

DOC Oral Surgery Fee Schedule

Effective January 1, 2026

CDT	Description -	Allowed Amount
D0120	Periodic oral evaluation	NOT COVERED
D0140	Limit oral eval problm focus	\$ 104.00
D0150	Comprehensve oral evaluation	NOT COVERED
D0160	Extensv oral eval prob focus	\$ 190.40
D0170	Re-eval, established patient, problem focused	\$ 93.60
D0171	Re-eval, post-op visit	\$ 88.80
D0180	Comprehensive periodontal evaluation	NOT COVERED
D0190	Screening of a patient	NOT COVERED
D0191	Assessment of a patient	\$ 104.00
D0220	INTRAORAL PERIAPICAL FIRST F	\$ 40.00
D0230	INTRAORAL PERIAPICAL Each additional	\$ 34.40
D0330	DENTAL PANORAMIC FILM	\$ 149.60
D0350	Oral/facial photo images	\$ 90.40
D0364	Cone beam, CT Capture, Lmtd View < 1 Jaw	\$ 378.40
D0365	Cone beam, CT Capture, Full Arch, Mandible	\$ 410.40
D0366	Cone beam, CT Capture, Full Arch, Maxilla	\$ 402.40
D0367	Cone beam, CT Capture, Full Arch, both jaws, with or w/out cranium	\$ 410.40
D4266	Guided tissue regen resorble	\$ 888.80
D4268	Surgical revision procedure	\$ 980.00
D7140	Extraction erupted tooth/exr	\$ 259.20
D7210	REM IMP TOOTH W MUCOPER FLP	\$ 373.60
D7220	Impact tooth remov soft tiss	\$ 412.00
D7230	IMPACT TOOTH REMOV PART BONY	\$ 501.60
D7240	IMPACT TOOTH REMOV COMP BONY	\$ 617.60
D7241	Impact tooth rem bony w/comp	\$ 712.00
D7250	TOOTH ROOT REMOVAL	\$ 401.60
D7251	Coronectomy	\$ 585.60
D7260	Oral antral fistula closure	\$ 1,616.80
D7261	Primary closure sinus perf	\$ 989.60
D7285	BIOPSY OF ORAL TISSUE HARD	\$ 680.00
D7286	BIOPSY OF ORAL TISSUE SOFT	\$ 456.00
D7310	Alveoplasty w/ extraction	\$ 408.00
D7311	Alveoplasty w/ extraction	\$ 398.40
D7320	Alveoplasty w/out extraction	\$ 575.20
D7321	Alveoplasty w/out extraction	\$ 529.60
D7340	Vestibuloplasty	\$ 1,663.20
D7410	Excision benign lesion up to 1.25 cm	\$ 556.80
D7411	Excision benign lesion greater than 1.25 cm	\$ 856.80
D7413	Excision malignant lesion up to 1.25 cm	\$ 715.80
D7414	Excision malignant freater than 1.25 cm	\$ 1,170.10

D7450	Rem odontogen cyst to 1.25cm	\$	807.20
D7451	Rem odontogen cyst > 1.25 cm	\$	1,179.20
D7460	Remove benign nonodontogenic cyst to 1.25cm	\$	781.60
D7461	Remove benign nonodontogenic cyst > 1.25cm	\$	1,196.80
D7471	Rem exostosis any site	\$	969.60
D7473	Remove torus mandibularis	\$	1,113.60
D7510	I&D ABSC INTRAORAL SOFT TISS	\$	318.40
D7540	Removal of fb reaction	\$	787.20
D7550	Removal of sloughed off bone	\$	690.40
D7560	Maxillary sinusotomy	\$	2,248.00
D7610	Open reduction simple maxilla fx	\$	5,103.20
D7620	Closed reduction simple maxilla fx	\$	4,081.60
D7630	Open red simpl mandible fx	\$	5,441.60
D7640	Clsd red simpl mandible fx	\$	4,087.20
D7650	Open Red simpl malar/zygomatic arch fx	\$	4,302.40
D7660	Clsd Red simpl malar/zygomatic arch fx	\$	3,525.60
D7710	Open reduction compound maxilla fx	\$	5,438.40
D7720	Closed reduction compund maxilla fx	\$	4,041.60
D7730	Open reduct compd mandble fx	\$	5,984.00
D7740	Clsd reduct compd mandble fx	\$	4,133.60
D7750	Open reduct compd malar fx	\$	5,144.80
D7760	Clsd reduct compd malar fx	\$	7,051.20
D7921	Collection/application fo autologous blood concentrate product	\$	550.40
D7922	Pacement of intra-socket bio dressing	\$	164.80
D7950	Mandible/Maxilla graft	\$	3,248.00
D7970	Excision of hyperplastic tissue - per arch	\$	644.00
D7980	SIALOLITHOTOMY	\$	867.50
D7997	Appliance removal	\$	426.40
D7998	Intraoral place of fix dev	\$	2,827.20
<b>D7999</b>	<b>ORAL SURGERY PROCEDURE</b>	By Report	
D9215	Local Anesthesia	Bundled	
<b>D9219</b>	<b>Evaluation for moderate sedation, deep sedation or general anesthesia</b>	Bundled	
D9222	Deep Sedation/general Anesthesia-first 15 min	\$	318.40
D9223	Deep Sedation/general Anesthesia-each 15 min	\$	299.20
<b>D9230</b>	<b>Nitrous Oxide Analgesia</b>	\$	115.20
D9239	IV Moderate (conconscious) sedation-first 15 mins	\$	333.60
D9243	IV Moderate (conconscious) sedation-each 15 mins	\$	324.80
D9420	Hospital or Abulatory Surgical Center Call	\$	404.00
D9610	Dent therapeutic drug inject	\$	132.00
D9612	Thera par drugs 2 or > admin	\$	224.00
D9630	Other drugs/medicaments	\$	56.80
<b>D9986</b>	<b>Missed Appt.</b>	Per contract	
<b>D9987</b>	<b>Canceled Appt.</b>	Per contract	

- D7999** By report codes billed must be accompanied by additional documentation such as chart notes vendors/manufacturers invoices
- D9219** Bundled code with other sedation/anesthesia codes and is not separately payable.  
If not bundled with other anesthesia codes payment is \$131.20
- D9230** Covered if not billed with sedation codes (D9222, D9223, D9239, D9243)
  
- D9986** Payable only if determined to meet the contract terms for payment
- D9987** Payable only if determined to meet the contract terms for payment





and/or