

General Dentist - Sample Member Prices

Direct Access & Direct Access Silver



This schedule applies to General Dentists ONLY. Specialist's fees vary by location and specialty

Some contracted dentists in your state may utilize a different fee schedule. Please contact your dentist or call Dentist Direct at 1-866-696-6527 to obtain a specific estimate of possible charges or discounts.

REGION 0		
Code	Description	MEMBER PRICE
120	PERIODIC ORAL EVAL	37
140	LTD ORAL EVAL-PROBLEM FOCUSED	53
150	COMP ORAL EVAL	61
210	INTRAORAL-COMPLT SERIES (INCL BITEWINGS)	102
220	INTRAORAL-PERIAPICAL FIRST FILM	21
230	INTRAORAL-PERIAPICAL EA ADD FILM	16
270	BITEWING-SINGLE FILM	22
272	BITEWINGS-2 FILMS	34
274	BITEWINGS-4 FILMS	46
330	PANORAMIC FILM	88
1110	PROPHYLAXIS-ADULT	72
1120	PROPHYLAXIS-CHILD	56
1206	TOPICAL FLUORIDE VARNISH - THERAPEUTIC APPLICATION FOR MOD. TO HIGH CARIES RISK PATIENTS	45
1208	TOPICAL APPLICATION OF FLUORIDE	27
1351	SEALANT-PER TOOTH	42
2140	AMALGAM-1 SURFACE PERM	95
2150	AMALGAM-2 SURFACES PERM	122
2160	AMALGAM-3 SURFACES PERM	156
2161	AMALGAM-4/MORE SURFACES PERM	180
2330	RESIN-BASED COMPOSITE-1 SURFACE ANT	118
2331	RESIN-BASED COMPOSITE-2 SURFACES ANT	145
2332	RESIN-BASED COMPOSITE-3 SURFACES ANT	172
2335	RESIN-BASED COMPOSITE-4/MORE SURF-INCISAL ANGLE	210
2391	RESIN-BASED COMPOSITE - 1 SURFACE POSTERIOR	138
2392	RESIN-BASED COMPOSITE - 2 SURFACES POSTERIOR	184
2393	RESIN-BASED COMPOSITE - 3 SURFACES POSTERIOR	231
2394	RESIN-BASED COMPOSITE - 4 OR MORE SURFACES POSTERIOR	272
2740	CROWN-PORCELAIN/CERAMIC SUBSTRATE	886
2750	CROWN-PORCELAIN FUSED TO HI NOBLE METAL	896
2751	CROWN-PORCELAIN FUSED TO PREDOMINANTLY BASE METL	795
2752	CROWN-PORCELAIN FUSED TO NOBLE METAL	814
2950	CORE BUILDUP INCL ANY PINS	204
2954	PREFAB POST & CORE IN ADD TO CROWN	253
3120	PULP CAP-INDIRECT (EXCLD FINAL RESTORATION)	48
3220	THERAP PULPOTOMY-REMOV PULP & APPLIC MEDS	139
3310	ANT (EXCLD FINAL RESTORATION) (ROOT CANAL)	536
3320	BICUSPID (EXCLD FINAL RESTORATION) (ROOT CANAL)	656
3330	MOLAR (EXCLD FINAL RESTORATION) (ROOT CANAL)	876
4341	PERIODONTAL SCALING & ROOT PLANING PER QUADRANT	182
4355	FULL MOUTH DEBRID-ENABLE PERIODONTAL EVAL & DX	121
4381	LOCALIZ DELIV CHEMO-CREVICULAR TISS PER TOOTH BR	63
4910	PERIODONTAL MAINT PROC (FOLLOWING ACTIVE THERAP)	109
6010	SURG PLACEMENT IMPLANT BODY: ENDOSTEAL IMPLANT	2431
6056	PREFABRICATED ABUTMENT - INCLUDES PLACEMENT	505
6057	CUSTOM ABUTMENT - INCLUDES PLACEMENT	624
6058	ABUTMENT SUPPORTED PORCELAIN/CERAMIC CROWN	1370
6240	PONTIC-PORCELAIN FUSED TO HI NOBLE METAL	801
6750	CROWN-PORCELAIN FUSED TO HI NOBLE METAL	896
7111	CORONAL REMNANTS - DECIDIOUS TEETH	85
7140	EXTRACTION ERUPTED TOOTH OR EXPOSED ROOT (ELEVATION AND/OR FORCEPS REMOVAL)	121
7210	REMOVE ERUPT TTH-W/MUCOPERIOSTL FLP-REMOV BNE/TTH	194
7230	REMOVE IMPACTED TOOTH-PART BONY	322
8050	INTERCEPTIVE ORTHODONTIC TX PRIM DENTITION	2153
8080	COMP ORTHODONTIC TX ADOLESCENT DENTITION	4307
8090	COMP ORTHODONTIC TX ADULT DENTITION	4307
9110	PALLIATIVE (ER) TX DENTAL PAIN-MINOR PROC	72
9972	EXTERNAL BLEACHING - PER ARCH	350
9973	EXTERNAL BLEACHING - PER TOOTH	56
9974	INTERNAL BLEACHING - PER TOOTH	274

This schedule is not meant to be a comprehensive listing of all possible dental charges or discounts. This fee schedule is for illustrative purposes only and is subject to change January 1st of each year or at the discretion of Dentist Direct, LLC. **Some contracted dentists in your state may utilize a different fee schedule. Please contact your dentist or call Dentist Direct at 1-866-696-6527** to obtain an estimate of possible charges or discounts.

This schedule applies to General Dentists. Specialist's fees vary by location and specialty but members typically average a 15% discount or more. Please call 1-866-696-6527 for an estimate of possible charges. Any procedure not listed is available on a fee-for-service basis.

This schedule of fees applies **ONLY** at participating Network Providers.