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**Bonneville Uniserv Office Staff  
 Advantage EPO Plan  
 2009 Co-Pay Schedule**

Underwritten / Administered by: Educators Health Care / Educators Mutual Insurance Association

Code	Code Name	Patient Co-Pay
D0120	Periodic oral evaluation	0
D0140	Limited oral evaluation - problem focused	0
D0145	Oral evaluation - patient under 3 years of age	0
D0150	Comprehensive oral evaluation - new or established patient	0
D0160	Detailed and extensive oral evaluation - problem focused, by report	0
D0170	Re-evaluation - limited, problem focused (established patient; not post-operative visit)	0
D0180	Comprehensive periodontal evaluation - new or established patient	0
D0210	Intraoral - complete series (including bitewings)	0
D0220	Intraoral - periapical first film	0
D0230	Intraoral - periapical each additional film	0
D0240	Intraoral - occlusal film	0
D0250	Extraoral - first film	0
D0270	Bitewing - single film	0
D0272	Bitewings - two films	0
D0273	Bitewings - three films	0
D0274	Bitewings - four films	0
D0277	Vertical bitewings - 7 to 8 films	0
D0330	Panoramic film	0
D0340	Cephalometric film	20% Disc
D1110	Prophylaxis - adult	0
D1120	Prophylaxis - child	0
D1203	Topical application of fluoride (prophylaxis not included) - child	0
D1206	Topical fluoride varnish - therapeutic application for moderate to high caries risk patients	0
D1351	Sealant - per tooth	11
D1510	Space maintainer - fixed - unilateral	85
D1515	Space maintainer - fixed - bilateral	130
D1520	Space maintainer - removable - unilateral	91
D1525	Space maintainer - removable - bilateral	140
D1550	Re-cementation of space maintainer	18
D2140	Amalgam - one surface, primary or permanent	9
D2150	Amalgam - two surfaces, primary or permanent	16
D2160	Amalgam - three surfaces, primary or permanent	23
D2161	Amalgam - four or more surfaces, primary or permanent	32
D2330	Resin-based composite - one surface, anterior	30
D2331	Resin-based composite - two surfaces, anterior	36
D2332	Resin-based composite - three surfaces, anterior	39
D2335	Resin-based composite - four or more surfaces or involving incisal angle (anterior)	46
D2390	Resin-based composite crown, anterior	80
D2391	Resin-based composite - one surface, posterior	32
D2392	Resin-based composite - two surfaces, posterior	44
D2393	Resin-based composite - three surfaces, posterior	58
D2394	Resin-based composite - four or more surfaces, posterior	62
D2542	Onlay - metallic - two surfaces	135
D2543	Onlay - metallic - three surfaces	170
D2544	Onlay - metallic - four or more surfaces	185
D2642	Onlay - porcelain/ceramic - two surfaces	195
D2643	Onlay - porcelain/ceramic - three surfaces	230
D2644	Onlay - porcelain/ceramic - four or more surfaces	250
D2663	Onlay - resin-based composite - three surfaces	220
D2710	Crown - resin (indirect)	120
D2720	Crown - resin with high noble metal	275
D2721	Crown - resin with predominantly base metal	250
D2722	Crown - resin with noble metal	250
D2740	Crown - porcelain/ceramic substrate	275

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D2750	Crown - porcelain fused to high noble metal	290
D2751	Crown - porcelain fused to predominantly base metal	285
D2752	Crown - porcelain fused to noble metal	285
D2780	Crown - 3/4 cast high noble metal	255
D2781	Crown - 3/4 cast predominantly base metal	255
D2782	Crown - 3/4 cast noble metal	255
D2783	Crown - 3/4 porcelain/ceramic	260
D2790	Crown - full cast high noble metal	255
D2791	Crown - full cast predominantly base metal	210
D2792	Crown - full cast noble metal	210
D2915	Recement cast or prefabricated post and core	25
D2920	Recement crown	25
D2930	Prefabricated stainless steel crown - primary tooth	65
D2931	Prefabricated stainless steel crown - permanent tooth	68
D2932	Prefabricated resin crown	90
D2933	Prefabricated stainless steel crown with resin window	110
D2934	Prefabricated esthetic coated stainless steel crown- primary tooth	77
D2940	Sedative filling	31
D2950	Core buildup, including any pins	80
D2951	Pin retention - per tooth, in addition to restoration	15
D2952	Cast post and core in addition to crown	100
D2953	Each additional cast post - same tooth	50
D2954	Prefabricated post and core in addition to crown	81
D2955	Post removal (not in conjunction with endodontic therapy)	85
D2957	Each additional prefabricated post - same tooth	40
D2960	Labial veneer (resin laminate) - chairside	20% Disc
D2961	Labial veneer (resin laminate) - laboratory	20% Disc
D2962	Labial veneer (porcelain laminate) - laboratory	20% Disc
D2980	Crown repair, by report	47
D3110	Pulp cap - direct (excluding final restoration)	20
D3120	Pulp cap - indirect (excluding final restoration)	16
D3220	Therapeutic pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of medicament	50
D3221	Pulpal debridement, primary and permanent teeth	50
D3230	Pulpal therapy (resorbable filling) - anterior, primary tooth (excluding final restoration)	47
D3240	Pulpal therapy (resorbable filling) - posterior, primary tooth (excluding final restoration)	46
D3310	Anterior (excluding final restoration)	165
D3320	Bicuspid (excluding final restoration)	225
D3330	Molar (excluding final restoration)	290
D3331	Treatment of root canal obstruction; non-surgical access	80
D3332	Incomplete endodontic therapy; inoperable or fractured tooth	150
D3346	Retreatment of previous root canal therapy - anterior	165
D3347	Retreatment of previous root canal therapy - bicuspid	200
D3348	Retreatment of previous root canal therapy - molar	255
D3352	Apexification/recalcification - interim medication replacement (apical closure/calcific repair of perforations, root resorption, etc.)	60
D3410	Apicoectomy/periradicular surgery - anterior	20% Disc
D3421	Apicoectomy/periradicular surgery - bicuspid (first root)	20% Disc
D3425	Apicoectomy/periradicular surgery - molar (first root)	20% Disc
D3426	Apicoectomy/periradicular surgery (each additional root)	20% Disc
D3430	Retrograde filling - per root	20% Disc
D3450	Root amputation - per root	20% Disc
D3920	Hemisection (including any root removal), not including root canal therapy	20% Disc
D3950	Canal preparation and fitting of preformed dowel or post	20% Disc
D4210	Gingivectomy or gingivoplasty - four or more contiguous teeth or bounded teeth spaces per quadrant	20% Disc
D4211	Gingivectomy or gingivoplasty - one to three teeth, per quadrant	20% Disc

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D4240	Gingival flap procedure, incl root planing - four or more contiguous teeth or bounded teeth spaces/quad	20% Disc
D4241	Gingival flap procedure, including root planing - one to three teeth, per quadrant	20% Disc
D4245	Apically positioned flap	20% Disc
D4249	Clinical crown lengthening - hard tissue	20% Disc
D4260	Osseous surgery (incl flap entry & closure) - four or more contiguous teeth or bounded teeth spaces/quad	20% Disc
D4261	Osseous surgery (including flap entry and closure) - one to three teeth, per quadrant	20% Disc
D4263	Bone replacement graft - first site in quadrant	20% Disc
D4264	Bone replacement graft - each additional site in quadrant	20% Disc
D4265	Biologic materials to aid in soft and osseous tissue regeneration	20% Disc
D4266	Guided tissue regeneration - resorbable barrier, per site	20% Disc
D4267	Guided tissue regeneration - nonresorbable barrier, per site (includes membrane removal)	20% Disc
D4268	Surgical revision procedure, per tooth	20% Disc
D4270	Pedicle soft tissue graft procedure	20% Disc
D4271	Free soft tissue graft procedure (including donor site surgery)	20% Disc
D4273	Subepithelial connective tissue graft procedures	20% Disc
D4274	Distal or proximal wedge procedure (when not performed in conjunction with surgical procedures in the same anatomical area)	20% Disc
D4275	Soft tissue allograft	20% Disc
D4276	Combined connective tissue and double pedicle graft	20% Disc
D4320	Provisional splinting - intracoronal	20% Disc
D4321	Provisional splinting - extracoronal	20% Disc
D4341	Periodontal scaling and root planing, four or more contiguous teeth or bounded teeth spaces per quadrant	77
D4342	Periodontal scaling and root planing, one to three teeth, per quadrant	45
D4355	Full mouth debridement to enable comprehensive periodontal evaluation and diagnosis	50
D4381	Localized delivery of chemotherapeutic agents via a controlled release vehicle into diseased crevicular tissue, per tooth, by report	20% Disc
D4910	Periodontal maintenance	50
D5110	Complete denture - maxillary	400
D5120	Complete denture - mandibular	400
D5130	Immediate denture - maxillary	420
D5140	Immediate denture - mandibular	420
D5211	Maxillary partial denture - resin base (including any conventional clasps, rests and teeth)	325
D5212	Mandibular partial denture - resin base (including any conventional clasps, rests and teeth)	325
D5213	Maxillary partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	405
D5214	Mandibular partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	405
D5225	Maxillary partial denture- flexible base (including any clasps, rests and teeth)	320
D5226	Mandibular partial denture- flexible base (including any clasps, rests and teeth)	320
D5281	Removable unilateral partial denture - one piece cast metal (including clasps and teeth)	275
D5410	Adjust complete denture - maxillary	25
D5411	Adjust complete denture - mandibular	25
D5421	Adjust partial denture - maxillary	25
D5422	Adjust partial denture - mandibular	24
D5510	Repair broken complete denture base	42
D5520	Replace missing or broken teeth - complete denture (each tooth)	30
D5610	Repair resin denture base	36
D5620	Repair cast framework	28
D5630	Repair or replace broken clasp	35
D5640	Replace broken teeth - per tooth	28
D5650	Add tooth to existing partial denture	34
D5660	Add clasp to existing partial denture	20% Disc
D5710	Rebase complete maxillary denture	20% Disc
D5711	Rebase complete mandibular denture	20% Disc

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D5720	Rebase maxillary partial denture	20% Disc
D5721	Rebase mandibular partial denture	20% Disc
D5730	Reline complete maxillary denture (chairside)	80
D5731	Reline complete mandibular denture (chairside)	80
D5740	Reline maxillary partial denture (chairside)	75
D5741	Reline mandibular partial denture (chairside)	75
D5750	Reline complete maxillary denture (laboratory)	140
D5751	Reline complete mandibular denture (laboratory)	135
D5760	Reline maxillary partial denture (laboratory)	125
D5761	Reline mandibular partial denture (laboratory)	125
D5810	Interim complete denture (maxillary)	20% Disc
D5811	Interim complete denture (mandibular)	20% Disc
D5820	Interim partial denture (maxillary)	20% Disc
D5821	Interim partial denture (mandibular)	20% Disc
D5850	Tissue conditioning, maxillary	20% Disc
D5851	Tissue conditioning, mandibular	20% Disc
D5860	Overdenture - complete, by report	20% Disc
D5861	Overdenture - partial, by report	20% Disc
D5899	Unspecified removable prosthodontic procedure, by report	20% Disc
D6000-D6199	Unspecified implant procedure, by report	20% Disc
D6205	Pontic - indirect resin based composite	110
D6210	Pontic - cast high noble metal	250
D6211	Pontic - cast predominantly base metal	210
D6212	Pontic - cast noble metal	215
D6240	Pontic - porcelain fused to high noble metal	290
D6241	Pontic - porcelain fused to predominantly base metal	280
D6242	Pontic - porcelain fused to noble metal	280
D6245	Pontic - porcelain/ceramic	270
D6250	Pontic - resin with high noble metal	270
D6251	Pontic - resin with predominantly base metal	245
D6252	Pontic - resin with noble metal	255
D6608	Onlay - porcelain/ceramic, two surfaces	195
D6609	Onlay - porcelain/ceramic, three or more surfaces	225
D6610	Onlay - cast high noble metal, two surfaces	135
D6611	Onlay - cast high noble metal, three or more surfaces	140
D6612	Onlay - cast predominantly base metal, two surfaces	137
D6613	Onlay - cast predominantly base metal, three or more surfaces	145
D6614	Onlay - cast noble metal, two surfaces	130
D6615	Onlay - cast noble metal, three or more surfaces	140
D6720	Crown - resin with high noble metal	250
D6721	Crown - resin with predominantly base metal	250
D6722	Crown - resin with noble metal	250
D6740	Crown - porcelain/ceramic	261
D6750	Crown - porcelain fused to high noble metal	275
D6751	Crown - porcelain fused to predominantly base metal	275
D6752	Crown - porcelain fused to noble metal	275
D6780	Crown - 3/4 cast high noble metal	252
D6781	Crown - 3/4 cast predominantly base metal	255
D6782	Crown - 3/4 cast noble metal	255
D6783	Crown - 3/4 porcelain/ceramic	260
D6790	Crown - full cast high noble metal	250
D6791	Crown - full cast predominantly base metal	210
D6792	Crown - full cast noble metal	210
D6930	Recement fixed partial denture	34
D6970	Cast post and core in addition to fixed partial denture retainer	110
D6972	Prefabricated post and core in addition to fixed partial denture retainer	81
D6973	Core build up for retainer, including any pins	20% Disc

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D6976	Each additional cast post - same tooth	20% Disc
D6977	Each additional prefabricated post - same tooth	20% Disc
D7111	Coronal remnants - deciduous tooth	21
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	28
D7210	Surgical removal of erupted tooth requiring elevation of mucoperiosteal flap and removal of bone and/or section of tooth	60
D7220	Removal of impacted tooth - soft tissue	75
D7230	Removal of impacted tooth - partially bony	100
D7240	Removal of impacted tooth - completely bony	115
D7241	Removal of impacted tooth - completely bony, with unusual surgical complications	120
D7250	Surgical removal of residual tooth roots (cutting procedure)	65
D7270	Tooth reimplantation and/or stabilization of accidentally evulsed or displaced tooth	140
D7280	Surgical access of an unerupted tooth	20% Disc
D7283	Placement of device to facilitate eruption of impacted tooth	20% Disc
D7285	Biopsy of oral tissue - hard (bone, tooth)	100
D7286	Biopsy of oral tissue - soft (all others)	155
D7287	Cytology sample collection	56
D7288	Brush biopsy- transepithelial sample collection	56
D7290	Surgical repositioning of teeth	20% Disc
D7310	Alveoloplasty in conjunction with extractions - per quadrant	20% Disc
D7311	Alveoloplasty in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	20% Disc
D7320	Alveoloplasty not in conjunction with extractions - per quadrant	20% Disc
D7321	Alveoloplasty not in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	20% Disc
D7410	Excision of benign lesion diameter up to 1.25 cm	20% Disc
D7411	Excision of benign lesion greater than 1.25 cm	20% Disc
D7471	Removal of lateral exostosis (maxilla or mandible)	20% Disc
D7510	Incision and drainage of abscess - intraoral soft tissue	62
D7511	Incision and drainage of abscess - intraoral soft tissue - complicated (incl drainage of mult fascial spaces)	72
D7810-D7899	Unspecified TMD therapy, by report	20% Disc
D7960	Frenulectomy (frenectomy or frenotomy) - separate procedure	100
D7971	Excision of pericoronal gingiva	20% Disc
D8010-D8680	Orthodontic retention (removal of appliances, construction and placement of retainer(s))	25% Disc
D9110	Palliative (emergency) treatment of dental pain - minor procedure	30
D9120	Fixed partial denture sectioning	20% Disc
D9210	Local anesthesia not in conjunction with operative or surgical procedures	15
D9215	Local anesthesia	9
D9220	Deep sedation/general anesthesia - first 30 minutes	150
D9221	Deep sedation/general anesthesia - each additional 15 minutes	50
D9230	Analgesia, anxiolysis, inhalation of nitrous oxide	18
D9241	Intravenous conscious sedation/analgesia - first 30 minutes	100
D9248	Non-intravenous conscious sedation	110
D9310	Consultation (diagnostic service by dentist or physician other than practitioner providing treatment)	30
D9430	Office visit for observation (during regularly scheduled hours) - no other services performed	20
D9440	Office visit - after regularly scheduled hours	40
D9610	Therapeutic parenteral drug, single administration	20% Disc
D9612	Therapeutic parenteral drug, two or more administrations, different medications	20% Disc
D9940	Occlusal guard, by report	150
D9951	Occlusal adjustment - limited	30
D9972	External bleaching- per arch	20% Disc
D9973	External bleaching- per tooth	20% Disc

Benefits illustrated are in summary only. Refer to your Group Certificate booklet for a complete description of benefits, limitations and exclusions.