



|       |  |        |
|-------|--|--------|
| 06782 | 3/4 cast noble metal .....               | 445.00 |
| 06790 | Full cast high noble metal.....          | 508.00 |
| 06791 | Full cast predominantly base metal ..... | 451.00 |
| 06792 | Full cast noble metal .....              | 461.00 |
| 06794 | Titanium .....                           | 508.00 |

\*Porcelain not covered posterior to maxillary first molar and mandibular second bicuspid, unless "by report."

**OTHER SERVICES (06900)**

|       |  |        |
|-------|--|--------|
| 06930 | Recent fixed partial denture .....                                   | 75.00  |
| 06970 | Cast post & core in addition to fixed partial denture retainer.....  | 145.00 |
| 06971 | Cast post as part of fixed partial denture retainer .....            | 145.00 |
| 06972 | Prefabricated post & core in addition to fixed partial denture ..... | 124.00 |
| 06973 | Core build-up for retainer including pins .....                      | 110.00 |
| 06980 | Fixed partial denture repair.....                                    | B/R    |
| 06999 | Unspecified fixed prosthodontic procedure .....                      | B/R    |

**VIII. ORAL SURGERY (07000-07999)**

**DIAGNOSTIC PROCEDURES** See Section 1

**UNCOMPLICATED EXTRACTIONS (07100)**—Includes local anesthesia and routine post-operative care.

|       |  |       |
|-------|--|-------|
| 07111 | Extraction, coronal remnants-deciduous tooth ..... | 68.00 |
| 07140 | Extraction, erupted tooth or exposed root .....    | 71.00 |

**COMPLICATED EXTRACTIONS (07200)**—Includes local anesthesia, suturing, and routine post-operative care

|       |  |        |
|-------|--|--------|
| 07210 | Extraction of tooth, surgical, erupted.....            | 101.00 |
| 07220 | Extraction of tooth, tissue impaction.....             | 124.00 |
| 07230 | Extraction of tooth, partially bony impaction.....     | 163.00 |
| 07240 | Extraction of tooth, completely bony .....             | 198.00 |
| 07241 | Complete bony impaction—unusual.....                   | B/R    |
| 07250 | Root recovery (surgical removal of residual root)..... | 121.00 |

**OTHER SURGICAL PROCEDURES**

|       |  |        |
|-------|--|--------|
| 07260 | Oroantral fistula closure .....                                      | 121.00 |
| 07261 | Primary closure of sinus perforation .....                           | 200.00 |
| 07270 | Surgical—tooth re-implantation .....                                 | 208.00 |
| 07272 | Surgical—tooth transplantation .....                                 | 220.00 |
| 07280 | Surgical exposure of impacted or unerupted tooth.....                | 253.00 |
| 07282 | Mobilization of erupted or mal-positioned tooth to aid eruption..... | 200.00 |
| 07283 | Placement of device to facilitate eruption of impacted tooth .....   | 200.00 |
| 07285 | Biopsy of oral tissue (hard).....                                    | 258.00 |
| 07286 | Biopsy of oral tissue (soft).....                                    | 258.00 |
| 07287 | Exfoliative cytological sample collection.....                       | 100.00 |
| 07288 | Brush biopsy – transepithelial sample collection .....               | 100.00 |
| 07290 | Surgical repositioning of teeth .....                                | 95.00  |
| 07291 | Fibrotomy .....  | 83.00  |

**ALVEOPLASTY (07300)** (Surgical preparation of ridge for dentures)

|       |   |        |
|-------|---|--------|
| 07310 | Per quadrant in conjunction with extractions .....                        | 102.00 |
| 07311 | One to three teeth per quadrant in conjunction with extractions .....     | 90.00  |
| 07320 | Per quadrant not in conjunction with extractions .....                    | 99.00  |
| 07321 | One to three teeth per quadrant not in conjunction with extractions ..... | 87.00  |

**VESTIBULOPLASTY**

|       |  |        |
|-------|--|--------|
| 07340 | Per ridge extension (secondary epithelialization) .....  | B/R    |
| 07350 | Per ridge extension (including soft tissue grafts, muscle reattachment, revision of soft tissue, attachment, and management of hypertrophied and hyperplastic tissue)..... | 326.00 |

**SURGICAL EXCISION (07400)**

|       |  |        |
|-------|--|--------|
| 07410 | Excision of benign lesion—up to 1.25 cm .....            | 186.00 |
| 07411 | Excision of benign lesion—greater than 1.25 cm .....     | 190.00 |
| 07412 | Excision of benign lesion—complicated .....              | 200.00 |
| 07413 | Excision of malignant lesion —up to 1.25 cm .....        | 220.00 |
| 07414 | Excision of malignant lesion —greater than 1.25 cm ..... | 240.00 |
| 07415 | Excision of malignant lesion —complicated .....          | 260.00 |

**REMOVAL OF TUMORS, CYSTS, AND NEOPLASMS**

|       |  |        |
|-------|--|--------|
| 07440 | Excision of malignant tumor to 1.25 cm.....                  | 220.00 |
| 07441 | Excision of malignant tumor over 1.25 cm.....                | 244.00 |
| 07450 | Removal of odontogenic cyst or tumor to 1.25 cm .....        | 266.00 |
| 07451 | Removal of odontogenic cyst or tumor over 1.25 cm .....      | 351.00 |
| 07460 | Removal of non-odontogenic cyst or tumor to 1.25 cm .....    | 257.00 |
| 07461 | Removal of non-odontogenic cyst or tumor over 1.25 cm .....  | 301.00 |
| 07465 | Destruction of lesion(s) by physical or chemical method..... | B/R    |

**EXCISION OF BONE TISSUE**

|       |  |        |
|-------|--|--------|
| 07471 | Removal of lateral exostosis—maxilla or mandible ..... | 258.00 |
| 07472 | Removal/Palatal Torus .....                            | 258.00 |
| 07473 | Removal/Mandibular Torus .....                         | 258.00 |

|       |   |        |
|-------|---|--------|
| 07490 | Radical resection of mandible with bone graft ..... | 763.00 |
|-------|---|--------|

**SURGICAL INCISION (07500)**

|       |  |        |
|-------|--|--------|
| 07510 | Incision and drainage of abscess, intra-oral.....                          | 88.00  |
| 07511 | Incision and drainage of abscess, intra-oral—complicated .....             | 90.00  |
| 07520 | Incision and drainage of abscess, extra-oral.....                          | 136.00 |
| 07521 | Incision and drainage of abscess, extra-oral—complicated .....             | 140.00 |
| 07530 | Removal of foreign body .....  | 59.00  |
| 07540 | Removal of reaction-producing foreign bodies, musculoskeletal system ..... | 59.00  |
| 07550 | Sequestrectomy for osteomyelitis .....                                     | 724.00 |
| 07560 | Maxillary sinusotomy—removal of foreign body.....                          | B/R    |

**TREATMENT OF FRACTURE SIMPLE (07600)**

|       |   |        |
|-------|---|--------|
| 07610 | Maxilla, open reduction .....                                     | 954.00 |
| 07620 | Maxilla, closed reduction .....                                   | 573.00 |
| 07630 | Mandible, open reduction.....                                     | 954.00 |
| 07640 | Mandible, closed reduction .....                                  | 573.00 |
| 07650 | Malar/zygomatic arch, open reduction .....                        | 668.00 |
| 07660 | Malar/zygomatic arch, closed reduction .....                      | 383.00 |
| 07670 | Alveolus-stabilization of teeth, closed reduction splinting ..... | 296.00 |
| 07671 | Alveolus-stabilization of teeth, open reduction splinting.....    | 350.00 |
| 07680 | Facial bones—reduction .....                                      | 573.00 |

**TREATMENT OF FRACTURES—COMPOUND (07700)**

|       |  |         |
|-------|--|---------|
| 07710 | Maxilla, open reduction .....                          | 954.00  |
| 07720 | Maxilla, closed reduction .....                        | 668.00  |
| 07730 | Mandible, open reduction.....                          | 954.00  |
| 07740 | Mandible, closed reduction .....                       | 668.00  |
| 07750 | Malar/zygomatic arch, open reduction .....             | 668.00  |
| 07760 | Malar/zygomatic arch, closed reduction.....            | 421.00  |
| 07770 | Alveolus-stabilization of teeth, open reduction.....   | 535.00  |
| 07771 | Alveolus-stabilization of teeth, closed reduction..... | 535.00  |
| 07780 | Facial bones—reduction with fixation.....              | 1908.00 |

**REDUCTION OF DISLOCATION (07800)**

|       |                                       |        |
|-------|---------------------------------------|--------|
| 07810 | Open reduction of dislocation.....    | 200.00 |
| 07820 | Closed reduction of dislocation ..... | 180.00 |
| 07830 | Manipulation under anesthesia .....   | B/R    |

**REPAIR OF TRAUMATIC WOUNDS (07900)**

|       |                                     |        |
|-------|-------------------------------------|--------|
| 07910 | Simple suture up to 5 cm .....      | 62.00  |
| 07911 | Complicated suture up to 5 cm ..... | 204.00 |
| 07912 | Complicated suture over 5 cm .....  | 233.00 |

**OTHER REPAIR PROCEDURES**

|       |   |        |
|-------|---|--------|
| 07920 | Skin grafts .....                                 | 143.00 |
| 07940 | Osteoplasty for orthognathic deformities.....     | 900.00 |
| 07941 | Osteotomy—mandibular rami .....                   | B/R    |
| 07943 | Osteotomy—mandibular rami w/ bone graft.....      | B/R    |
| 07944 | Osteotomy—segmented or subapical—quadrant .....   | B/R    |
| 07945 | Osteotomy—body of mandible .....                  | B/R    |
| 07946 | LeFort I (maxilla – total) .....                  | B/R    |
| 07947 | LeFort I (maxilla – segmented) .....              | B/R    |
| 07948 | LeFort II or LeFort III – without bone graft..... | B/R    |
| 07949 | LeFort II or LeFort III – with bone graft.....    | B/R    |
| 07950 | Osteoperiosteal of mandible or facial bones ..... | B/R    |
| 07955 | Repair maxilla facial tissue.....                 | 87.00  |
| 07960 | Frenulectomy .....                                | 160.00 |
| 07970 | Excision of hyperplastic tissue—per arch.....     | 127.00 |
| 07971 | Excision of pericoronal gingiva.....              | 99.00  |
| 07980 | Sialolithotomy.....                               | 374.00 |
| 07981 | Excision of salivary gland.....                   | B/R    |
| 07982 | Sialodochoplasty .....                            | 526.00 |
| 07983 | Closure of salivary fistula .....                 | 573.00 |
| 07999 | Unspecified oral surgery procedure .....          | B/R    |

**IX. ORTHODONTICS (08000-08999)**

**MINOR TREATMENT TO CONTROL HARMFUL HABITS (08200)**

|       |                                  |        |
|-------|----------------------------------|--------|
| 08210 | Removable appliance therapy..... | 228.00 |
| 08220 | Fixed appliance therapy .....    | 169.00 |

**X. ADJUNCTIVE GENERAL SERVICES**

**UNCLASSIFIED TREATMENT (09100)**

|       |   |       |
|-------|---|-------|
| 09110 | Palliative emergency treatment of dental pain ..... | 53.00 |
| 09120 | Fixed partial denture sectioning .....              | 75.00 |

**ANESTHESIA (09200)**

|       |                                     |        |
|-------|-------------------------------------|--------|
| 09210 | Local anesthesia—non-operative..... | 109.00 |
| 09211 | Regional block anesthesia .....     | 26.00  |

|       |   |        |
|-------|---|--------|
| 09212 | Trigeminal division block anesthesia .....      | 26.00  |
| 09220 | General anesthesia, first 30 min .....          | 116.00 |
| 09221 | General anesthesia, each additional 15 min..... | 60.00  |

**PROFESSIONAL CONSULTATION (09300)**

|       |                                |       |
|-------|--------------------------------|-------|
| 09310 | Consultation, per session..... | 48.00 |
|-------|--------------------------------|-------|

**PROFESSIONAL VISITS (09400)**

|       |                                       |       |
|-------|---------------------------------------|-------|
| 09430 | Office visit during office hours..... | 34.00 |
| 09440 | Office visit after office hours ..... | 70.00 |

**DRUGS (09600)**

|       |                                 |       |
|-------|---------------------------------|-------|
| 09610 | Therapeutic drug injection..... | 26.00 |
| 09630 | Other medicaments .....         | B/R   |

**MISCELLANEOUS SERVICES (09900)**

|       |   |        |
|-------|---|--------|
| 09910 | Application of desensitizing medicament .....                             | 27.00  |
| 09911 | Application of desensitizing resin for cervical and/or root surface ..... | 27.00  |
| 09930 | Treatment of complications.....   | B/R    |
| 09940 | Occlusal guard.....   | 206.00 |
| 09941 | Athletic mouthguard .....   | 120.00 |
| 09950 | Occlusal analysis—mounted case .....                                      | B/R    |
| 09951 | Occlusal adjustment, limited .....  | 55.00  |
| 09952 | Occlusal adjustment, complete .....                                       | 142.00 |
| 09970 | Enamel microabrasion .....  | B/R    |
| 09990 | Unspecified .....   | B/R    |

NOTE: For procedures marked “B/R” (by report), HSBA will determine allowance based upon the nature and extent of the services performed. A dental procedure of an equivalent gravity and severity listed herein shall be used as the basis for HSBA determination.

Please refer to your ‘Summary Plan Description’ booklet for a complete listing of plan limitations and exclusions.

## JOINT BENEFIT TRUST DENTAL HEALTH PROGRAM

# HSBA

**HEALTH SERVICES BENEFIT  
ADMINISTRATORS  
160 AIRWAY BOULEVARD  
LIVERMORE, CALIFORNIA 94551  
TELEPHONE (925) 449-7070**

## JOINT BENEFIT TRUST TABLE OF DENTAL ALLOWANCES Effective 8/1/09

Most procedures not listed on this table are not covered by the Plan. The Dentist should submit a Pre-Authorization for any treatments not listed to determine if there is a covered reimbursable amount before the treatment has been started.

If the treatment exceeds \$300 the Dentist should submit the treatment plan on the claim form with diagnostic X-rays for pre-determination from Health Services Benefit Administrators.

Please Note:  
Eligible 1400-Hour employees’ benefits are paid at 100% of the scheduled allowance with a \$50 deductible and a maximum annual benefit of \$1,500.

Eligible Non-1400 Hour employees’ benefits are paid at 50% of the scheduled allowance with a \$50 deductible and a maximum annual benefit of \$750.