

CI-4 ILLINOIS SCHEDULE OF SERVICES

Code	Diagnostic	CI-4	80TH %ILE	Discount
0120	Periodic Oral Evaluation	\$20	\$39	49%
0140	Limited Oral Evaluation-Problem Focused	\$33	\$65	49%
0150	Comprehensive Oral Evaluation	\$34	\$67	49%
0160	Detailed Extensive Oral Evaluation-Problem Focused-By Report	\$96	\$188	49%
0170	Re-Evaluation-Limited-Problem Focused	\$24	\$48	49%
0210	Intraoral-Complete Series Including Bitewings	\$59	\$115	49%
0220	Intraoral-Periapical-First Film	\$11	\$22	49%
0230	Intraoral-Periapical-Each Additional Film	\$9	\$17	49%
0240	Intraoral-Occlusal Film	\$16	\$32	49%
0250	Extraoral-First Film	\$22	\$44	49%
0260	Extraoral-Each Additional Film	\$22	\$43	49%
0270	Bitewing-Single Film	\$12	\$23	49%
0272	Bitewings-Two Films	\$18	\$35	49%
0274	Bitewings-Four Films	\$25	\$50	49%
0277	Vertical Bitewings-7 to 8 Films	\$33	\$66	50%
0330	Panoramic Film	\$48	\$93	49%
0340	Cephalometric Film	\$59	\$115	49%
0350	Oral/Facial Images	\$27	\$52	48%
0460	Pulp Vitality Tests	\$23	\$46	49%
0470	Diagnostic Casts	\$49	\$97	49%
	Preventive			
1110	Prophylaxis-Adult (Light Cleaning)	\$39	\$71	46%
1120	Prophylaxis-Child	\$28	\$49	43%
1201	Topical Application of Fluoride Including Prophylaxis-Child	\$40	\$79	49%
1203	Topical Application of Fluoride Not Including Prophylaxis-Child	\$16	\$32	49%
1204	Topical Application of Fluoride Not Including Prophylaxis-Adult	\$17	\$33	49%
1205	Topical Application of Fluoride Including Prophylaxis-Adult	\$47	\$93	49%
1330	Oral Hygiene Instructions	\$28	\$56	49%
1351	Sealant-Per Tooth	\$22	\$43	49%
1510	Space Maintainer-Fixed-Unilateral	\$139	\$273	49%
1515	Space Maintainer-Fixed-Bilateral	\$184	\$360	49%
1520	Space Maintainer-Removable-Unilateral	\$173	\$339	49%
1525	Space Maintainer-Removable-Bilateral	\$237	\$464	49%
1550	Recementation of Space Maintainer	\$30	\$59	49%
	Restorative			
2110	Amalgam-One Surface, Primary	\$48	\$93	49%
2120	Amalgam-Two Surfaces, Primary	\$61	\$119	49%
2130	Amalgam-Three Surfaces, Primary	\$73	\$143	49%
2131	Amalgam-Four or More Surfaces, Primary	\$87	\$170	49%
2140	Amalgam-One Surface, Permanent	\$53	\$103	49%
2150	Amalgam-Two Surfaces, Permanent	\$68	\$133	49%
2160	Amalgam-Three Surfaces, Permanent	\$82	\$161	49%
2161	Amalgam-Four or More Surfaces, Permanent	\$100	\$196	49%
2330	Resin-One Surface, Anterior	\$62	\$121	49%
2331	Resin-Two Surfaces, Anterior	\$79	\$154	49%
2332	Resin-Three Surfaces, Anterior	\$96	\$188	49%
2335	Resin-Four or More Surfaces or Involving Incisal Angle, Anterior	\$114	\$223	49%
2336	Composite Resin Crown, Anterior-Primary	\$123	\$241	49%
2337	Composite Resin Crown, Anterior-Permanent	\$161	\$316	49%

2380	Resin-One Surface, Posterior-Primary	\$70	\$138	49%
2381	Resin-Two Surfaces, Posterior-Primary	\$82	\$161	49%
2382	Resin-Three or More Surfaces, Posterior-Primary	\$100	\$195	49%
2385	Resin-One Surface, Posterior-Permanent	\$69	\$136	49%
2386	Resin-Two Surfaces, Posterior-Permanent	\$96	\$187	49%
2387	Resin-Three Surfaces, Posterior-Permanent	\$119	\$233	49%
2388	Resin-Four or More Surfaces, Posterior-Permanent	\$124	\$243	49%
2510	Inlay-Metallic-One Surface	\$291	\$570	49%
2520	Inlay-Metallic-Two Surfaces	\$330	\$646	49%
2530	Inlay-Metallic-Three or More Surfaces	\$380	\$745	49%
2542	Onlay-Metallic-Two Surfaces	\$348	\$682	49%
2543	Onlay-Metallic-Three Surfaces	\$390	\$764	49%
2544	Onlay-Metallic-Four or More Surfaces	\$406	\$795	49%
2610	Inlay-Porcelain/Ceramic-One Surface	\$342	\$670	49%
2620	Inlay-Porcelain/Ceramic-Two Surfaces	\$361	\$708	49%
2630	Inlay-Porcelain/Ceramic-Three or More Surfaces	\$384	\$753	49%
2642	Onlay-Porcelain/Ceramic-Two Surfaces	\$374	\$732	49%
2643	Onlay-Porcelain/Ceramic-Three Surfaces	\$403	\$790	49%
2644	Onlay-Porcelain/Ceramic-Four or More Surfaces	\$428	\$838	49%
2650	Inlay-Composite/Resin-One Surface	\$225	\$440	49%
2651	Inlay-Composite/Resin-Two Surfaces	\$268	\$525	49%
2652	Inlay-Composite/Resin-Three or More Surfaces	\$282	\$552	49%
2662	Onlay-Composite/Resin-Two Surfaces	\$356	\$698	49%
2663	Onlay-Composite/Resin-Three Surfaces	\$363	\$711	49%
2664	Onlay-Composite/Resin-Four or More Surfaces	\$381	\$746	49%
2710	Crown-Resin-Laboratory	\$180	\$340	47%
2720	Crown-Resin with High Noble Metal	\$496	\$838	41%
2721	Crown-Resin with Predominantly Base Metal	\$464	\$785	41%
2722	Crown-Resin with Noble Metal	\$474	\$802	41%
2740	Crown-Porcelain/Ceramic Substrate	\$507	\$860	41%
2750	Crown-Porcelain Fused to High Noble Metal	\$501	\$848	41%
2751	Crown-Porcelain Fused to Predominantly Base Metal	\$467	\$790	41%
2752	Crown-Porcelain Fused to Noble Metal	\$478	\$809	41%
2780	Crown-3/4 Cast to High Noble Metal	\$491	\$756	35%
2781	Crown-3/4 Cast to Predominantly Base Metal	\$472	\$727	35%
2782	Crown-3/4 Cast Noble Metal	\$489	\$755	35%
2783	Crown-3/4 Porcelain/Ceramic (Does not include facial veneers)	\$520	\$801	35%
2790	Crown-Full Cast High Noble Metal	\$483	\$819	41%
2791	Crown-Full Cast Predominantly Base Metal	\$461	\$776	41%
2792	Crown-Full Cast Noble Metal	\$468	\$790	41%
2910	Recement Inlay	\$42	\$81	49%
2920	Recement Crown	\$43	\$85	49%
2930	Prefabricated Stainless Steel Crown-Primary	\$118	\$232	49%
2931	Prefabricated Stainless Steel Crown-Permanent	\$133	\$261	49%
2932	Prefabricated Resin Crown	\$145	\$285	49%
2933	Prefabricated Stainless Steel Crown with Resin Window	\$163	\$320	49%
2940	Sedative Filling	\$45	\$88	49%
2950	Core Build-Up, Including Any Pins	\$113	\$221	49%
2951	Pin Retention/Tooth, In Addition to Restoration	\$24	\$47	49%
2952	Cast Post and Core In Addition to Crown	\$172	\$337	49%
2953	Each Additional Cast Post-Same Tooth	\$109	\$213	49%

2954	Prefabricated Post and Core in Addition to Crown	\$142	\$279	49%
2955	Post Removal Not in Conjunction with Endodontic Therapy	\$107	\$209	49%
2957	Each Additional Prefabricated Post-Same Tooth	\$52	\$102	49%
2960	Labial Veneer (Laminate)-Chairside	\$349	\$684	49%
2970	Temporary Crown (Fractured Tooth)	\$101	\$198	49%
	Endodontics			
3110	Pulp Cap-Direct (Excluding Final Restoration)	\$31	\$60	49%
3120	Pulp Cap-Indirect (Excluding Final Restoration)	\$24	\$48	49%
3220	Therapeutic Pulpotomy (Excluding Final Restoration)	\$73	\$143	49%
3221	Gross Pulpal Debridement	\$72	\$142	49%
3230	Pulpal Therapy-Resorbable Filling-Anterior Primary Tooth	\$77	\$151	49%
3240	Pulpal Therapy Resorbable Filling-Posterior Primary Tooth	\$83	\$162	49%
3310	Root Canal-Anterior (Excluding Final Restoration)	\$308	\$603	49%
3320	Root Canal-Bicuspid (Excluding Final Restoration)	\$376	\$736	49%
3330	Root Canal-Molar (Excluding Final Restoration)	\$485	\$951	49%
3331	Treatment of Root Canal Obstruction-Non-Surgical Access	\$164	\$321	49%
3332	Incomplete Endodontic Therapy-Inoperable or Fractured Tooth	\$136	\$267	49%
3333	Internal Root Repair of Perforation Defects	\$83	\$163	49%
3346	Retreatment Previous Root Canal Therapy-Anterior	\$414	\$812	49%
3347	Retreatment Previous Root Canal Therapy-Bicuspid	\$488	\$957	49%
3348	Retreatment Previous Root Canal Therapy-Molar	\$587	\$1,150	49%
3351	Apexification/Recalcification-Initial Visit	\$175	\$342	49%
3352	Apexification/Recalcification-Interim Medication Replacement	\$76	\$150	49%
3353	Apexification/Recalcification-Final Visit	\$257	\$504	49%
3410	Apicoectomy/Periradicular Surgery-Anterior	\$352	\$690	49%
3421	Apicoectomy/Periradicular Surgery-Bicuspid (First Root)	\$385	\$754	49%
3425	Apicoectomy/Periradicular Surgery-Molar (First Root)	\$435	\$852	49%
3426	Apicoectomy/Periradicular Surgery (Each Additional Root)	\$145	\$284	49%
3430	Retrograde Filling-Per Root	\$107	\$209	49%
3450	Root Amputation-Per Root	\$216	\$423	49%
3470	Intentional Reimplantation (Including Necessary Splinting)	\$431	\$844	49%
3910	Surgical Procedure for Isolation of Tooth with Rubber Dam	\$56	\$110	49%
3920	Hemisection-Including Root Removal, Not Including Root Canal	\$169	\$331	49%
3950	Canal Preparation and Fitting of Prefomed Dowel or Post	\$77	\$151	49%
	Periodontics			
4210	Gingivectomy or Gingivoplasty-Per Quadrant	\$301	\$589	49%
4211	Gingivectomy or Gingivoplasty-Per Tooth	\$80	\$158	49%
4220	Gingival Curettage, Surgical-Per Quadrant, By Report	\$107	\$210	49%
4240	Gingival Flap Procedure, Including Root Planing-Per Quadrant	\$354	\$695	49%
4245	Apically Positioned Flap	\$320	\$629	49%
4249	Clinical Crown Lengthening-Hard Tissue	\$404	\$792	49%
4260	Osseous Surgery (Including Flap Entry and Closure)-Per Quadrant	\$571	\$1,120	49%
4263	Bone Replacement Graft-First Site in Quadrant	\$173	\$338	49%
4264	Bone Replacement Graft-Each Additional Site in Quadrant	\$86	\$169	49%
4266	Guided Tissue Regeneration-Resorbable Barrier per Site	\$209	\$409	49%
4267	Guided Tissue Regeneration-Nonresorbable Barrier per Site	\$268	\$525	49%
4268	Surgical Revision Procedure, per Tooth	\$324	\$636	49%
4270	Pedicle Soft Tissue Graft Procedure	\$423	\$829	49%
4271	Free Soft Tissue Graft Procedure (Including Donor Site Surgery)	\$435	\$852	49%
4320	Provisional Splinting-Intracoronal	\$191	\$374	49%
4321	Provisional Splinting-Extracoronal	\$167	\$327	49%

4341	Periodontal Scaling and Root Planing-Per Quadrant (Deep Cleaning)	\$103	\$202	49%
4355	Full Mouth Debridement to Enable Periodontal Evaluation and Diagnosis	\$69	\$135	49%
4910	Periodontal Maintenance Procedures Following Active Therapy	\$62	\$121	49%
4920	Unscheduled Dressing Change (Not by Treating Dentist)	\$53	\$104	49%
	Prosthodontics (removable)			
5110	Complete Denture-Maxillary	\$659	\$1,292	49%
5120	Complete Denture-Mandibular	\$659	\$1,292	49%
5130	Immediate Denture-Maxillary	\$719	\$1,409	49%
5140	Immediate Denture-Mandibular	\$719	\$1,409	49%
5211	Maxillary Partial Denture-Resin Base (Clasp/Rests)	\$647	\$1,090	41%
5212	Mandibular Partial Denture-Resin Base (Clasp/Rests)	\$647	\$1,267	49%
5213	Maxillary Partial Denture-Metal Frame with Resin Base	\$729	\$1,428	49%
5214	Mandibular Partial Denture-Metal Frame with Resin Base	\$729	\$1,428	49%
5281	Removable Unilateral Partial Denture-One Piece Cast Metal	\$425	\$832	49%
5410	Adjust Complete Denture-Maxillary	\$36	\$71	49%
5411	Adjust Complete Denture-Mandibular	\$36	\$71	49%
5421	Adjust Partial Denture-Maxillary	\$36	\$71	49%
5422	Adjust Partial Denture-Mandibular	\$36	\$71	49%
5510	Repair Broken Complete Denture Base	\$72	\$141	49%
5520	Replace Missing or Broken Teeth-Complete Denture (Each Tooth)	\$60	\$118	49%
5610	Repair Resin Denture Base	\$78	\$153	49%
5620	Repair Cast Framework, Partial Denture	\$84	\$165	49%
5630	Repair or Replace Broken Clasp, Partial Denture	\$102	\$201	49%
5640	Replace Broken Teeth-Per Tooth, Partial Denture	\$66	\$129	49%
5650	Add Tooth to Existing Partial Denture	\$90	\$177	49%
5660	Add Clasp to Existing Partial Denture	\$108	\$212	49%
5710	Rebase Complete Maxillary Denture	\$268	\$525	49%
5711	Rebase Complete Mandibular Denture	\$256	\$501	49%
5720	Rebase Maxillary Partial Denture	\$253	\$495	49%
5721	Rebase Mandibular Partial Denture	\$253	\$495	49%
5730	Reline Complete Maxillary Denture (Chairside)	\$151	\$296	49%
5731	Reline Complete Mandibular Denture (Chairside)	\$151	\$296	49%
5740	Reline Maxillary Partial Denture (Chairside)	\$138	\$271	49%
5741	Reline Mandibular Partial Denture (Chairside)	\$138	\$271	49%
5750	Reline Complete Maxillary Denture (Laboratory)	\$202	\$395	49%
5751	Reline Complete Mandibular Denture (Laboratory)	\$202	\$395	49%
5760	Reline Maxillary Partial Denture (Laboratory)	\$198	\$389	49%
5761	Reline Mandibular Partial Denture (Laboratory)	\$198	\$389	49%
5810	Interim Complete Denture-Maxillary	\$319	\$625	49%
5811	Interim Complete Denture-Mandibular	\$326	\$608	46%
5820	Interim Partial Denture-Maxillary	\$247	\$483	49%
5821	Interim Partial Denture-Mandibular	\$262	\$513	49%
5850	Tissue Conditioning-Maxillary	\$63	\$124	49%
5851	Tissue Conditioning-Mandibular	\$63	\$124	49%
	Prosthodontics (fixed)			
6210	Pontic-Cast High Noble Metal	\$418	\$819	49%
6211	Pontic-Cast Predominantly Base Metal	\$392	\$768	49%
6212	Pontic-Cast Noble Metal	\$408	\$799	49%
6240	Pontic-Porcelain Fused to High Noble Metal	\$413	\$809	49%
6241	Pontic-Porcelain Fused to Predominantly Base Metal	\$381	\$747	49%
6242	Pontic-Porcelain Fused to Noble Metal	\$402	\$789	49%

6245	Pontic-Porcelain/Ceramic	\$410	\$804	49%
6250	Pontic-Resin with High Noble Metal	\$408	\$799	49%
6251	Pontic-Resin with Predominantly Base Metal	\$376	\$737	49%
6252	Pontic-Resin with Noble Metal	\$388	\$761	49%
6519	Inlay/Onlay-Porcelain/Ceramic	\$411	\$806	49%
6520	Retainer-Inlay-Metallic-Two Surfaces	\$360	\$706	49%
6530	Inlay-Metallic Three or More Surfaces	\$413	\$809	49%
6543	Onlay-Metallic Three Surfaces	\$423	\$830	49%
6544	Onlay-Metallic Four or More Surfaces	\$442	\$866	49%
6545	Retainer-Cast Metal for Resin Bonded Fixed Prosthesis	\$174	\$340	49%
6548	Retainer-Porcelain/Ceramic for Resin Bonded Fixed Prosthesis	\$368	\$722	49%
6720	Crown-Bridge Retainer-Resin with High Noble Metal	\$460	\$902	49%
6721	Crown-Bridge Retainer-Resin Predominantly Base Metal	\$437	\$856	49%
6722	Crown-Resin with Noble Metal	\$445	\$871	49%
6740	Crown-Porcelain/Ceramic	\$416	\$891	53%
6750	Crown-Retainer-Porcelain Fused to High Noble Metal	\$471	\$923	49%
6751	Crown-Retainer-Porcelain Fused to Predominantly Base Metal	\$440	\$862	49%
6752	Crown-Retainer-Porcelain Fused to Noble Metal	\$450	\$882	49%
6780	Crown-Retainer 3/4 Cast High Noble Metal	\$445	\$871	49%
6781	Crown-Retainer 3/4 Predominantly Base Metal	\$392	\$770	49%
6782	Crown-Retainer 3/4 Cast Noble Metal	\$396	\$768	48%
6783	Crown-Retainer 3/4 Porcelain/Ceramic	\$403	\$771	48%
6790	Crown-Retainer-Full Cast High Noble Metal	\$455	\$892	49%
6791	Crown-Retainer-Full Cast Predominantly Base Metal	\$431	\$845	49%
6792	Crown-Retainer-Full Cast Noble Metal	\$447	\$876	49%
6930	Recement Fixed Partial Denture	\$55	\$108	49%
6970	Cast Post and Core/Addition to Bridge Retainer	\$152	\$299	49%
6971	Cast Post Part of Bridge Retainer	\$134	\$263	49%
6972	Prefabricated Post and Core in Addition to Bridge Retainer	\$124	\$243	49%
6973	Core Buildup for Retainer, Including Any Pins	\$100	\$196	49%
6975	Coping-Metal	\$273	\$536	49%
6976	Each Additional Cast Post-Same Tooth	\$99	\$194	49%
6977	Each Additional Prefabricated Post-Same Tooth	\$60	\$118	49%
	Oral Surgery			
7110	Extraction-Single Tooth	\$65	\$116	44%
7120	Extraction-Each Additional Tooth	\$61	\$109	44%
7130	Root Removal-Exposed Root	\$76	\$148	49%
7210	Surgical Removal of Erupted Tooth	\$114	\$201	43%
7220	Removal of Impacted Tooth-Soft Tissue	\$128	\$251	49%
7230	Removal of Impacted Tooth-Partially Bony	\$171	\$334	49%
7240	Removal of Impacted Tooth-Completely Bony	\$200	\$393	49%
7241	Removal of Impacted Tooth-Completely Bony with Unusual Complications	\$252	\$493	49%
7250	Surgical Removal of Residual Tooth Roots (Cutting Procedure)	\$108	\$212	49%
7270	Reimplantation or Stabilization of Accidentally Evulsed or Displaced Tooth	\$220	\$431	49%
7272	Tooth Transplantation	\$250	\$490	49%
7280	Surgical Exposure of Impacted or Unerupted Tooth for Orthodontic Reasons	\$241	\$472	49%
7281	Surgical Exposure of Impacted or Unerupted Tooth to Aid Eruption	\$204	\$400	49%
7285	Biopsy of Oral Tissue-Hard	\$427	\$836	49%
7286	Biopsy of Oral Tissue-Soft	\$175	\$343	49%
7310	Alveoloplasty in Conjunction with Extractions-Per Quadrant	\$119	\$234	49%
7320	Alveoloplasty Not in Conjunction with Extractions-Per Quadrant	\$532	\$1,043	49%

7430	Excision of Benign Tumor Lesion < 1.25 CM	\$380	\$745	49%
7431	Excision of Benign Tumor Lesion > 1.25 CM	\$649	\$1,272	49%
7450	Removal of Odontogenic Cyst/Tumor/Lesion < 1.25 CM	\$380	\$745	49%
7451	Removal of Odontogenic Cyst/Tumor/Lesion > 1.25 CM	\$597	\$1,169	49%
7460	Removal of Nonodontogenic Cyst/Tumor/Lesion < 1.25 CM	\$380	\$745	49%
7461	Removal of Nonodontogenic Cyst/Tumor/Lesion > 1.25 CM	\$597	\$898	34%
7510	Incision and Drainage Abscess-Intraoral Soft Tissue	\$114	\$223	49%
7910	Suture of Recent Small Wounds up to 5 CM	\$174	\$341	49%
7911	Complicated Suture up to 5 CM, Meticulous Closure	\$434	\$776	44%
7912	Complicated Suture Greater Than 5 CM, Meticulous Closure	\$450	\$849	47%
7960	Frenulectomy (Frenectomy/Frenotomy) Separate Procedure	\$251	\$491	49%
7970	Excision of Hyperplastic Tissue/Per Arch	\$259	\$507	49%
7971	Excision of Pericoronal Gingiva	\$82	\$161	49%
	Orthodontics			
8010	Limited Orthodontic Treatment of the Primary Dentition	20%	\$1,500	20%
8020	Limited Orthodontic Treatment of the Transitional Dentition	20%	\$1,729	20%
8030	Limited Orthodontic Treatment of the Adolescent Dentition	20%	\$1,977	20%
8040	Limited Orthodontic Treatment of the Adult Dentition	20%	\$1,849	20%
8050	Interceptive Orthodontic Treatment of the Primary Dentition	20%	\$1,959	20%
8060	Interceptive Orthodontic Treatment of the Transitional Dentition	20%	\$2,197	20%
8070	Comprehensive Orthodontic Treatment of the Transitional Dentition	20%	\$4,441	20%
8080	Comprehensive Orthodontic Treatment of the Adolescent Dentition	20%	\$4,489	20%
8090	Comprehensive Orthodontic Treatment of the Adult Dentition	20%	\$4,711	20%
8210	Removable Appliance Therapy	20%	\$632	20%
8660	Pre-Orthodontic Treatment Visit	20%	\$240	20%
	Adjunctive Services			
9110	Palliative (Emergency) Treatment-Dental Pain-Minor Procedure	\$46	\$90	49%
9211	Regional Block Anesthesia	\$21	\$41	49%
9215	Local Anesthesia	\$14	\$28	49%
9230	Analgesia	\$25	\$49	49%
9410	Professional Visit-House Call	\$128	\$190	33%
9420	Professional Visit-Hospital Call	\$176	\$251	30%
9430	Office Visit for Observation (Regular Hours) No Other Services Performed	\$33	\$345	91%
9440	Office Visit-After Regular Hours	\$59	\$64	8%
9910	Application-Desensitizing Medicament	\$21	\$115	82%
9911	Application-Desensitizing Resin for Cervical and/or Root Surface	\$30	\$41	27%
9941	Fabrication of Athletic Mouthguard	\$73	\$143	49%
9950	Occlusion Analysis-Mounted Case	\$128	\$251	49%
9951	Occlusal Adjustment-Limited	\$58	\$114	49%
9952	Occlusal Adjustment-Complete	\$328	\$643	49%
9970	Enamel Microabrasion	\$23	\$44	49%