



**SIU MEDICINE**  
FEDERALLY QUALIFIED  
HEALTH CENTER

# Dental Slides with Teledentistry Codes

**Dental Fee Schedules - Full Fee for Self Pays and Sliding Fees  
Effective 5.1.24**

Any patient who has a financial hardship for medical or dental office visits, should speak with our Financial Counselor. As part of being an FQHC, SIU Center for Family Medicine will help you determine if you are eligible for our sliding fee program.

Local specialist and hospitals are also capable of extending financial assistance for their services. Please contact them individually prior to or at the time of service.

Depending on the Family Size and the annual income, patient(s) will be placed into five categories of discounted care as listed below.

Procedures with no discounted fees listed are not part of the sliding fee discount program and will be billed at the Full Fee rate

Type of service	Procedure Code	Description	Full Fee	Minimum Slide 0 100% or Less	Slide 1 101-138%	Slide 2 139%-150%	Slide 3 151%-175%	Slide 4 176%-200%
<b>DIAGNOSTIC SERVICES</b>	D0120	Periodic oral evaluation	\$60	\$3	\$12	\$21	\$30	\$39
	D0140	Limited oral evaluation	\$60	\$3	\$12	\$21	\$30	\$39
	D0150	Comp oral eval-new/estab pat	\$65	\$3	\$13	\$23	\$33	\$42
	D0210	Intraoral-complete series (bw)	\$100	\$5	\$20	\$35	\$50	\$65
	D0220	Intraoral-periapical-1st film	\$29	\$1	\$6	\$10	\$15	\$19
	D0230	Intraoral-periapical-each add'l	\$26	\$1	\$5	\$9	\$13	\$17
	D0270	Bitewing-single film	\$33	\$2	\$7	\$12	\$17	\$21
	D0272	Bitewings-two films	\$42	\$2	\$8	\$15	\$21	\$27
	D0273	Bitewings-three films	\$58	\$3	\$12	\$20	\$29	\$38
	D0274	Bitewings-four films	\$66	\$3	\$13	\$23	\$33	\$43
	D0330	Panoramic film	\$120	\$6	\$24	\$42	\$60	\$78
<b>PREVENTATIVE SERVICES</b>	D1110	Prophylaxis - Adult	\$80	\$4	\$16	\$28	\$40	\$52
	D1120	Prophylaxis-child (0-18)	\$60	\$3	\$12	\$21	\$30	\$39
	D1206	Topical fluoride varnish (0-18)	\$55	\$3	\$11	\$19	\$28	\$36
	D1206	Topical flouride varnish (19-20)	\$55	\$3	\$11	\$19	\$28	\$36
	D1208	Topical Appl of Flour Excel Varn (0-18)	\$55	\$3	\$11	\$19	\$28	\$36
	D1208	Topical Appl of Four Exclud Propy (19-20)	\$55	\$3	\$11	\$19	\$28	\$36
	D1351	Sealant-per tooth	\$60	\$3	\$12	\$21	\$30	\$39
	D1510	Space maint-fixed-unilateral	\$250	\$13	\$50	\$88	\$125	\$163
	D1516	Space maint-fixed-bilateral,maxillary	\$500	\$25	\$100	\$175	\$250	\$325
	D1517	Space maint-fixed-bilateral,mandibular	\$500	\$25	\$100	\$175	\$250	\$325
	D1520	Space Maintainer Removable Unilateral	\$250	\$13	\$50	\$88	\$125	\$163
	D1526	Space maint-removeable-bilat,maxillary	\$500	\$25	\$100	\$175	\$250	\$325
	D1527	Space maint-removeable bilat, madibular	\$500	\$25	\$100	\$175	\$250	\$325
	D1550	Re-cement/bnd space maint	\$125	\$6	\$25	\$44	\$63	\$81
	D1555	Removal of fixed space maint	\$125	\$6	\$25	\$44	\$63	\$81

# Dental Slides with Teledentistry Codes

Dental Fee Schedules - Full Fee for Self Pays and Sliding Fees Effective 5.1.24

Type of service	Procedure Code	Description	Full Fee	Minimum Slide 0 100% or Less	Slide 1 101-138%	Slide 2 139%-150%	Slide 3 151%-175%	Slide 4 176%-200%
<b>RESTORATIVE DENTISTRY</b>	D2140	Amalgam-1 surf. prim/perm	\$150	\$8	\$30	\$53	\$75	\$98
	D2150	Amalgam-2 surf. prim/perm	\$175	\$9	\$35	\$61	\$88	\$114
	D2160	Amalgam-3 surf. prim/perm	\$225	\$11	\$45	\$79	\$113	\$146
	D2161	Amalgam-4+ surf. prim/perm	\$275	\$14	\$55	\$96	\$138	\$179
	D2330	Resin-one surface, anterior	\$150	\$8	\$30	\$53	\$75	\$98
	D2331	Resin-two surfaces, anterior	\$175	\$9	\$35	\$61	\$88	\$114
	D2332	Resin-three surfaces, anterior	\$225	\$11	\$45	\$79	\$113	\$146
	D2335	Resin-4+ w/incis angle-anterior	\$275	\$14	\$55	\$96	\$138	\$179
	D2391	Resin composite-1s, posterior	\$150	\$8	\$30	\$53	\$75	\$98
	D2392	Resin composite-2s, posterior	\$175	\$9	\$35	\$61	\$88	\$114
	D2393	Resin composite-3s, posterior	\$225	\$11	\$45	\$79	\$113	\$146
	D2394	Resin composite-4+s, posterior	\$275	\$14	\$55	\$96	\$138	\$179
	D2750	Crown - porc fuse high noble mtl	\$1,800	\$90	\$360	\$630	\$900	\$1,170
	D2751	Crown-porc fused to base metal	\$1,200	\$60	\$240	\$420	\$600	\$780
	D2752	Crown - porc fused noble metal	\$1,500	\$75	\$300	\$525	\$750	\$975
	D2791	Crown - full cast base metal	\$1,200	\$60	\$240	\$420	\$600	\$780
	D2792	Crown-full cast noble metal	\$1,800	\$90	\$360	\$630	\$900	\$1,170
	D2920	Re-cement or re-bond crown	\$125	\$6	\$25	\$44	\$63	\$81
	D2930	Prefab stain steel crn-primary tooth	\$400	\$20	\$80	\$140	\$200	\$260
	D2940	Protective Restoration	\$85	\$4	\$17	\$30	\$43	\$55
D2950	Core buildup, include any pins	\$225	\$11	\$45	\$79	\$113	\$146	

<b>ENDODONTICS</b>	D3220	Therapeutic pulpotomy(exc rest)	\$150	\$8	\$30	\$53	\$75	\$98
	D3310	Root canal therapy - anterior	\$900	\$45	\$180	\$315	\$450	\$585
	D3320	Root canal therapy - bicuspid	\$1,200	\$60	\$240	\$420	\$600	\$780
	D3330	Root canal therapy - molar	\$1,500	\$75	\$300	\$525	\$750	\$975

# Dental Slides with Teledentistry Codes

Dental Fee Schedules - Full Fee for Self Pays and Sliding Fees Effective 5.1.24

Type of service	Procedure Code	Description	Full Fee	Minimum Slide 0 100% or Less	Slide 1 101-138%	Slide 2 139%-150%	Slide 3 151%-175%	Slide 4 176%-200%
PERIODONTICS AND OTHER	D4321	Provisional splinting-extracor	\$175	\$9	\$35	\$61	\$88	\$114
	D4341	Perio scale&root pln-4+per quad	\$130	\$7	\$26	\$46	\$65	\$85
	D4342	Perio scale & root pln-1-3th quad	\$100	\$5	\$20	\$35	\$50	\$65
	D4346	Scale, Gingival Inflamm-Full Mth	\$75	\$4	\$15	\$26	\$38	\$49
	D4355	Full mouth debridemnt,eval/diag	\$100	\$5	\$20	\$35	\$50	\$65
	D4910	Periodontal maintenance	\$150	\$8	\$30	\$53	\$75	\$98
	D5110	Complete denture - maxillary	\$1,500	\$75	\$300	\$525	\$750	\$975
	D5120	Complete denture - mandibular	\$1,500	\$75	\$300	\$525	\$750	\$975
	D5130	Immediate Denture - maxillary	\$1,500	\$75	\$300	\$525	\$750	\$975
	D5140	Immediate denture - mandibular	\$1,500	\$75	\$300	\$525	\$750	\$975
	FLIPPER	Flipper for 3 or less teeth	\$600	\$30	\$120	\$210	\$300	\$390
	D5211	Maxillary partial - resin base	\$860	\$43	\$172	\$301	\$430	\$559
	D5212	Mandibular partial - resin base	\$860	\$43	\$172	\$301	\$430	\$559
	D5213	Maxil partial-metal base W/sdls	\$1,800	\$90	\$360	\$630	\$900	\$1,170
	D5214	Mand partial-metal base w/sdls	\$1,800	\$90	\$360	\$630	\$900	\$1,170
	D5225	Maxil partial-flex base incl cl	\$1,500	\$75	\$300	\$525	\$750	\$975
	D5226	Mand partial-flex base incl cl	\$1,500	\$75	\$300	\$525	\$750	\$975
	D5282	Removable unilat part denture 1 pc cast metal,mandibar	\$1,000	\$50	\$200	\$350	\$500	\$650
	D5283	Removable unilat part denture 1 pc cast metal,mandibular	\$1,000	\$50	\$200	\$350	\$500	\$650
	D5284	Removable unilat part denture 1 pc cast metal, per arch	\$600	\$30	\$120	\$210	\$300	\$390
	D5410	Adjust complete denture-maxil	\$50	\$3	\$10	\$18	\$25	\$33
	D5411	Adjust complete denture-mand	\$50	\$3	\$10	\$18	\$25	\$33
	D5421	Adjust partial denture-maxil	\$50	\$3	\$10	\$18	\$25	\$33
	D5422	Adjust partial denture-mand	\$50	\$3	\$10	\$18	\$25	\$33
	D5510	Repair complete denture base	\$120	\$6	\$24	\$42	\$60	\$78
	D5511	Repair lwr full denture base	\$120	\$6	\$24	\$42	\$60	\$78
	D5512	Repair Broken complete denture base - Maxillary	\$120	\$6	\$24	\$42	\$60	\$78
	D5520	Replace teeth-comp dent (ea th)	\$85	\$4	\$17	\$30	\$43	\$55
	D5610	Repair resin denture base	\$120	\$6	\$24	\$42	\$60	\$78
	D5611	Repair Resin Partial Denture Base, Mandibular	\$120	\$6	\$24	\$42	\$60	\$78
	D5612	Repair Broken Complete Denture Base, Maxillary	\$120	\$6	\$24	\$42	\$60	\$78
	D5621	Repair Cast Partial Framework, Mandibular	\$150	\$8	\$30	\$53	\$75	\$98
	D5622	Repair Cast Partial Framework, Maxillary	\$150	\$8	\$30	\$53	\$75	\$98
	D5630	Rpr or rplce brkn clasp, per th	\$135	\$7	\$27	\$47	\$68	\$88
	D5640	Replace broken teeth-per tooth	\$135	\$7	\$27	\$47	\$68	\$88
	D5650	Add tooth to exist part denture	\$35	\$2	\$7	\$12	\$18	\$23
	tooth add	Additional Tooth beyond 1st	\$35	\$2	\$7	\$12	\$18	\$23
	D5710	Rebase complete maxil denture*	\$350	\$18	\$70	\$123	\$175	\$228
	D5711	Rebase complete mand denture*	\$350	\$18	\$70	\$123	\$175	\$228
	D5720	Rebase maxil partial denture*	\$350	\$18	\$70	\$123	\$175	\$228
	D5721	Rebase mand partial denture*	\$350	\$18	\$70	\$123	\$175	\$228
	D5730	Reline Complete Maxillary Denture, Chairside	\$100					
	D5731	Reline complete man-chairside	\$100					

# Dental Slides with Teledentistry Codes

Dental Fee Schedules - Full Fee for Self Pays and Sliding Fees Effective 5.1.24

Type of service	Procedure Code	Description	Full Fee	Minimum Slide 0 100% or Less	Slide 1 101-138%	Slide 2 139%-150%	Slide 3 151%-175%	Slide 4 176%-200%
PERIODONTICS AND OTHER CONTINUED	D5740	Reline Maxillary Parital Denture, Chairside	\$100					
	D5741	Reline Mandibular Partial Denture, Chairside	\$100					
	D5750	Reline complete maxillary (lab)	\$250	\$13	\$50	\$88	\$125	\$163
	D5751	Reline complete mand (lab)	\$250	\$13	\$50	\$88	\$125	\$163
	D5760	Reline Maxillary Partial Denture, Laboratory	\$250	\$13	\$50	\$88	\$125	\$163
	D5761	Reline Mandibular Partial Denture, Laboratory	\$250	\$13	\$50	\$88	\$125	\$163
	D6210	Pontic-cast high noble metal	\$1,200	\$60	\$240	\$420	\$600	\$780
	D6211	Pontic-cast predominantly base	\$1,000	\$50	\$200	\$350	\$500	\$650
	D6212	Pontic-cast noble metal	\$1,200	\$60	\$240	\$420	\$600	\$780
	D6751	Retainer cm-porc fuse base met	\$1,200	\$60	\$240	\$420	\$600	\$780
	D6752	Retainer cm-porc fuse nob met	\$1,200	\$60	\$240	\$420	\$600	\$780
	D6790	Retainer cm-porc fused hi nob	\$1,200	\$60	\$240	\$420	\$600	\$780
	D6791	Retainer cm-full cast base	\$1,000	\$50	\$200	\$350	\$500	\$650
	D6792	Retainer cm- full cast nob met	\$1,200	\$60	\$240	\$420	\$600	\$780
	D7140	Extract, erupted th/exposed rt	\$175	\$9	\$35	\$61	\$88	\$114
	D7210	Extract, erupted th, rem oth	\$250	\$13	\$50	\$88	\$125	\$163
	D7220	Extraction-impacted/soft tis	\$600	\$30	\$120	\$210	\$300	\$390
	D7230	Extraction-impacted/part bony	\$800	\$40	\$160	\$280	\$400	\$520
	D7240	Extraction-impacted/compl bony	\$1,000	\$50	\$200	\$350	\$500	\$650
	D7250	Removal residual tooth roots	\$250	\$13	\$50	\$88	\$125	\$163
	D7286	Incisional biop oral tiss-soft	\$250	\$13	\$50	\$88	\$125	\$163
	D7291	T/SC Fiberotomy, B/R	\$250	\$13	\$50	\$88	\$125	\$163
	D7310	Alveoloplasty w/ext 4+ /quad	\$400	\$20	\$80	\$140	\$200	\$260
	D7471	Removal of exostosis-per site	\$400	\$20	\$80	\$140	\$200	\$260
	D7510	Incis&drain abscess-intra soft	\$250	\$13	\$50	\$88	\$125	\$163
	D9110	Emerg treatment, palliative	\$125	\$6	\$25	\$44	\$63	\$81
	D9230	Analgesia/Nitrous Guide	\$10					
	D9310	Consultation-per session	\$125	\$6	\$25	\$44	\$63	\$81
	D9944	Occlusal guards-hard appliance, full arch	\$500	\$25	\$100	\$175	\$250	\$325
	D9945	Occlusal guards-soft appliance, full arch	\$500	\$25	\$100	\$175	\$250	\$325
	D9946	Occlusal guards-hard appliance,partial arch	\$500	\$25	\$100	\$175	\$250	\$325
	D9995	Teledentistry - Real time	\$60	\$3	\$12	\$21	\$30	\$39
	D9996	Teledentistry - Information forwarded	\$60	\$3	\$12	\$21	\$30	\$39

# Dental Slides with Teledentistry Codes

Dental Fee Schedules - Full Fee for Self Pays and Sliding Fees Effective 5.1.24

Type of service	Description	Flat rate per service Slides 0-4
<b>LAB FEE</b>	Denture	\$100 per arch
	Partial acrylic	\$200 per arch
	Partial metal	\$250 per arch
	Repairs	\$50 per arch
	Add Teeth	\$10 per tooth
	Relines	\$100 per arch
	Rebase	\$100 per arch
	Crowns	\$100 per each
	Space Maintainers	\$50 each
	Retainer	\$50 per arch
	Occlusal Guard	\$75 each
	Clasps	\$30 each
	Splint	\$50 each
Duplicate Denture	\$100 each	