per quadrant Adjust complete denture – maxillary Adjust complete denture – maxillary Adjust complete denture – mandibular Adjust partial denture – maxillary Adjust partial denture – maxillary Adjust partial denture – mandibular Includes all adjustments within 6 months after insertion Adjust partial denture – mandibular Includes all adjustments within 6 months after insertion \$10 Adjust partial denture – mandibular Includes all adjustments within 6 months after insertion \$10 Repair broker complete denture base, mandibular Repair broker complete denture base, maxillary \$30 Replace missing or broken teeth – complete denture (each tooth) \$35 Repair resin partial denture base, mandibular Repair resin partial denture base, maxillary Repair cast partial framework, mandibular Repair cast partial framework, mandibular Repair cast partial framework, maxillary Repair cast portentive/clasping materials – per tooth Add clasp to existing partial denture Includes all adjustments within 6 months after insertion \$10 Rebase complete maxillary denture Includes all adjustments within 6 months after insertion \$10 Includes all adjustments within 6 months after insertion \$10 Includes all adjustments within 6 months after insertion \$10 Includes all adjustments within 6 Includes all adjustments within 6	•		
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Adjust complete denture – mandibular Includes all adjustments within 6 months after insertion \$10 Adjust partial denture – maxillary Includes all adjustments within 6 months after insertion \$10 Adjust partial denture – mandibular Includes all adjustments within 6 months after insertion \$10 Repair broker complete denture base, mandibular \$30 Repair broken complete denture base, maxillary \$30 Replace missing or broken teeth – complete denture (each tooth) \$35 Repair resin partial denture base, maxillary \$35 Repair cast partial framework, mandibular \$35 Repair cast partial framework, maxillary \$35 Repair or replace broken retentive/clasping materials - per tooth \$35 Add tooth to existing partial denture - per tooth \$40 Add clasp to existing partial denture - per tooth \$40 Replace all teeth and acrylic on cast metal framework - maxillary \$100 Rebase complete maxillary denture Includes all adjustments within 6 months after insertion \$100 Stock and dispustments within 6 months after insertion \$100 Stock and dispustments within 6 months after insertion \$100 Stock and dispustments within 6 months after insertion \$100 Stock and dispustments within 6 months after insertion \$100 Stock and dispustments within 6	Adjust complete denture – mavillary		7130
Adjust complete denture – mandibular Includes all adjustments within 6 months after insertion \$10 Adjust partial denture – maxillary Includes all adjustments within 6 months after insertion \$10 Adjust partial denture – mandibular Includes all adjustments within 6 months after insertion \$10 Repair broker complete denture base, mandibular \$30 Repair broken complete denture base, maxillary \$30 Repair broken complete denture base, maxillary \$35 Repair resin partial denture base, mandibular \$35 Repair resin partial denture base, mandibular \$35 Repair resin partial framework, mandibular \$35 Repair cast partial framework, maxillary \$35 Repair or replace broken retentive/clasping materials – per tooth \$35 Add tooth to existing partial denture — per tooth \$40 Add clasp to existing partial denture — per tooth \$40 Replace all teeth and acrylic on cast metal framework - maxillary denture Includes all adjustments within 6 months after insertion \$100 Rebase complete maxillary denture Includes all adjustments within 6	Aujust complete dentale – maxillary	_	\$10
Adjust partial denture – maxillary Includes all adjustments within 6 months after insertion Adjust partial denture – mandibular Adjust partial denture – mandibular Includes all adjustments within 6 months after insertion Repair broker complete denture base, mandibular Repair broken complete denture base, maxillary Replace missing or broken teeth – complete denture (each tooth) Repair resin partial denture base, mandibular Repair resin partial denture base, maxillary Repair cast partial framework, mandibular Repair cast partial framework, mandibular Repair or replace broken retentive/clasping materials – per tooth Add tooth to existing partial denture Add clasp to existing partial denture – per tooth Replace all teeth and acrylic on cast metal framework – maxillary Repair cast partial teeth and acrylic on cast metal framework – maxillary Replace all teeth and acrylic on cast metal framework – mandibular Rebase complete maxillary denture Includes all adjustments within 6 months after insertion S100 Rebase complete mandibular denture	Adjust complete denture – mandibular		710
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Adjust partial denture – mandibular Includes all adjustments within 6 months after insertion \$10 Repair broker complete denture base, mandibular \$30 Repair broken complete denture base, maxillary \$30 Replace missing or broken teeth – complete denture base, maxillary \$35 Repair resin partial denture base, mandibular \$35 Repair resin partial denture base, maxillary \$35 Repair cast partial framework, mandibular \$35 Repair cast partial framework, maxillary \$35 Repair or replace broken retentive/clasping materials – per tooth \$35 Add tooth to existing partial denture \$35 Add tooth to existing partial denture — per tooth \$40 Replace all teeth and acrylic on cast metal framework – maxillary \$100 Rebase complete maxillary denture Includes all adjustments within 6 months after insertion \$100	Adjust partial denture – mavillary		710
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Replace broken teeth – per tooth Add tooth to existing partial denture Add clasp to existing partial denture - per tooth Replace all teeth and acrylic on cast metal framework - maxillary Replace all teeth and acrylic on cast metal framework - mandibular Rebase complete maxillary denture Rebase complete mandibular denture Rebase complete mandibular denture Includes all adjustments within 6 months after insertion \$100			1
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Replace all teeth and acrylic on cast metal framework - maxillary \$100 Replace all teeth and acrylic on cast metal framework - mandibular \$100 Rebase complete maxillary denture Includes all adjustments within 6 months after insertion \$100 Rebase complete mandibular denture Includes all adjustments within 6	Add clasp to existing partial denture - per		
framework - maxillary \$100 Replace all teeth and acrylic on cast metal framework - mandibular \$100 Rebase complete maxillary denture Includes all adjustments within 6 months after insertion \$100 Rebase complete mandibular denture Includes all adjustments within 6	tooth		\$40
Replace all teeth and acrylic on cast metal framework - mandibular \$100 Rebase complete maxillary denture Includes all adjustments within 6 months after insertion \$100 Rebase complete mandibular denture Includes all adjustments within 6	Replace all teeth and acrylic on cast metal		
framework - mandibular \$100 Rebase complete maxillary denture Includes all adjustments within 6 months after insertion \$100 Rebase complete mandibular denture Includes all adjustments within 6	framework - maxillary		\$100
Rebase complete maxillary denture Includes all adjustments within 6 months after insertion \$100 Rebase complete mandibular denture Includes all adjustments within 6	Replace all teeth and acrylic on cast metal		
months after insertion \$100 Rebase complete mandibular denture Includes all adjustments within 6	framework - mandibular		\$100
Rebase complete mandibular denture Includes all adjustments within 6	Rebase complete maxillary denture	-	
·		months after insertion	\$100
months after insertion \$100	Rebase complete mandibular denture	1	
		months after insertion	\$100

Rebase maxillary partial denture	Includes all adjustments within 6	4.00
	months after insertion	\$100
Rebase mandibular partial denture	Includes all adjustments within 6	4
	months after insertion	\$100
Rebase hybrid prosthesis	Includes all adjustments within 6	
	months after insertion	\$100
Reline complete maxillary denture (direct)	Includes all adjustments within 6	
	months after insertion	\$40
Reline complete mandibular denture (direct)	Includes all adjustments within 6	
	months after insertion	\$40
Reline maxillary partial denture (direct)	Includes all adjustments within 6	
	months after insertion	\$40
Reline mandibular partial denture (direct)	Includes all adjustments within 6	
	months after insertion	\$40
Reline complete maxillary denture (indirect)	Includes all adjustments within 6	
	months after insertion	\$90
Reline complete mandibular denture	Includes all adjustments within 6	
(indirect)	months after insertion	\$90
Reline maxillary partial denture (indirect)	Includes all adjustments within 6	
	months after insertion	\$90
Reline mandibular partial denture (indirect)	Includes all adjustments within 6	·
	months after insertion	\$90
Soft liner for complete or partial removable		•
denture – indirect		\$90
Interim partial denture (including	Included in permanent	·
retentive/clasping materials, rests and teeth),		
maxillary		\$90
Interim partial denture (including	Included in permanent	·
retentive/clasping materials, rests and teeth),	·	
mandibular		\$90
Tissue conditioning, maxillary	Inclusive with prosthesis within 6	
3, 1	months after insertion	\$40
Tissue conditioning, mandibular	Inclusive with prosthesis within 6	
, manufacture, man	months after insertion	\$40
Add metal substructure to acrylic full denture		7
(per arch)		\$30
Abutment supported porcelain/ceramic		750
crown		\$225
Abutment supported porcelain fused to		7
metal crown (high noble metal)		\$225
Abutment supported porcelain fused to		7223
metal crown (predominantly base metal)		\$225
Abutment supported porcelain fused to		7223
metal crown (noble metal)		\$225
Abutment supported cast metal crown (high		<i>پددی</i>
noble metal)		\$225
-		3223
Abutment supported cast metal crown		\$225
(predominantly base metal)		ک کک

Abutment supported cast metal crown (noble	
metal)	\$225
Implant supported porcelain/ceramic crown	
	\$225
Implant supported porcelain fused to metal crown (titanium, titanium alloy or high noble	
metal)	\$225
Implant supported metal crown (titanium,	\$223
titanium alloy or high noble metal)	\$225
Abutment supported retainer for	7223
porcelain/ceramic FPD	\$225
Abutment supported retainer for porcelain	7223
fused to metal FPD (high noble metal)	\$225
Abutment supported retainer for porcelain	, , , , , , , , , , , , , , , , , , ,
fused to metal FPD (predominantly base	
metal)	\$225
Abutment supported retainer for porcelain	
fused to metal FPD (noble metal)	\$225
Abutment supported retainer for cast metal	
FPD (high noble metal)	\$225
Abutment supported retainer for cast metal	
FPD (predominantly base metal)	\$225
Abutment supported retainer for cast metal	
FPD (noble metal)	\$225
Implant supported retainer for ceramic FPD	\$225
Implant supported retainer for porcelain	
fused to metal FPD (titanium, titanium alloy	
or high noble metal)	\$225
Implant supported retainer for cast metal	
FPD (titanium, titanium alloy or high noble	
metal)	\$225
Implant supported crown – porcelain fused to	
predominantly base alloys	\$225
Implant supported crown – porcelain fused to	
noble alloys	\$225
Implant supported crown – porcelain fused to	¢225
titanium and titanium alloys	\$225
Implant supported crown – predominantly base alloys	Ċaae
Implant supported crown – noble alloys	\$225
	\$225
Implant supported crown – titanium and titanium alloys	\$225
Abutment supported crown (titanium)	
	\$225
Abutment supported crown – porcelain fused	, care
to titanium and titanium alloys	\$225
Implant supported retainer – porcelain fused to predominantly base alloys	\$225
Implant supported retainer for FPD –	\$225
porcelain fused to noble alloys	\$225
porceiani rasca to noble anoys	7223

Implant /abutment supported removable	
denture for edentulous arch – maxillary	\$275
Implant /abutment supported removable	4
denture for edentulous arch – mandibular	\$275
Implant /abutment supported removable	
denture for partially edentulous arch –	
maxillary	\$275
Implant /abutment supported removable	
denture for partially edentulous arch –	4
mandibular	\$275
Implant /abutment supported fixed denture	1
for edentulous arch – maxillary	\$275
Implant /abutment supported fixed denture	4
for edentulous arch – mandibular	\$275
Implant /abutment supported fixed denture	
for partially edentulous arch – maxillary	\$275
Implant /abutment supported fixed denture	
for partially edentulous arch – mandibular	\$275
Implant supported retainer – porcelain fused	1
to titanium and titanium alloys	\$225
Implant supported retainer for metal FPD –	4000
predominantly base alloys	\$225
Implant supported retainer for metal FPD –	4000
noble alloys	\$225
Implant supported retainer for metal FPD –	4000
titanium and titanium alloys	\$225
Abutment supported retainer - porcelain	4000
fused to titanium and titanium alloys	\$225
Replacement of restorative material used to	
close an access opening of a screw-retained	425
implant supported prosthesis, per implant	\$35
Pontic – indirect resin based composite	\$225
Pontic – cast high noble metal	\$225
Pontic – cast predominantly base metal	\$225
Pontic – cast noble metal	\$225
Pontic - titanium	\$225
Pontic – porcelain fused to high noble metal	\$225
Pontic – porcelain fused to predominantly	, V-2-3
base metal	\$225
Pontic – porcelain fused to noble metal	\$225
Pontic – porcelain fused to titanium and	7223
titanium alloys	\$225
Pontic – porcelain/ceramic	-
	\$225
Pontic – resin with high noble metal	\$225
Pontic – resin with predominantly base metal	\$225
Pontic – resin with noble metal	\$225
Retainer – cast metal for resin-bonded fixed	
prosthesis	\$190

Retainer inlay – porcelain/ceramic, 2 surfaces Retainer inlay – porcelain/ceramic, 3 or more surfaces Retainer inlay – porcelain/ceramic, 3 or more surfaces Retainer inlay – porcelain/ceramic, 3 or more surfaces Retainer inlay – cast high noble metal, 2 surfaces Retainer inlay – cast high noble metal, 3 or more surfaces Retainer inlay – cast predominantly base metal, 2 surfaces Retainer inlay – cast predominantly base metal, 3 or more surfaces Retainer inlay – cast predominantly base metal, 3 or more surfaces Retainer inlay – cast noble metal, 2 surfaces Retainer inlay – cast noble metal, 2 surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – porcelain/ceramic, 2 surfaces Retainer onlay – porcelain/ceramic, 3 or more surfaces Retainer onlay – cast high noble metal, 2 surfaces Retainer onlay – cast high noble metal, 3 or more surfaces Retainer onlay – cast high noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast predominantly base metal, 2 surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces S220 Retainer onlay – cast noble metal, 3 or more surfaces S220 Retainer onlay – cast noble metal, 3 or more surfaces S220 Retainer onlay	Data to the control of the control	
Resin retainer – for resin bonded fixed prosthesis Retainer inlay – porcelain/ceramic, 2 surfaces Retainer inlay – porcelain/ceramic, 3 or more surfaces Retainer inlay – cast high noble metal, 2 surfaces Retainer inlay – cast high noble metal, 3 or more surfaces Retainer inlay – cast predominantly base metal, 2 surfaces Retainer inlay – cast predominantly base metal, 3 or more surfaces Retainer inlay – cast predominantly base metal, 3 or more surfaces Retainer inlay – cast noble metal, 2 surfaces Retainer inlay – cast noble metal, 3 or more surfaces Retainer inlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – porcelain/ceramic, 2 surfaces Retainer onlay – porcelain/ceramic, 3 or more surfaces Retainer onlay – porcelain/ceramic, 3 or more surfaces Retainer onlay – cast high noble metal, 2 surfaces Retainer onlay – cast high noble metal, 3 or more surfaces Retainer onlay – cast high noble metal, 3 or more surfaces Retainer onlay – cast predominantly base metal, 2 surfaces Retainer onlay – cast predominantly base metal, 3 or more surfaces Retainer onlay – cast predominantly base metal, 3 or more surfaces Retainer onlay – cast noble metal, 2 surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retainer onlay – cast noble metal, 3 or more surfaces Retaine	Retainer – porcelain/ceramic for resin-	\$190
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	metal	\$225

Retainer crown - porcelain fused to titanium and titanium alloys	\$225
Retainer crown – 3/4 cast high noble metal	\$225
Retainer crown – 3/4 cast predominantly	ζ225
base metal	\$225
Retainer crown – 3/4 cast noble metal	\$225
Retainer crown – 3/4 porcelain/ceramic	\$225
Retainer crown– 3/4 titanium and titanium	
alloys	\$225
Retainer crown – full cast high noble metal	\$225
Retainer crown – full cast predominantly	
base metal	\$225
Retainer crown – full cast noble metal	\$225
Retainer crown – titanium	\$225
Re-cement or re-bond fixed partial denture	\$15
Extraction, coronal remnants – primary tooth	\$0
Extraction, erupted tooth or exposed root	
(elevation and/or forceps removal)	\$0
Extraction, erupted tooth requiring removal	
of bone and/or sectioning of tooth and	
including elevation of mucoperiosteal flap if indicated	\$0
Removal of impacted tooth – soft tissue	\$0
Removal of impacted tooth – partially bony	\$45
Removal of impacted tooth – completely	343
bony	\$70
Removal of impacted tooth – completely	
bony, with unusual surgical complications	\$70
Removal of residual tooth roots (cutting	
procedure)	\$15
Coronectomy - intentional partial tooth	4
removal, impacted teeth only	\$35
Exposure of an unerupted tooth	\$26
Mobilization of erupted or malpositioned tooth to aid eruption	\$30
Placement of device to facilitate eruption of	\$30
impacted tooth	\$6
Incisional biopsy of oral tissue – hard (bone,	7.
tooth)	\$50
Incisional biopsy of oral tissue – soft	\$50
Exfoliative cytological sample collection	\$25
Alveoloplasty in conjunction with extractions	
- 4 or more teeth or tooth spaces, per	
quadrant	\$18
Alveoloplasty in conjunction with extractions	
- 1 to 3 teeth or tooth spaces, per quadrant	\$9

Alveoloplasty not in conjunction with		
extractions – 4 or more teeth or tooth		
spaces, per quadrant		\$25
Alveoloplasty not in conjunction with		
extractions – 1 to 3 teeth or tooth spaces, per		
quadrant		\$13
Incision and drainage of abscess – intraoral		
soft tissue		\$10
Incision and drainage of abscess – intraoral		
soft tissue - complicated		\$11
Buccal/labial frenectomy (frenulectomy)		\$24
Lingual frenectomy (frenulectomy)		\$24
Frenuloplasty		\$25
Palliative (emergency) treatment of dental		
pain – minor procedure		\$10
Deep sedation/general anesthesia – first 15		
minutes		\$104
Deep sedation/general anesthesia – each		
subsequent 15 minute increment		\$83
Intravenous moderate (conscious)		
sedation/analgesia – first 15 minutes		\$104
Intravenous moderate (conscious)		
sedation/analgesia – each subsequent 15		
minute increment		\$83
Consultation - diagnostic service provided by	For second opinions only	
dentist or physician other than requesting		
dentist or physician		\$0
Consultation with a medical health care		
professional		\$0
Cleaning and inspection of removable		
complete denture, maxillary		\$25
Cleaning and inspection of removable		
complete denture, mandibular		\$25
Cleaning and inspection of removable partial		
denture, maxillary		\$25
Cleaning and inspection of removable partial		
denture, mandibular		\$25
Repair and/or reline of occlusal guard		\$18

Occlusal guard adjustment	Fee for occlusal guard includes adjustments performed within 6	
	months of placement	\$13
Occlusal guard – hard appliance, full arch	Covered for bruxism only (1 every 3	\$115
Occlusal guard – soft appliance, full arch	years)	\$100
Occlusal guard – hard appliance, partial arch		\$60
Occlusal adjustment – limited	Not covered when performed in	
	conjunction with a restoration, root	
	canal therapy or appliance	\$20
Occlusal adjustment – complete		\$80
Full mouth rehabilitation, per unit (6 or more		
covered units of crowns and/or pontics under		
one treatment plan)		\$125
Implants	Limited to 2 teeth, every 1 year	\$1,215

Important note:

The following apply:

- Copayment amounts for crowns and pontics are per unit.
- Fees for dentures and partial dentures include relines, rebases, and adjustments within 6 months after installation. Fees for relines and rebases include adjustments within 6 months after installation. Specialized techniques and characterizations are not eligible.
- Inlays, onlays, labial veneers and crowns (excludes temporary crowns) are covered only:
 - As treatment for decay or acute traumatic injury
 - When teeth cannot be restored with a filling material or when the tooth is an abutment to a fixed bridge.

(Limited to 1 per tooth every 5 years. See the Replacement rule.)

- **Restorative services:** Multiple restorations on 1 surface are considered as a single restoration. (Limited to 1 per teeth every 5 years.)
- There is an extra charge for **eligible dental services** that use high noble metals (ex. gold or titanium).
- General anesthesia and sedation are **covered benefits** when part of a covered surgical procedure.

Additional eligible dental services

We will provide additional **eligible dental services** if you have at least one of the following conditions:

- Pregnancy
- Coronary artery disease/cardiovascular disease
- Cerebrovascular disease
- Diabetes

The additional **eligible dental services** are:

- Prophylaxis (cleaning) (one additional per Calendar Year)
- Scaling and root planing, (4 or more teeth), per quadrant
- Scaling and root planing, (1 to 3 teeth), per quadrant
- Full mouth debridement
- Periodontal maintenance

Payment of benefits

We will waive the **copayment** for the additional **eligible dental services** above.