

DENTAL FEE SCHEDULE

(ENDODONTIC EN1)

PROCEDURE CODE	PROCEDURE DESCRIPTION	New Fee Schedule
140	Limited Emergency Oral Evaluation – problem focused	81.90
145	Oral Evaluation for a patient under three years of age and counseling with the primary caregiver	107.64
160	Detailed and Extensive Oral Evaluation – problem focused, B/R	107.64
170	Re-Evaluation-Limited, Problem focused (Established patient; not post- operative visit)	49.14
*0220	Intraoral – Periapical - first film	21.06
*0230	Intraoral – Periapical - each additional film	5.85
*0270	Bitewing – single film	21.06
2955	Post Removal (not in conjunction with endodontic therapy and not to be used in conjunction with endodontic retreatment)	175.50
3310	Endodontic Therapy - Anterior (excluding final restoration)	588.51
3320	Endodontic Therapy - Bicuspid (excluding final restoration)	739.44
3330	Endodontic Therapy - Molar (excluding final restoration)	931.32
3331	Treatment of root canal obstruction; non-surgical access	163.80
3332	Incomplete Endodontic Therapy; inoperable or fractured tooth	111.15
3346	Retreatment of Previous Endodontic Therapy - Anterior	826.02
3347	Retreatment of Previous Endodontic Therapy - Bicuspid	882.18
3348	Retreatment of Previous Endodontic Therapy - Molar	1152.45
3351	Apexification / Recalcification – initial visit	257.40
3352	Apexification / Recalcification – interim visit	70.20

3353	Apexification / Recalcification – final visit (includes completed Endodontic Therapy)	702.00
3410	Apicoectomy / Periradicular Surgery - Anterior	926.64
3421	Apicoectomy / Periradicular Surgery – Bicuspid (first root)	926.64
3425	Apicoectomy / Periradicular Surgery – Molar (first root)	960.57
3426	Apicoectomy / Periradicular Surgery (each additional root)	140.40
3430	Retrograde Filling - per root	343.98
7510	Incision and Drainage of Abscess (intraoral soft tissue)	187.20
9110	Palliative (emergency) treatment of dental pain – minor procedure	111.15

DENTAL FEE SCHEDULE
(ENDODONTIC ENI)

PROCEDURE CODE	PROCEDURE DESCRIPTION	
9310	Consultation (Diagnostic service provided by dentist other than practitioner providing treatment)	90.09