ADA CODE	DIAGNOSTIC AND PREVENTIVE	MEMBER PAYS	SAVINGS OF
0120	PERIODIC ORAL EX	$30	$7
0140	LIMITED ORAL EXA	$50	$12
0150	COMPREHENSIVE EX	$53	$13
0210	FULL MOUTH SERIE	$83	$21
0220	PERIAPICAL FIRST	$17	$4
0230	PERIAPICAL ADD.F	$14	$3
0270	BITEWING -1	$17	$4
0272	BITEWINGS -2	$27	$7
0274	BITEWINGS -4	$38	$10
0330	PANORAMIC FILM	$74	$19
1110	PROPHYLAXIS -ADU	$55	$14
1120	PROPHYLAXIS -CHI	$38	$9
1203	FLUORIDE -CHILD	$24	$6
1204	FLUORIDE -ADULT	$23	$6
1351	SEALANT -PER TOO	$32	$8
1510	SPACE MAINT.FIXE	$205	$51
1515	SPACE MAINT.FIXE	$270	$68
	RESTORATIVE		
2140	AMALGAM 1 PRIM &	$84	$21
2150	AMALGAM 2 PRIM &	$109	$27
2160	AMALGAM 3 PRIM &	$132	$33
2161	AMALGAM 4+ PRIM	$161	$40
2330	RESIN 1 SURF-ANT	$88	$22
2331	RESIN 2 SURF-ANT	$113	$28
2332	RESIN 3 SURF-ANT	$138	$34
2335	RESIN 4+SURF-ANT	$163	$41
2391	RESIN 1 SURF-POS	$99	$25
2392	RESIN 2 SURF-POS	$135	$34
2393	RESIN 3 SURF-POS	$168	$42
2394	RESIN 4-SURF POS	$206	$51
2750	PORC/HIGH NOBLE	$743	$186
2752	CROWN -PORC/MTL	$709	$177
2790	CROWN -FULL GOLD	$717	$179
2791	CROWN FULL CAST	$679	$170
2930	CROWN SS STEEL P	$170	$43
2931	CROWN SS STEEL P	$193	$48
2950	CROWN/CORE BUILD	$164	$40
2951	PIN RETENTION	$37	$9
2952	CAST POST & CORE	$257	$64
2953	addt'lCastpost s	$129	$32
2954	PREFAB POST & CO	$206	$51
	ENDODONTICS		
3110	PULP CAP-DIRECT	$46	$12
3120	PULP CAP-INDIREC	$39	$10
3220	VITAL PULPOTOMY	$111	$28
3310	ROOT CANAL -1 CA	$470	$117
3320	ROOT CANAL -2 CA	$574	$143
3330	ROOT CANAL -3 CA	$741	$185

ADA CODE	PERIODONTICS	MEMBER PAYS	SAVINGS OF
4210	Gingivectomy-4 o	$140	$35
4341	PERIO SCALE 4 OR	$150	$37
4342	PERIO SCALE 1-3	$83	$21
4910	PERIO MAINTENANC	$90	$22
	PROSTHODONTICS (REMOVABLE)		
5110	DENTURE-UPPER	$894	$223
5120	DENTURE-LOWER	$894	$223
5130	DENTURE IMM-UPPE	$974	$244
5140	DENTURE IMM-LOWE	$974	$244
5211	PARTIAL-UPPER/RE	$754	$189
5212	PARTIAL-LOWER/RE	$877	$219
5213	PARTIAL-UPPER/ME	$988	$247
5214	PARTIAL-LOWER/ME	$988	$247
5410	ADJUST DENTURE U	$49	$12
5411	ADJUST DENTURE L	$49	$12
5510	REPAIR DENTURE B	$101	$25
5520	REPAIR MISSING T	$83	$21
5630	REPAIR PARTIAL C	$138	$34
5650	ADD TOOTH TO PAR	$122	$31
5660	ADD CLASP TO PAR	$147	$37
5730	OFFICE RELINE DE	$332	$83
5740	OFFICE RELINE PA	$187	$47
5750	RELINE UPPER/LAB	$274	$68
5751	RELINE LOWER/LAB	$274	$68
5850	TISSUE CONDITION	$86	$21
5851	TISSUE CONDITION	$86	$21
	PROSTHODONTICS		
6240	PONTIC PORC GOLD	$665	$166
6241	PONTIC PORC META	$614	$153
6750	ABUT PORC HIGH N	$758	$190
6751	ABUT PORC TO MET	$708	$177
6752	ABUTMENT PORC/GO	$725	$181
	ORAL SURGERY		
7140	EXT/ERUPTED/ADDT	$90	$22
7220	EXTRACTION-SOFT	$192	$48
7230	EXTRACTION-PART.	$255	$64
7240	EXTRACTION-BONY	$300	$75
7250	Surg Rem Tooth R	$166	$41
7310	ALVEOPLASTY W/EX	$178	$45
7320	ALVEOPLASTY W/O	$470	$118
7510	INCISION AND DRA	$170	$43
	MISCELLANEOUS SERVICES		
9110	EMERGENCY PALLIA	$66	$8

*Note fee schedule subject to change

Vivid Dental is not an insurance policy and is not protected by Ohio Life and Health Guarantee Association. Vivid Dental is not responsible for your dental bills and is not liable for providing or guarenteeing service or the quality of service.