

Del Sol Silver V Fee Schedule

General Dental Care - ADA Codes

Fees valid if performed by a General Dentist.
Rates start at the pricing shown and may differ depending on doctor recommendation.

	Plan Fee	Usual Fee	Save %
Evaluations			
0120-0150 Oral Examinations	\$14	\$63	-78%
Preventative			
0210 Full Mouth X-Ray	\$27	\$106	-75%
0220-0230 Single X-Ray	\$9	\$28	-68%
0274 Bitewings - Four Films	\$18	\$46	-61%
0330 Panoramic X-Ray	\$27	\$125	-78%
1110 Basic Cleaning - Adult	\$25	\$94	-73%
1351 Sealant -Per Tooth	\$15	\$35	-57%
Restorations (Fillings)			
<i>Amalgam Fillings</i>			
2140 1 Surface	\$62	\$94	-34%
2150 2 Surface	\$75	\$141	-47%
2160 3 Surface	\$90	\$179	-49%
2161 4 Surface	\$120	\$203	-41%
<i>Composite Fillings-Anterior</i>			
2330 1 Surface	\$70	\$111	-37%
2331 2 Surface	\$95	\$153	-38%
2332 3 Surface	\$120	\$192	-38%
2335 4 Surface	\$160	\$253	-37%
<i>Composite Fillings-Posterior</i>			
2391 1 Surface	\$115	\$182	-37%
2392 2 Surface	\$130	\$253	-49%
2393 3 Surface	\$155	\$326	-52%
2394 4 Surface	\$225	\$400	-44%
Inlay/Onlay Restorations			
<i>Metallic Inlay</i>			
2510 1 Surface	\$450	\$1,041	-57%
2520 2 Surface	\$545	\$1,041	-48%
2530 3+ Surface	\$560	\$1,041	-46%
<i>Metallic Onlay</i>			
2542 2 Surface	\$615	\$1,041	-41%
2543 3 Surface	\$630	\$1,041	-39%
2544 4+ Surface	\$650	\$1,041	-38%
<i>Porcelain/Ceramic/CEREC Inlay</i>			
2610 1 Surface	\$725	\$1,215	-40%
2620 2 Surface	\$745	\$1,215	-39%
2630 3+ Surface	\$765	\$1,215	-37%
<i>Porcelain/Ceramic/CEREC Onlay</i>			
2642 2 Surface	\$765	\$1,215	-37%
2643 3 Surface	\$805	\$1,215	-34%
2644 4+ Surface	\$840	\$1,215	-31%

Crown/Single Restorations

	Plan Fee	Usual Fee	Save %
2740 Crown - Porcelain/Ceramic	\$700	\$1,215	-42%
2740 Crown - CEREC*	\$700	\$1,215	-42%
2750 Crown - Porcelain/High Noble	\$640	\$1,041	-39%
2752 Crown - Porcelain/Noble Metal	\$625	\$1,010	-38%
2790 Crown - Full Cast High Noble	\$700	\$1,041	-33%
2792 Crown - Full Cast Noble Metal	\$590	\$928	-36%
2920 Recement Perm Crown	\$30	\$84	-64%
2950 Core Buildup, Including Pins	\$81	\$258	-69%
2954 Prefab Post & Core (Per Tooth)	\$115	\$290	-60%
2952 Cast Post & Core	\$135	\$335	-60%
2962 Porcelain Veneer	\$800	\$1,215	-34%
L05 Porcelain Margin	\$85	\$107	-21%

Implant Restorations

	Plan Fee	Usual Fee	Save %
6056 Prefabricated Abutment	\$520	\$572	-9%
6057 Custom Implant Abutment	\$750	\$832	-10%
6059 Prcln High Nbl Metal Crown	\$1,026	\$1,157	-11%
6950 Precision Attachment	\$525	\$595	-12%

Endodontics

	Plan Fee	Usual Fee	Save %
*3220 Therapeutic Pulpotomy	\$48	\$107	-55%
*3221 Pulpal Debridement	\$55	\$191	-71%
*3310 Root Canal - Anterior	\$375	\$502	-25%

*Does not include cost of restorative treatment.

Periodontics

	Plan Fee	Usual Fee	Save %
4341 Scaling/Root Planing 4 or More Teeth Per Quadrant	\$95	\$230	-59%
4342 Scaling/Root Planing 1-3 Teeth Per Quadrant	\$75	\$127	-41%
4355 Full Mouth Debridement	\$72	\$146	-51%
4910 Periodontal Maintenance	\$60	\$118	-49%
*4381 Arestin-Minocycline HCl	\$25	\$36	-31%
4999 Subgingival Irrigation	\$20	\$28	-28%
4999 in conjunction with Scaling/Root Planing, per quad	\$35	\$45	-22%

Dentures and Partial

	Plan Fee	Usual Fee	Save %
5110 Complete Denture, Maxillary (Upper)	\$800	\$1,379	-42%
5120 Complete Denture, Mandibular (Lower)	\$800	\$1,379	-42%
5130 Immediate Denture, Maxillary (Upper)	\$800	\$1,379	-42%
5140 Immediate Denture, Mandibular (Lower)	\$800	\$1,379	-42%
5213 Partial Denture, Maxillary, (Upper)	\$775	\$1,447	-46%
5214 Partial Denture, Mandibular (Lower)	\$775	\$1,447	-46%
5225 Partial Flexible Frame, Maxillary (Upper)	\$825	\$1,447	-43%
5226 Partial Flexible Fram, Mandibular (Lower)	\$825	\$1,447	-43%
5510-5610 Repair Base	\$100	\$227	-56%
5520 Replace Missing/Broken Tooth	\$75	\$133	-44%
5850 Tissue Conditioning, Maxillary (Upper)	\$95	\$222	-57%
5851 Tissue Conditioning, Mandibular (Lower)	\$95	\$222	-57%

Adjustments To Dentures

	Plan Fee	Usual Fee	Save %
5650 Add Tooth To Existing Partial	\$75	\$133	-44%
5730-5731 Reline Denture, Chair Side, Per Arch	\$98	\$257	-62%
5750-5751 Reline Denture, In Lab, Per Arch	\$150	\$334	-55%
5760-5761 Reline Partial, In Lab, Per Arch	\$150	\$306	-51%
5820-5821 Interim Partial Denture, Per Arch	\$250	\$390	-36%

***Fees listed are per arch. First three adjustments for dentures/ partials are at no charge within 6 months of initial treatment/ placement.

Fixed Bridge Work

Pontic/Crown

	Plan Fee	Usual Fee	Save %
6210 Cast High Noble Metal	\$700	\$1,041	-33%
6212 Cast Noble Metal	\$590	\$1,010	-42%
6240 Porcelain/High Noble Metal	\$640	\$1,041	-39%
6242 Porcelain/Noble Metal	\$625	\$1,010	-38%
6245 Porcelain/Ceramic	\$650	\$1,215	-47%
<i>Abutment/Crown</i>			
6740 Porcelain/Ceramic	\$650	\$1,215	-47%
6750 Porcelain/High Noble Metal	\$640	\$1,041	-39%
6752 Porcelain/Noble Metal	\$625	\$1,010	-38%
6790 Cast High Noble Metal	\$700	\$1,041	-33%
<i>Additional Procedures</i>			
6930 Recement Fixed Partial Denture	\$40	\$93	-57%

Extractions

	Plan Fee	Usual Fee	Save %
7140 Erupted Tooth or Exposed Root	\$70	\$136	-49%
7210 Surgical Removal of Erupted Tooth	\$115	\$262	-56%

Miscellaneous

	Plan Fee	Usual Fee	Save %
0431 Vizilite (Oral Cancer Screening)	\$40	\$50	-20%
9110 Palliative Treatment	\$45	\$73	-38%
9230 Nitrous Oxide Analgesia	\$40	\$61	-34%
9240 Nitrous Nosepiece	\$6	\$10	-40%
9940 Occlusal Guard (Hard/Soft)	\$315	\$437	-28%

Teeth Whitening Procedures

	Plan Fee	Usual Fee	Save %
O06 Teeth Whitening Therapy Upper Arch	\$99.50	\$124.50	-20%
O07 Teeth Whitening Therapy Lower Arch	\$99.50	\$124.50	-20%
O02 Whitening Gel (Per Tube)	\$20	\$28	-29%

Rates Effective July 2011

*Fees listed effective Aug 2011. Fees superceed any previous fee schedule.

Del Sol Silver V Fee Schedule

Specialty Dental Care - ADA Codes

Rates start at the pricing shown and may differ depending on doctor recommendation.

	Plan Fee	Usual Fee	Save %
Diagnosis & Treatment Planning			
0150 Comprehensive Exam	\$65	\$111	-41%
0210 Full Mouth X-Ray	\$50	\$111	-55%
0220 Single Periapical Film	\$10	\$26	-62%
0330 Panoramic X-Ray	\$75	\$125	-40%
Endodontics			
0140 Limited Endodontic Evaluation	\$55	\$81	-32%
*3310 Anterior Root Canal	\$550	\$818	-33%
*3320 Bicuspid Root Canal	\$648	\$961	-33%
*3330 Molar Root Canal	\$815	\$1,245	-35%
*3346 Retreat Anterior Canal	\$647	\$961	-33%
*3347 Retreat Bicuspid Canal	\$745	\$1,108	-33%
*3348 Retreat Molar Canal	\$926	\$1,386	-33%
<i>*Does not include cost of Restorative Treatment</i>			
Orthodontics			
8999 Diagnostic Work Up	\$150	\$311	-52%
8090 Adult Treatment	\$3,000	\$4,865	-38%
8680 Retainer (appliance, per arch)	\$125	\$195	-36%
8999 Final Records	\$195	\$311	-37%
8080/8090 Invisalign - Full Case	\$4,740	\$5,300	-11%
Periodontics			
0180 Comprehensive Periodontal Evaluation	\$65	\$111	-41%
4249 Crown Lengthening, 1 Tooth	\$495	\$692	-28%
4249 Crown Lengthening, 2 Teeth	\$669	\$950	-30%
*4249 Crown Lengthening, 3+ Teeth	\$850	\$1,163	-27%
*4260 Osseous Surgery, 3+ Teeth	\$865	\$1,377	-37%
4261 Osseous Surgery, 1-3 Teeth	\$525	\$803	-35%
4265 Emdogain (Biora) Per Site	\$400	\$639	-37%
4341 Scaling/Root Planing, 4+	\$175	\$285	-39%
4342 Scaling/Root Planing, 1-3 Teeth	\$131	\$214	-39%
4910 Periodontal Maintenance	\$84	\$146	-42%
4999 Subgingival Irrigation	\$20	\$28	-28%
4999 in conjunction with Scaling/Root Planing, per quad	\$35	\$45	-22%
**4381 Arestin - Minocycline HCl	\$25	\$35	-29%
4263 Bone Graft - Single Site	\$360	\$582	-38%
<i>*Fees listed are per quadrant. **Fees listed are per site.</i>			

	Plan Fee	Usual Fee	Save %
Surgical Implant			
0363 ICAT Scan (per arch)	\$175	\$296	-41%
*6010 Single Implant	\$1,690	\$2,096	-19%
<i>*Does not include cost of restorative treatment.</i>			
Oral Surgery			
7210 Surgical Extraction	\$155	\$218	-29%
7250 Removal of Residual Roots	\$196	\$290	-32%
7286 Biopsy of Oral Tissue-Soft	\$248	\$369	-33%
7510 Incision and Drainage	\$175	\$242	-28%
9220 General Anesthetic (30 Minutes)	\$195	\$290	-33%
9221 General Anesthetic (each addl. 15 Minutes)	\$88	\$131	-33%
9230 Nitrous Oxide	\$45	\$67	-33%
TMJ			
9924 TMJ Consultation	\$150	\$252	-40%
7880 TMJ Appliance	\$850	\$1,500	-43%
9214 TMJ Appliance Adjustment	\$75	\$102	-26%
Teeth Whitening Procedures			
O06 Teeth Whitening Therapy (Upper Arch)	\$99.50	\$124.50	-20%
O07 Teeth Whitening Therapy (Lower Arch)	\$99.50	\$124.50	-20%
O02 Whitening Gel (Per Tube)	\$20	\$28	-29%
*T13 ZOOM Laser Whitening	\$350	\$602	-42%
<i>*Includes upper and lower arch teeth whitening trays. Rates Effective July 2011</i>			

Questions?
I am here to help
Monday through
Friday 7am-4pm.
Call 480-442-0880."

