

01/01/2017

Service Code	Description	Tariff Vat Excl	Reimbursable Portion	Member Out Of Pocket
8120	TREATMENT PLAN COMPL	0.00	0.00	0.00
8121	DIAGNOSTIC PHOTOGRAP	72.00	65.00	7.00
8132	PULP REMOVAL	163.00	147.00	16.00
8133	RE-CEMENTING OF INL	102.00	92.00	10.00
8135	REMOVAL OF INLAYS A	203.00	183.00	20.00
8137	TEMPORARY CROWN	349.00	314.00	35.00
8139	APPOINTMENT NOT KEPT	0.00	0.00	0.00
8141	INHALATION SEDATION	746.00	671.00	75.00
8143	INHALATION SEDATION	40.00	36.00	4.00
8144	INTRAVENOUS SEDATIO	46.00	41.00	5.00
8145	LOCAL ANAESTHETIC	63.00	57.00	6.00
8147	USE OF OWN MONITORI	159.00	143.00	16.00
8151	ORAL HYGIENE INSTRU	102.00	92.00	10.00
8153	FOLLOW-UP VISIT FOR	74.00	67.00	7.00
8159	SCALING & POLISHING	290.00	261.00	29.00
8162	FLOURIDE ADULT	102.00	92.00	10.00
8169	OCCLUSAL GUARD	390.00	351.00	39.00
8119	STUDY MODELS - MOUNT	181.00	163.00	18.00
8118	EXTRAORAL RADIOGRAPH	268.00	241.00	27.00
8117	STUDY MODELS - UNMOU	72.00	65.00	7.00
8116	EXTRAORAL RADIOGRAPH	268.00	241.00	27.00
8115	EXTRA-ORAL FILM PER	289.00	260.00	29.00
8114	HAND-WRIST RADIOGRAP	268.00	241.00	27.00
8113	OCCLUSAL RADIOGRAPHS	117.00	105.00	12.00
8112	INTRAORAL RADIOGRAPH	93.00	84.00	9.00
8111	DENTAL TESTIMONY	0.00	0.00	0.00
8110	STERILIZED INSTRUMEN	38.00	34.00	4.00
8109	INFECTION CONTOL	17.00	15.00	2.00
8108	MAXIMUM FOR 8107	519.00	467.00	52.00
8107	INTRA-ORAL FILM	71.00	64.00	7.00
8106	SPECIAL REPORT	170.00	153.00	17.00
8099	LAB FEES	0.00	0.00	0.00
8025	MODIFIER - HANDLING	28.00	25.00	3.00
8011	MODIFIER - UNUSUAL C	0.00	0.00	0.00
8008	MODIFIER - AFTER HOU	0.00	0.00	0.00
8007	SUBSEQUENT CONSUL	0.00	0.00	0.00
8005	MODIFIER - MAXIMUM M	292.00	263.00	29.00
8003	HOSPITAL VISIT (BY A	189.00	170.00	19.00
8001	MODIFIER 8001	0.00	0.00	0.00
3108	ORBITALE RECON	0.00	0.00	0.00
0201	MATERIAL COST INHOUS	0.00	0.00	0.00
8171	MOUTH PROTECTORS	119.00	107.00	12.00
8354	RESIN - FOUR OR MOR	372.00	335.00	37.00
8355	COMPOSITE VENEERS	353.00	318.00	35.00
8357	PREFAB MTAL CROWN	208.00	187.00	21.00
8361	INLAY METALLIC - ON	309.00	278.00	31.00
8362	INLAY MAETLLIC - TW	4.400.00	3,960.00	440.00
8363	INALY METALLIC - TH	753.00	678.00	75.00
8364	INLAY METALLIC - FO	910.00	819.00	91.00
8366	PIN RETENTION AS PA	150.00	135.00	15.00
8367	RESIN - ONE SURFACE	241.00	217.00	24.00
8368	RESIN - TWO SURFACE	296.00	266.00	30.00
8369	RESIN - THREE SURFA	360.00	324.00	36.00
8370	RESIN-4 MORE SURF PO	388.00	349.00	39.00
8410	PROVISIONAL CROWN	0.00	0.00	0.00
8509	ELEC RECORD WITH CO	1,263.00	1,137.00	126.00
8516	REMOVE BRIDGE	202.00	182.00	20.00
8533	IMPLANT SUPP REMOV C	2,494.00	2,245.00	249.00
8172	COST OF ORTHOTIC DEV	0.00	0.00	0.00
8176	PERIODONTAL SCREEN	139.00	125.00	14.00
8192	APPOSITIONING	501.00	451.00	50.00
8195	PLACEMENT OF A SECON	919.00	827.00	92.00
8201	SINGLE TOOTH	152.00	137.00	15.00
8202	EACH ADDITIONAL TOOT	60.00	54.00	6.00
8220	COST OF SUTURE MATER	101.00	91.00	10.00
8232	FULL UPPER OR LOWER	1,012.00	911.00	101.00
8233	8233	1,094.00	985.00	109.00
8255	8255	236.00	212.00	24.00

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8301	DIRECT PULP CAPPING	136.00	122.00	14.00
8328	EACH ADDITIONAL CAN	189.00	170.00	19.00
8335	FIRST CANAL - ANTER	462.00	416.00	46.00
8341	AMALGAM - ONE SURFA	202.00	182.00	20.00
8342	AMALGAM - TWO SURFA	250.00	225.00	25.00
8343	AMALGAM - THREE SUR	303.00	273.00	30.00
8344	AMALGAM - FOUR AND	339.00	305.00	34.00
8345	PREFORMED POST RETE	200.00	180.00	20.00
8347	PIN RETENTION FOR P	100.00	90.00	10.00
8348	PIN RETENTION FOR P	93.00	84.00	9.00
8349	CARVING OR CONTOURI	41.00	37.00	4.00
8351	RESIN - ONE SURFACE	222.00	200.00	22.00
8352	RESIN - TWO SURFACE	280.00	252.00	28.00
8353	RESIN - THREE SURFA	334.00	301.00	33.00
8534	IMPLANT SUPP REMOV P	1,994.00	1,795.00	199.00
8840	TREATMENT PLANNING -	716.00	644.00	72.00
8852	OCCLUSAL ORTH APPLI	516.00	464.00	52.00
8901	CONSULTATION - MFOS	291.00	262.00	29.00
8902	DETAILED CLINICAL EX	552.00	497.00	55.00
8903	CONSULTATION - MFOS	184.00	166.00	18.00
8904	SUBSEQUENT CONSULT	139.00	125.00	14.00
8905	WEEKEND AND NIGHT VI	270.00	243.00	27.00
8906	SURGICAL PROCEDURE	0.00	0.00	0.00
8907	SUBEQUENT CONSULTATI	0.00	0.00	0.00
8908	REMOVAL ROOTS	2,017.00	1,815.00	202.00
8909	CLOSURE ORAL FISTULA	1,546.00	1,391.00	155.00
8911	CALDWELL-LUC PROCEDU	604.00	544.00	60.00
8917	BIOPSIES - INTRA-ORA	342.00	308.00	34.00
8919	BIOPSY OF BONE - NEE	593.00	534.00	59.00
8921	BIOPSY OF BONE - OPE	971.00	874.00	97.00
8931	POST-EXTRACTION HAEM	447.00	402.00	45.00
8536	CROWN-IMPLANTABUT -	2,061.00	1,855.00	206.00
8537	CROWN-IMPLANTABUT W	2,061.00	1,855.00	206.00
8538	CROWN-IMPLANTABUT C	2,061.00	1,855.00	206.00
8546	CROWN RETRAINER-IMPL	2,061.00	1,855.00	206.00
8547	CROWN RETRAINER-IMPL	2,061.00	1,855.00	206.00
8548	CROWN RETRAINER-IMPL	2,061.00	1,855.00	206.00
8553	OCCLUSAL ADJUSTMENT	226.00	203.00	23.00
8578	PREFABRICATED ABUTME	189.00	170.00	19.00
8579	CUSTOM ABUTMENT	1,766.00	1,589.00	177.00
8581	SINGLE POST	138.00	124.00	14.00
8584	DENTAL IMPLANT SUPPO	3,741.00	3,367.00	374.00
8594	REPAIR IMPLANT SUPPO	190.00	171.00	19.00
8595	REPAIR IMPLANT ABUTM	190.00	171.00	19.00
8600	COST OF IMPLANT COMP	0.00	0.00	0.00
8654	DENTURE FXD IMPL/ABU	4,207.00	3,786.00	421.00
8655	DENTURE FXD IMPL/ABU	2,528.00	2,275.00	253.00
8660	PERCUTANEOUS 'HOKE'	387.00	348.00	39.00
8761	MASTICATORY MUCOSAL	823.00	741.00	82.00
8762	MASTICATORY MUCOSAL	1,237.00	1,113.00	124.00
8767	BONE REGENERATION -	1,017.00	915.00	102.00
8769	SUBSEQUENT REMOVAL	323.00	291.00	32.00
8770	COST OF BONE REGENER	0.00	0.00	0.00
8772	SUBMUCOSAL CONNECTIV	832.00	749.00	83.00
8811	TRACING AND ANALYSIS	44.00	40.00	4.00
8933	HAEMORRHAGE	1,547.00	1,392.00	155.00
8981	SURGICAL EXPOSURE OF	1,107.00	996.00	111.00
8983	CORTICOTOMY - FIRST	881.00	793.00	88.00
8984	CORTICOTOMY - ADJACE	447.00	402.00	45.00
8985	FRENECTOMY	809.00	728.00	81.00
8935	SEPTIC SOCKET	117.00	105.00	12.00
8937	ERUPTED TOOTH	593.00	534.00	59.00
8941	UNERUPTED OR IMPACT	950.00	855.00	95.00
8943	SECOND TOOTH	517.00	465.00	52.00
8945	THIRD TOOTH	292.00	263.00	29.00
8947	FOURTH AND SUBSEQ	0.00	0.00	0.00
8953	RESIDUAL ROOTS	593.00	534.00	59.00
9004	LATERALIZATION OF IN	4,114.00	3,703.00	411.00

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9005	ALVEOLAR RIDGE AUGME	4,298.00	3,868.00	430.00
9007	TOTAL ALVEOLAR RIDGE	2,704.00	2,434.00	270.00
9008	ALVEOLAR RIDGE AUGME	1,021.00	919.00	102.00
9009	ALVEOLAR RIDGE AUGME	1,859.00	1,673.00	186.00
9010	SINUS LIFT PROCEDURE	2,792.00	2,513.00	279.00
9011	ALVEOLAR RIDGE AUGME	522.00	470.00	52.00
9013	EXTRA-RAL APPROACH	716.00	644.00	72.00
9015	APICECTOMY (INCLUDIN	921.00	829.00	92.00
9016	APICECTOMY (INCLUDIN	1,839.00	1,655.00	184.00
9017	DECORTICATION SAUCE	2,523.00	2,271.00	252.00
9019	SEQUESTRECTOMY - INT	822.00	740.00	82.00
8955	SURGICAL REMOVAL OF	0.00	0.00	0.00
8957	ALVEOLOLOGY OR ALVEO	809.00	728.00	81.00
8958	TRACHEOTOMY	680.00	612.00	68.00
9025	CLOSED REDUCTION FIX	2,040.00	1,836.00	204.00
9027	COMPOUND FRACTURE	1,911.00	1,720.00	191.00
9029	METAL CAP SPLINTAGE	3,174.00	2,857.00	317.00
9031	OPEN REDUCTION	4,703.00	4,233.00	470.00
9032	REDUCTION OF MASSETE	0.00	0.00	0.00
9033	REDUCTION OF MASSETE	0.00	0.00	0.00
9035	LE FORT I	2,871.00	2,584.00	287.00
9037	LE FORT II	4,703.00	4,233.00	470.00
9039	LE FORT III	6,747.00	6,072.00	675.00
9041	GILLIES ELEVATION	2,040.00	1,836.00	204.00
9043	UNSTABLE ZYGOMA	4,091.00	3,682.00	409.00
9045	MULTIPLE GRAFTING	6,129.00	5,516.00	613.00
8959	PHARYNGOSTOMY	680.00	612.00	68.00
8961	AUTO-TRANSPLANTATION	1,327.00	1,194.00	133.00
8962	HARVEST ILIAC CREST	401.00	361.00	40.00
8963	HARVEST RIB GRAFT P	562.00	506.00	56.00
8964	HARVEST CRANIUM GRAF	440.00	396.00	44.00
8965	PERIPHERAL NEURECTOM	1,327.00	1,194.00	133.00
8966	FUNCTIONAL REPAIR FL	1,847.00	1,662.00	185.00
8967	INTRA-ORAL APPROACH	1,858.00	1,672.00	186.00
8969	EXTRA-RAL APPROACH	2,956.00	2,660.00	296.00
8971	SOFT TISSUE TUMOR	589.00	530.00	59.00
8973	TUMORS OF JAWS	2,956.00	2,660.00	296.00
8975	HEMIRESECTION OF JAW	3,103.00	2,793.00	310.00
8977	MAJOR REPAIR UPPER J	3,101.00	2,791.00	310.00
8979	HARVESTING OF AUTOGE	267.00	240.00	27.00
9063	LE FORT II OSTEOTOMY	17,178.00	15,460.00	1,718.00
9065	LE FORT III OSTEOTOM	25,744.00	23,170.00	2,574.00
9066	SURGICAL ASSISTED MA	4,091.00	3,682.00	409.00
9069	FUNCTIONAL TONGUE RE	3,064.00	2,758.00	306.00
9071	GENIOHYOIDOTOMY	1,839.00	1,655.00	184.00
9072	FUNCTIONAL CLOSURE	13,450.00	12,105.00	1,345.00
9073	BITE PLATE FOR TMJ D	0.00	0.00	0.00
9074	DIAGNOSTIC ARTHROSCO	2,031.00	1,828.00	203.00
9075	CONDYLECTOMY CORONO	3,401.00	3,061.00	340.00
9076	ARTHROCENTESIS - TMJ	1,121.00	1,009.00	112.00
9077	INTRA-ARTICULAR INJE	307.00	276.00	31.00
9079	TRIGGER POINT INJECT	239.00	215.00	24.00
9081	CONDYLE NECK OSTEOTO	2,040.00	1,836.00	204.00
9083	TEMPOROMANDIBULAR JO	5,102.00	4,592.00	510.00
9085	TEMPOROMANDIBULAR JO	406.00	365.00	41.00
9087	TEMPOROMANDIBULAR JO	822.00	740.00	82.00
9003	REPOSITION MENTAL FO	2,553.00	2,298.00	255.00
9021	MINOR SOFT TISSUE	696.00	626.00	70.00
9023	MAJOR SOFT TISSUE	1,293.00	1,164.00	129.00
9024	DENTO-ALVEOLAR FRACT	921.00	829.00	92.00
8987	REDUCE MYLOHYOID RID	1,327.00	1,194.00	133.00
8989	TORUS MANDIB REDUCTI	1,327.00	1,194.00	133.00
8991	TORUS PALATINUS REDU	1,327.00	1,194.00	133.00
8993	REDUCT OF TUBEROSITY	593.00	534.00	59.00
8995	GINGIVECTOMY - PER J	1,181.00	1,063.00	118.00
8997	SULCOPLASTY / VESTIB	1,364.00	1,228.00	136.00
9096	SALIVARY GLAND	3,364.00	3,028.00	336.00
9185	PLACEMENT OF A THIRD	893.00	804.00	89.00

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9187	COST OF ENDOSTEAL IM	0.00	0.00	0.00
9188	COST OF PREFABRICATE	0.00	0.00	0.00
9189	COST OF OTHER IMPLA	0.00	0.00	0.00
9190	EXPOSURE OF A SINGLE	657.00	591.00	66.00
9191	EXPOSURE OF A SECOND	493.00	444.00	49.00
9192	EXPOSURE OF A THIRD	331.00	298.00	33.00
9198	IMPLANT REMOVAL	907.00	816.00	91.00
9220	REPAIR CLEFT H/PAL -	7,512.00	6,761.00	751.00
9222	REPAIR CLEFT H/PAL -	9,537.00	8,583.00	954.00
9224	REPAIR CLEFT H/PAL -	14,209.00	12,788.00	1,421.00
9226	REPAIR CLEFT S/PAL -	6,296.00	5,666.00	630.00
9228	REPAIR SOFT PALATUM	9,140.00	8,226.00	914.00
9230	REPAIR SUBM CLEFT BI	6,807.00	6,126.00	681.00
9232	VELOPHARYNGEAL RECON	7,002.00	6,302.00	700.00
9234	VELOPHARYNGEAL RECON	7,489.00	6,740.00	749.00
9238	REPAIR OF ORO-NASAL	4,283.00	3,855.00	428.00
9240	REPAIR OF ORO-NASAL	7,473.00	6,726.00	747.00
9246	SEC PERIOSTEAL SWIVE	3,734.00	3,361.00	373.00
9248	LIP ADHESION	1,396.00	1,256.00	140.00
9250	UNILATERAL CLEFT LIP	2,458.00	2,212.00	246.00
9252	UNILATERAL CLEFT LIP	3,333.00	3,000.00	333.00
9254	BILATERAL CLEFT LIP	3,434.00	3,091.00	343.00
9256	BILATERAL CLEFT LIP	5,306.00	4,775.00	531.00
9258	ANTERIOR NASAL FLOOR	1,339.00	1,205.00	134.00
9260	PARTIAL CLEFT LIP DE	1,339.00	1,205.00	134.00
9262	TOTAL REVISION OF SE	3,026.00	2,723.00	303.00
9264	ABBE-FLAP - TWO STAG	3,427.00	3,084.00	343.00
9266	COLUMELLA RECONSTRUC	2,024.00	1,822.00	202.00
9268	CLEFT DEFORMITY NOSE	2,574.00	2,317.00	257.00
9270	CLEFT DEFORMITY NOSE	4,069.00	3,662.00	407.00
9272	PARANASAL AUGM FOR D	2,024.00	1,822.00	202.00
9180	PLACEMENT IMPLANT	2,782.00	2,504.00	278.00
9181	PLACEMENT SUB-PERIOS	2,782.00	2,504.00	278.00
9182	PLACEMENT OF ENDOSTE	1,392.00	1,253.00	139.00
9183	PLACEMENT OF A SINGL	1,290.00	1,161.00	129.00
9184	PLACEMENT OF A SECON	1,332.00	1,199.00	133.00
9091	TEMPOROMANDIBULAR JO	5,102.00	4,592.00	510.00
9092	TOTAL JOINT RECONSTR	13,620.00	12,258.00	1,362.00
9093	REMOVAL SALIVARY CAL	921.00	829.00	92.00
9095	SUBLINGUAL SALIVARY	2,271.00	2,044.00	227.00
9046	PLACEMENT OF ZYGOMAT	2,699.00	2,429.00	270.00
9047	RESTORE MASTICATORY	8,577.00	7,719.00	858.00
9048	REMOVAL OF INTERNAL	786.00	707.00	79.00
9049	ANTERIOR SEGMENTAL	7,148.00	6,433.00	715.00
9050	TOTAL SUBAPICAL OSTE	13,076.00	11,768.00	1,308.00
9051	GENIOPLASTY	4,091.00	3,682.00	409.00
9052	MIDFACIAL EXPOSURE	6,476.00	5,828.00	648.00
9053	CORONOIDECTOMY (INTR	2,552.00	2,297.00	255.00
9055	POSTERIOR OSTEOTOMY	7,148.00	6,433.00	715.00
9057	ANTERIOR OSTEOTOMY	7,148.00	6,433.00	715.00
9059	LE FORT I OSTEOTOMY	13,450.00	12,105.00	1,345.00
9060	LE FORT I OSTEOTOMY	15,099.00	13,589.00	1,510.00
9061	PALATAL OSTEOTOMY	4,703.00	4,233.00	470.00
9062	LE FORT II	17,168.00	15,451.00	1,717.00
9089	TEMPOROMANDIBULAR JO	2,040.00	1,836.00	204.00
9274	ANTERIOR TABLE, FRON	0.00	0.00	0.00
9276	ANTERIOR AND POSTERI	0.00	0.00	0.00
9278	REPAIR MEDIAL CANTHA	0.00	0.00	0.00
9280	OPEN REDUCTION AND F	0.00	0.00	0.00
9282	MANIPULATION AND IMM	0.00	0.00	0.00
9284	MUSCULOFASCIAL FLAP	0.00	0.00	0.00
9286	MUSCULOCRANIAL FLAP	0.00	0.00	0.00
9288	BUCCAL FAT PAD (MAJO	0.00	0.00	0.00
9290	ALVEOLUS ONLY, LEVEL	0.00	0.00	0.00
9292	ALVEOLUS AND SINUS O	0.00	0.00	0.00
9294	ALVEOLUS, SINUS, NAS	0.00	0.00	0.00
9296	ALVEOLUS, SINUS, NAS	0.00	0.00	0.00
9298	ALVEOLUS, SINUS, NAS	0.00	0.00	0.00

**BOMAID MAXILLO FACIAL SURGEON TARRIFS EFFECTIVE
01/01/2017**

Service Code	Description	Tariff Vat Excl	Reimbursable Portion	Member Out Of Pocket
80008	MODIFIER REF NHN OXY	0.00	0.00	0.00
M8003	MODIFIER - MINIMUM A	0.00	0.00	0.00
M8005	MODIFIER - MAXIMUM M	421.00	379.00	42.00
M8007	SCHEDULED FEE	0.00	0.00	0.00
M8009	MODIFIER - SECOND SU	0.00	0.00	0.00
M8025	MODIFIER -HANDLING	0.00	0.00	0.00
M0009A	MINIMUM FEE - 20%	0.00	0.00	0.00
3814330	3814330	0.00	0.00	0.00
3814340	3814340	0.00	0.00	0.00
BONUS	BONUS	0.00	0.00	0.00