

DOC Denture Services Fee Schedule
Effective July 1, 2016 through June 30, 2017

| CDT | Description - 2016 ADA CDT Guide | Allowed Amount |
|--------|--|----------------|
| D5110 | Complete denture - maxillary | \$ 857.27 |
| D5120 | Complete denture - mandibular | \$ 857.27 |
| D5211 | Maxillary partial denture - resin base (including any conventional clasps, rests and teeth) up to 4** | \$ 679.73 |
| D5212 | Mandibular partial denture - resin base (including any conventional clasps, rests and teeth) up to 4** | \$ 681.13 |
| D5213 | Maxillary partial denture - cast metal framework with resin denture base (including any conventional clasps, rests and teeth) | \$ 891.56 |
| D5214 | Mandibular partial denture - cast metal framework with resin denture base (including any conventional clasps, rests and teeth) | \$ 892.51 |
| D5510 | Repair broken complete denture base | \$ 105.62 |
| D5520 | Replace missing/broken teeth - complete denture (each tooth) | \$ 93.91 |
| D5610 | Repair resin denture base | \$ 101.88 |
| D5630 | Repair/replace broken clasp - per tooth | \$ 131.53 |
| D5640 | Replace broken teeth - per tooth | \$ 95.77 |
| D5650 | Add tooth to existing partial denture | \$ 111.36 |
| D5660 | Add clasp to existing partial denture - per tooth | \$ 135.76 |
| D5710 | Rebase complete maxillary denture | \$ 295.96 |
| D5711 | Rebase complete mandibular denture | \$ 293.63 |
| D5750 | Reline complete maxillary denture (laboratory) | \$ 239.17 |
| D5751 | Reline complete mandibular denture (laboratory) | \$ 239.17 |
| D5760 | Reline maxillary partial denture (laboratory) | \$ 234.94 |
| D5761 | Reline mandibular partial denture (laboratory) | \$ 245.16 |
| D5850 | Tissue conditioning, maxillary | \$ 105.11 |
| D5851 | Tissue conditioning, mandibular | \$ 104.23 |
| *D7999 | Unspecified oral surgery procedure, by report | See Below |
| D9940 | Occlusal guard, by report | \$ 305.33 |
| D9941 | Fabrication of athletic mouthguard | \$ 133.88 |
| D9942 | Repair and/or reline of occlusal guard | \$ 131.07 |

This fee schedule allowable amount is derived from calculating 55% of the published L&I rate at the time of the service.

Any CDT codes not on this schedule, are not authorized for payment

*D7999 May be used to bill for the following:

****Additional clasps (over 4) for resin dentures.** A maximum of up to two additional clasps will be paid for without prior authorization.

\$35.00 per clasp

To receive payment for more than two additional clasps, you must obtain prior authorization from the Department and attach documentation of the number of clasps placed with your submitted claim.

***Specialty soft re-line material.** You must obtain a prior authorization for utilization of the specialty material and must attach documentation of the material used with your submitted claim.

\$100.00 Partial

DOC required onsite provider training must be invoiced separately

If you are unable to complete a denture due to unforeseen correctional circumstances; you may bill using the appropriate denture code and will be reimbursed for the percentage of completion of your work. You must provide documentation as to the percentage of completion of the work and the correctional reason for the work not being able to be completed attached to your submitted claim