

Effective date - January 1, 2020. Coverage for eligible members of the ACAW Health & Wellness Plan
Maximum Payable per Calendar year is \$3,750.00. Major dental treatment over \$1,000.00 -- preauthorization recommended.

Exams		Bridgework		Restorations (Fillings)	
01103 (Adult complete)	\$ 137.39	67201/11 (Abutment)+lab	\$ 1,157.83		
01101 (Child complete)	\$ 88.57	62501 (Pontic)+lab	\$ 531.44	<u>Group 1</u>	
01202 (Recall)	\$ 88.57	29101/09 (Removal)	\$ 103.36	21111-21211-21221	\$ 104.91
				21112-21212-21222	\$ 154.22
X-rays		Extractions		21113-21213-21223	\$ 198.27
02111 (Single PA)	\$ 33.52	71101/09	\$ 120.65	21114-21214-21224	\$ 242.32
02142 (Bitewings)	\$ 55.82	71201/09	\$ 238.84	21115-21215-21225	\$ 264.36
02601 (Panorex)	\$ 111.73	72111/19	\$ 216.56		
02101 (Full mouth series)	\$ 223.57	72211	\$ 324.83	<u>Group 2</u>	
		72221	\$ 433.10	21121-21231-21241	\$ 125.90
Polish and Fluoride		72231	\$ 590.48	21122-21232-21242	\$ 176.24
11101	\$ 79.75			21123-21233-21243	\$ 220.30
12111 to 12114	\$ 30.26	Anesthesia		21124-21234-21244	\$ 264.36
		Covered in conjunction with oral surgery only		21125-21235-21245	\$ 286.39
Scaling		92411/92431	\$ 43.01	<u>Group 3</u>	
Maximum 16 units per calendar year		92412/92432	\$ 64.51	23111-23411	\$ 154.22
11111	\$ 88.57	92413/92433	\$ 86.02	23112-23412	\$ 176.24
11112	\$ 177.14	92414/92434	\$ 107.54	23113-23413	\$ 198.27
11113	\$ 265.72	92415/92435	\$ 129.06	23114-23414	\$ 242.32
11114	\$ 354.29	92416/92436	\$ 150.56	23115-23415	\$ 286.39
		92212/22	\$ 179.76		
Sealants		92213/23	\$ 269.65	<u>Group 4</u>	
13401	\$ 39.88	92214/24	\$ 359.53	23211-23221-23501	\$ 112.36
13409	\$ 19.93	92215/25	\$ 449.41	23212-23222-23502	\$ 157.30
				23213-23223-23503	\$ 179.76
Bruxism Appliance (Nightguard)		Orthodontic		23214-23224-23504	\$ 202.23
14611/12 Upper/Lower	\$ 470.77	For dependent children age 6 up to and including age 18. Lifetime maximum payable is \$3,500.00		23215-23225-23505	\$ 224.72
		<u>Removable appliances</u>			
Crowns		81111/12 + lab	\$ 376.63	<u>Group 5</u>	
23601 (Build-up)	\$ 253.35	<u>Observation and adjustments</u>		23311-23321-23511	\$ 154.22
25731 (Post)	\$ 155.04	80601/02	\$ 94.14	23312-23322-23512	\$ 220.29
27211 (Crown) +lab	\$ 1,114.61	Full banding		23313-23323-23513	\$ 264.36
Stainless steel crowns		<u>Fixed Appliances</u>		23314-23324-23514	\$ 308.42
22201/11	\$ 228.01	84101... up to maximum of \$3,500.00		23315-23325-23515	\$ 352.48
22202/12	\$ 278.69	84201... up to maximum of \$3,500.00			
		84301... up to maximum of \$3,500.00		<u>Primary Anterior</u>	
Endodontic (Root Canal)		85101/85201(see 84101 & 84201)		23401	\$ 112.36
33111	\$ 764.00	85301 (see 84301)		23402	\$ 134.82
33121	\$ 1,153.39	<u>Removable Appliances</u>		23403	\$ 157.30
33131	\$ 1,318.14	88101.... up to maximum of \$3,500.00		23404	\$ 202.23
33134	\$ 1,553.54	88201.... up to maximum of \$3,500.00		23405	\$ 247.18
33141	\$ 1,600.61	88301.... up to maximum of \$3,500.00		<u>Pins</u>	
				21401	\$ 32.53
Root Planing		01901 (Exam)	\$ 461.55	21402	\$ 48.80
Maximum 16 units per calendar year		Exam allowance includes models, x-rays,			
43421	\$ 89.88	diagnostics records and case presentation		Miscellaneous	
43422	\$ 179.76	01902 (Specific)	\$ 92.32	16101(Finishing restorations)	\$ 83.93
43423	\$ 269.65			16511(Occlusal Adjustments)	\$ 98.43
43424	\$ 359.53			20111/9 (Caries Trauma/pain) up to	\$ 179.77
		Denturist Services		32221/2 (Pulpotomy)	\$ 179.77
Dentures		01701 (Exam)	\$ 88.44	39201/02 (Open and Drain)	\$ 81.35
Complete upper and lower + lab		Complete or Partial - Upper/Lower		41301 (Desensitize)	\$ 89.88
51101/02 (Standard)	\$ 1,078.58	dentures + lab (each)	\$ 968.38	91111 (Emergency Pain Treatment)	\$ 81.35
51301/02 (Immediate)	\$ 1,078.58	56211/41 (Relines)	\$ 232.15	96101 (Prescription)	\$ 38.03
Partial upper and lower+ lab		56511/12/21/22(tissue cond)	\$ 154.77		
53101/02	\$ 1,078.58				