

# Copay Plan

City of Tallahassee

<b>Delta Dental PPO</b>		<b>1/1/17 – Copay Plan</b>	
	<b>Delta Dental PPO Dentist</b>	<b>Delta Dental Premier Dentist</b>	<b>Non-Delta Dental Dentist</b>
<b>Maximum Contract Allowance</b>	PPO Contracted Fees	PPO Contracted Fees	PPO Contracted Fees
<b>Benefits</b>			
Diagnostic & Preventive	See Schedule*	50%	50%
Sealants	See Schedule*	40%	40%
Space Maintainers	See Schedule*	40%	40%
Basic Restorative	See Schedule*	40%	40%
Simple Extractions	See Schedule*	40%	40%
Non-Surgical Periodontics	See Schedule*	40%	40%
Major Restorative	See Schedule*	25%	25%
Endodontics	See Schedule*	25%	25%
Surgical Periodontics	See Schedule*	25%	25%
Other Oral Surgery	See Schedule*	25%	25%
Stainless Steel Crown	See Schedule*	25%	25%
Denture Repair and Relining	See Schedule*	25%	25%
Prosthodontics-Fixed & removable	See Schedule*	25%	25%
Orthodontics – Child	See Schedule*	25%	25%
Orthodontics – Adult	See Schedule*	25%	25%
Implants	Not Covered	Not Covered	Not Covered
TMJ	Not Covered	Not Covered	Not Covered
<b>Deductible (Does not apply to Diagnostic &amp; Preventive Services)</b>			
Per Patient / Calendar year	\$0	\$50	\$50
Per Family / Calendar year	\$0	\$150	\$150
<b>Maximums</b>			
Per Patient / Calendar year	Unlimited	\$500	\$500
Lifetime Ortho maximum/ Patient	See Schedule*	\$500	\$500
Lifetime TMJ Maximum	Not Covered	Not Covered	Not Covered

## Delta Dental PPO Copay Plan

Class	CDT Code	Description	PPO Network Copayment*	Non-PPO Network Coinsurance +**
Class I	D0120	Periodic oral evaluation - established patient	\$0.00	50.00%
Class I	D0140	Limited oral evaluation - problem focused	\$0.00	50.00%
Class I	D0145	Oral evaluation for a patient under three years of age and counseling with primary caregiver	\$0.00	50.00%
Class I	D0150	Comprehensive oral evaluation - new or established patient	\$0.00	50.00%
Class I	D0160	Detailed and extensive oral evaluation - problem focused, by report	\$0.00	50.00%
Class I	D0170	Re-evaluation - limited, problem focused (established patient; not post-operative visit)	\$0.00	50.00%
Class I	D0180	Comprehensive periodontal evaluation - new or established patient	\$0.00	50.00%
Class I	D0210	Intraoral – complete series (including bitewings)	\$0.00	50.00%
Class I	D0220	Intraoral - periapical first film	\$0.00	50.00%
Class I	D0230	Intraoral - periapical each additional film	\$0.00	50.00%
Class I	D0240	Intraoral - occlusal film	\$0.00	50.00%
Class I	D0250	Extraoral - first film	\$0.00	50.00%
Class I	D0260	Extraoral - each additional film	\$0.00	50.00%
Class I	D0270	Bitewing <i>radiograph</i> - single film	\$0.00	50.00%
Class I	D0272	Bitewings <i>radiographs</i> - two films	\$0.00	50.00%
Class I	D0273	Bitewings <i>radiographs</i> -three films	\$0.00	50.00%
Class I	D0274	Bitewings <i>radiographs</i> - four films - <i>limited to 1 series every 6 months</i>	\$0.00	50.00%
Class I	D0277	Vertical bitewings - 7 to 8 films	\$0.00	50.00%
Class I	D0330	Panoramic film	\$0.00	50.00%
Class I	D0340	Cephalometric radiographic image	\$0.00	50.00%
Class I	D0350	2D oral/facial photographic image obtained intra-orally or extra-orally	\$0.00	50.00%
Class I	D0460	Pulp vitality tests	\$0.00	50.00%
Class I	D0470	Diagnostic casts	\$0.00	50.00%
Class I	D1110	Prophylaxis <i>cleaning</i> - adult - <i>1 per 6 month period</i>	\$0.00	50.00%
Class I	D1120	Prophylaxis <i>cleaning</i> - child - <i>1 per 6 month period</i>	\$0.00	50.00%
Class I	D1206	Topical fluoride varnish; therapeutic application for moderate to high caries risk patients - <i>1 per 6 month period</i>	\$0.00	50.00%
Class I	D1208	Topical application of fluoride	\$0.00	50.00%
Class I	D1351	Sealant - per tooth - <i>limited to permanent molars through age 15</i>	\$0.00	50.00%
Class II	D1510	Space maintainer - fixed - unilateral	\$48.80	40.00%
Class II	D1515	Space maintainer - fixed - bilateral	\$64.89	40.00%
Class II	D1520	Space maintainer - removable - unilateral	\$62.68	40.00%
Class II	D1525	Space maintainer - removable - bilateral	\$87.01	40.00%
Class II	D1550	Recementation of space maintainer	\$10.88	40.00%
Class II	D2140	Amalgam - one surface, primary or permanent	\$21.49	40.00%
Class II	D2150	Amalgam - two surfaces, primary or permanent	\$27.03	40.00%
Class II	D2160	Amalgam - three surfaces, primary or permanent	\$31.97	40.00%
Class II	D2161	Amalgam - four or more surfaces, primary or permanent	\$39.89	40.00%
Class II	D2330	Resin-based composite - one surface, anterior (tooth colored)	\$20.92	40.00%
Class II	D2331	Resin-based composite - two surfaces, anterior (tooth colored)	\$27.84	40.00%
Class II	D2332	Resin-based composite - three surfaces, anterior (tooth colored)	\$34.55	40.00%
Class II	D2335	Resin-based composite - four or more surfaces or involving incisal angle (anterior)	\$40.59	40.00%
Class II	D2390	Resin-based composite crown, anterior	\$45.46	40.00%
Class II	D2391	Resin-based composite - one surface, posterior	\$23.64	40.00%
Class II	D2392	Resin-based composite - two surfaces, posterior	\$33.21	40.00%
Class II	D2393	Resin-based composite - three surfaces, posterior	\$40.79	40.00%
Class II	D2394	Resin-based composite - four or more surfaces, posterior	\$46.30	40.00%
Class II	D4341	Periodontal scaling and root planing, four or more teeth per quadrant - <i>limited to 4 quadrants during any 12 consecutive months</i>	\$35.70	40.00%

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Class II	D4342	Periodontal scaling and root planing, one to three teeth, per quadrant - <i>limited to 4 quadrants during any 12 consecutive months</i>	\$18.74	40.00%
Class II	D4355	Full mouth debridement to enable comprehensive evaluation and diagnosis - <i>limited to 1 treatment in any 12 consecutive months</i>	\$24.07	40.00%
Class II	D4910	Periodontal maintenance - <i>limited to 1 treatment each 6-month period</i>	\$21.03	40.00%
Class II	D7111	Extraction, coronal remnants - deciduous teeth	\$19.31	40.00%
Class II	D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	\$24.31	40.00%
Class III	D2510	Inlay - metallic - one surface	\$273.03	25.00%
Class III	D2520	Inlay - metallic - two surfaces	\$343.77	25.00%
Class III	D2530	Inlay - metallic - three or more surfaces	\$377.55	25.00%
Class III	D2542	Onlay - metallic - two surfaces	\$386.01	25.00%
Class III	D2543	Onlay - metallic - three surfaces	\$379.24	25.00%
Class III	D2544	Onlay - metallic - four or more surfaces	\$391.33	25.00%
Class III	D2610	Inlay - porcelain/ceramic - one surface	\$321.30	25.00%
Class III	D2620	Inlay - porcelain/ceramic - two surfaces	\$376.33	25.00%
Class III	D2630	Inlay - porcelain/ceramic - three or more surfaces	\$381.32	25.00%
Class III	D2642	Onlay - porcelain/ceramic - two surfaces	\$387.05	25.00%
Class III	D2643	Onlay - porcelain/ceramic - three surfaces	\$391.83	25.00%
Class III	D2644	Onlay - porcelain/ceramic - four or more surfaces	\$412.54	25.00%
Class III	D2650	Inlay - resin-based composite - one surface	\$214.90	25.00%
Class III	D2651	Inlay - resin-based composite - two surfaces	\$272.63	25.00%
Class III	D2652	Inlay - resin-based composite - three or more surfaces	\$255.28	25.00%
Class III	D2662	Onlay - resin-based composite - two surfaces	\$248.04	25.00%
Class III	D2663	Onlay - resin-based composite - three surfaces	\$291.80	25.00%
Class III	D2664	Onlay - resin-based composite - four or more surfaces	\$286.48	25.00%
Class III	D2710	Crown – resin-based composite (indirect)	\$163.91	25.00%
Class III	D2720	Crown - resin with high noble metal	\$424.03	25.00%
Class III	D2721	Crown - resin with predominantly base metal	\$379.83	25.00%
Class III	D2722	Crown - resin with noble metal	\$406.25	25.00%
Class III	D2740	Crown - porcelain/ceramic substrate	\$430.58	25.00%
Class III	D2750	Crown - porcelain fused to high noble metal	\$422.41	25.00%
Class III	D2751	Crown - porcelain fused to predominantly base metal	\$386.02	25.00%
Class III	D2752	Crown - porcelain fused to noble metal	\$392.65	25.00%
Class III	D2790	Crown - full cast high noble metal	\$437.46	25.00%
Class III	D2791	Crown - full cast predominantly base metal	\$387.76	25.00%
Class III	D2792	Crown - full cast noble metal	\$387.94	25.00%
Class III	D2910	Recement inlay, onlay or partial coverage restoration	\$38.63	25.00%
Class III	D2920	Recement crown	\$37.96	25.00%
Class III	D2930	Prefabricated stainless steel crown - primary tooth	\$109.21	25.00%
Class III	D2931	Prefabricated stainless steel crown - permanent tooth	\$125.20	25.00%
Class III	D2932	Prefabricated resin crown - anterior primary tooth	\$125.58	25.00%
Class III	D2940	Protective restoration	\$42.37	25.00%
Class III	D2950	Core buildup, including any pins	\$103.18	25.00%
Class III	D2951	Pin retention - per tooth, in addition to restoration	\$21.52	25.00%
Class III	D2952	Post and core in addition to crown, indirectly fabricated	\$160.21	25.00%
Class III	D2954	Prefabricated post and core in addition to crown – <i>base metal post; includes canal preparation</i>	\$129.56	25.00%
Class III	D3220	Therapeutic pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of medicament	\$61.56	25.00%
Class III	D3310	Root canal - endodontic therapy - anterior tooth (excluding final restoration)	\$303.70	25.00%

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Class	CDT Code	Description	PPO Network Copayment*	Non-PPO Network Coinsurance +**
Class III	D3320	Root canal - endodontic therapy - bicuspid tooth (excluding final restoration)	\$341.88	25.00%
Class III	D3330	Root canal - endodontic therapy - molar (excluding final restoration)	\$464.62	25.00%
Class III	D3346	Retreatment of previous root canal therapy - anterior	\$357.52	25.00%
Class III	D3347	Retreatment of previous root canal therapy - bicuspid	\$432.53	25.00%
Class III	D3348	Retreatment of previous root canal therapy - molar	\$544.29	25.00%
Class III	D3410	Apicoectomy/periradicular surgery - anterior	\$293.42	25.00%
Class III	D3421	Apicoectomy/periradicular surgery - bicuspid (first root)	\$335.37	25.00%
Class III	D3425	Apicoectomy/periradicular surgery - molar (first root)	\$349.93	25.00%
Class III	D3426	Apicoectomy/periradicular surgery (each additional root)	\$126.75	25.00%
Class III	D3430	Retrograde filling - per root	\$94.64	25.00%
Class III	D4210	Gingivectomy or gingivoplasty - four or more contiguous teeth or tooth bounded spaces per quadrant	\$301.00	25.00%
Class III	D4211	Gingivectomy or gingivoplasty - one to three contiguous teeth or tooth bounded spaces per quadrant	\$131.97	25.00%
Class III	D4240	Gingival flap procedure, including root planing - four or more contiguous teeth or tooth bounded spaces per quadrant	\$359.17	25.00%
Class III	D4241	Gingival flap procedure, including root planing - one to three contiguous teeth or tooth bounded spaces per quadrant	\$186.74	25.00%
Class III	D4249	Clinical crown lengthening - hard tissue	\$361.00	25.00%
Class III	D4260	Osseous surgery (including flap entry and closure) - four or more contiguous teeth or tooth bounded spaces per quadrant	\$553.00	25.00%
Class III	D4261	Osseous surgery (including flap entry and closure) - one to three contiguous teeth or tooth bounded spaces per quadrant	\$292.43	25.00%
Class III	D5110	Complete denture - maxillary	\$592.10	25.00%
Class III	D5120	Complete denture - mandibular	\$592.10	25.00%
Class III	D5130	Immediate denture - maxillary	\$645.42	25.00%
Class III	D5140	Immediate denture - mandibular	\$645.42	25.00%
Class III	D5211	Maxillary partial denture - resin base (including any conventional clasps, rests and teeth)	\$536.87	25.00%
Class III	D5212	Mandibular partial denture - resin base (including any conventional clasps, rests and teeth)	\$623.05	25.00%
Class III	D5213	Maxillary partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	\$657.40	25.00%
Class III	D5214	Mandibular partial denture - cast metal framework with resin denture bases (including any conventional clasps, rests and teeth)	\$657.40	25.00%
Class III	D5410	Adjust complete denture - maxillary	\$33.37	25.00%
Class III	D5411	Adjust complete denture - mandibular	\$33.37	25.00%
Class III	D5421	Adjust partial denture - maxillary	\$33.37	25.00%
Class III	D5422	Adjust partial denture - mandibular	\$33.37	25.00%
Class III	D5510	Repair broken complete denture base	\$66.67	25.00%
Class III	D5520	Replace missing or broken teeth - complete denture (each tooth)	\$56.22	25.00%
Class III	D5610	Repair resin denture base	\$71.63	25.00%
Class III	D5620	Repair cast framework	\$77.65	25.00%
Class III	D5630	Repair or replace broken clasp	\$93.70	25.00%
Class III	D5640	Replace broken teeth - per tooth	\$60.99	25.00%
Class III	D5650	Add tooth to existing partial denture	\$82.61	25.00%
Class III	D5660	Add clasp to existing partial denture	\$98.39	25.00%
Class III	D5710	Rebase complete maxillary denture	\$250.08	25.00%
Class III	D5711	Rebase complete mandibular denture	\$238.59	25.00%
Class III	D5720	Rebase maxillary partial denture	\$239.22	25.00%
Class III	D5721	Rebase mandibular partial denture	\$239.22	25.00%
Class III	D5730	Reline complete maxillary denture (chairside)	\$139.96	25.00%

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Class	CDT Code	Description	PPO Network Copayment*	Non-PPO Network Coinsurance +**
Class III	D5731	Reline complete mandibular denture (chairside)	\$139.96	25.00%
Class III	D5740	Reline maxillary partial denture (chairside)	\$126.40	25.00%
Class III	D5741	Reline mandibular partial denture (chairside)	\$126.40	25.00%
Class III	D5750	Reline complete maxillary denture (laboratory)	\$182.45	25.00%
Class III	D5751	Reline complete mandibular denture (laboratory)	\$182.45	25.00%
Class III	D5760	Reline maxillary partial denture (laboratory)	\$185.58	25.00%
Class III	D5761	Reline mandibular partial denture (laboratory)	\$185.58	25.00%
Class III	D5850	Tissue conditioning, maxillary	\$59.49	25.00%
Class III	D5851	Tissue conditioning, mandibular	\$59.49	25.00%
Class III	D6092	Recement implant/abutment supported crown	\$37.96	25.00%
Class III	D6093	Recement implant/abutment supported fixed partial denture	\$54.08	25.00%
Class III	D6210	Pontic - cast high noble metal	\$404.58	25.00%
Class III	D6211	Pontic - cast predominantly base metal	\$385.86	25.00%
Class III	D6212	Pontic - cast noble metal	\$380.25	25.00%
Class III	D6240	Pontic - porcelain fused to high noble metal	\$404.45	25.00%
Class III	D6241	Pontic - porcelain fused to predominantly base metal	\$375.55	25.00%
Class III	D6242	Pontic - porcelain fused to noble metal	\$416.55	25.00%
Class III	D6250	Pontic - resin with high noble metal	\$405.62	25.00%
Class III	D6251	Pontic - resin with predominantly base metal	\$383.87	25.00%
Class III	D6252	Pontic - resin with noble metal	\$367.57	25.00%
Class III	D6600	Inlay - porcelain/ceramic, two surfaces	\$319.97	25.00%
Class III	D6601	Inlay - porcelain/ceramic, three or more surfaces	\$339.04	25.00%
Class III	D6602	Inlay - cast high noble metal, two surfaces	\$342.83	25.00%
Class III	D6603	Inlay - cast high noble metal, three or more surfaces	\$379.74	25.00%
Class III	D6604	Inlay - cast predominantly base metal, two surfaces	\$327.47	25.00%
Class III	D6605	Inlay - cast predominantly base metal, three or more surfaces	\$353.32	25.00%
Class III	D6606	Inlay - cast noble metal, two surfaces	\$324.42	25.00%
Class III	D6607	Inlay - cast noble metal, three or more surfaces	\$353.68	25.00%
Class III	D6608	Onlay - porcelain/ceramic, two surfaces	\$332.50	25.00%
Class III	D6609	Onlay - porcelain/ceramic, three or more surfaces	\$344.66	25.00%
Class III	D6610	Onlay - cast high noble metal, two surfaces	\$352.30	25.00%
Class III	D6611	Onlay - cast high noble metal, three or more surfaces	\$383.16	25.00%
Class III	D6612	Onlay - cast predominantly base metal, two surfaces	\$356.40	25.00%
Class III	D6613	Onlay - cast predominantly base metal, three or more surfaces	\$364.01	25.00%
Class III	D6614	Onlay - cast noble metal, two surfaces	\$349.04	25.00%
Class III	D6615	Onlay - cast noble metal, three or more surfaces	\$354.10	25.00%
Class III	D6720	Crown - resin with high noble metal	\$435.98	25.00%
Class III	D6721	Crown - resin with predominantly base metal	\$395.66	25.00%
Class III	D6722	Crown - resin with noble metal	\$421.91	25.00%
Class III	D6740	Crown - porcelain/ceramic	\$452.22	25.00%
Class III	D6750	Crown - porcelain fused to high noble metal	\$440.54	25.00%
Class III	D6751	Crown - porcelain fused to predominantly base metal	\$402.92	25.00%
Class III	D6752	Crown - porcelain fused to noble metal	\$409.41	25.00%
Class III	D6780	Crown - ¾ cast high noble metal	\$443.08	25.00%
Class III	D6790	Crown - full cast high noble metal	\$455.93	25.00%
Class III	D6791	Crown - full cast predominantly base metal	\$405.05	25.00%
Class III	D6792	Crown - full cast noble metal	\$412.07	25.00%
Class III	D6930	Recement fixed partial denture	\$54.08	25.00%
Class III	D7210	Surgical removal of erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated	\$102.23	25.00%
Class III	D7220	Removal of impacted tooth - soft tissue	\$130.86	25.00%
Class III	D7230	Removal of impacted tooth - partially bony	\$167.12	25.00%

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Class	CDT Code	Description	PPO Network Copayment*	Non-PPO Network Coinsurance +**
Class III	D7240	Removal of impacted tooth - completely bony	\$199.80	25.00%
Class III	D7241	Removal of impacted tooth - completely bony, with unusual surgical complications	\$251.26	25.00%
Class III	D7250	Surgical removal of residual tooth roots (cutting procedure)	\$108.34	25.00%
Class III	D7310	Alveoplasty in conjunction with extractions - four or more teeth or tooth spaces, per quadrant	\$111.70	25.00%
Class III	D7311	Alveoplasty in conjunction with extractions – one to three teeth or tooth spaces, per quadrant	\$76.00	25.00%
Class III	D7320	Alveoplasty not in conjunction with extractions - four or more teeth or tooth spaces, per quadrant	\$157.89	25.00%
Class III	D7321	Alveoplasty not in conjunction with extractions – one to three teeth or tooth spaces, per quadrant	\$124.00	25.00%
Class III	D7510	Incision and drainage of abscess - intraoral soft tissue	\$104.19	25.00%
Class III	D7520	Incision and drainage of abscess-extraoral soft tissue	\$167.00	25.00%
Class III	D7960	Frenulectomy – also known as frenectomy or frenotomy – separate procedure not incidental to another procedure	\$117.39	25.00%
Class III	D7970	Excision hyperplastic tissue – per arch	\$240.86	25.00%
Class III	D9110	Palliative (emergency) treatment of dental pain - minor procedure	\$42.63	25.00%
Class III	D9241	Intravenous conscious sedation/analgesia - first 30 minutes	\$127.06	25.00%
Class III	D9242	Intravenous conscious sedation/analgesia - each additional 15 minutes	\$55.24	25.00%
Class III	D9310	Consultation - diagnostic service provided by dentist or physician other than requesting dentist or physician	\$53.00	25.00%
Class III	D9951	Occlusal adjustment, limited	\$47.00	25.00%
Class III	D9952	Occlusal adjustment, complete	\$274.00	25.00%
Class IV	D8070	Comprehensive orthodontic treatment of the transitional dentition - <i>child or adolescent to age 19</i>	\$1,850.48	25.00%
Class IV	D8080	Comprehensive orthodontic treatment of the adolescent dentition - <i>adolescent to age 19</i>	\$1,894.03	25.00%
Class IV	D8090	Comprehensive orthodontic treatment of the adult dentition - <i>adults, including covered dependent adult children</i>	\$2,072.45	25.00%
Class IV	D8660	Pre-orthodontic treatment visit	\$27.55	25.00%
Class IV	D8680	Orthodontic retention (removal of appliances, construction and placement of <i>removable</i> retainers)	\$382.65	25.00%
Class IV	D8999	Unspecified orthodontic procedure, by report - <i>includes treatment planning session</i>	\$250.00	25.00%

+ Non-PPO network dentists are paid on the PPO fee schedule.

\*In-Network: Member pays Copayment.

\*\* Out-of-Network: Member pays balance of PPO fees, in addition to the remaining balance of claim. Balance equals the difference between total claim and PPO fee.

- a) Procedure codes and descriptions (Current Dental Terminology – CDT) are copyrighted by the American Dental Association. Text that appears in italics was added to clarify the services listed and is not part of CDT procedure code descriptions.
- b) This benefit information is only a brief summary of plan coverage. Please see the Evidence of Coverage for a complete description of plan benefits, limitations and exclusions.
- c) Covered procedures are listed above. Any procedure not listed in the plan is not covered.

LEGAL NOTICES: Access federal and state legal notices related to your plan at [deltadentalins.com/about/legal/index-enrollee.html](http://deltadentalins.com/about/legal/index-enrollee.html)