



Core Dental Plan

Maximum Reimbursement Schedule

Effective January 2025

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Core Dental Plan

Level I and II Core Coverage

Diagnostic:

Code	Fee	Core
01101	66.00	100%
01102	99.00	100%
01103	130.00	100%
01201	54.00	100%
01202	43.00	100%
02102	178.00	100%
02111	28.00	100%
02112	38.00	100%
02113	48.00	100%
02114	58.00	100%
02115	68.00	100%
02116	78.00	100%
02141	28.00	100%
02142	38.00	100%
02143	48.00	100%
02144	58.00	100%
02601	88.00	100%
04911	48.00	100%

Preventative:

Code	Fee	Core
11101	44.00	100%
11111	55.00	100%
11112	110.00	75%
11113	165.00	75%
11114	220.00	75%
11115	275.00	75%
11116	330.00	75%
11117	27.50	75%
12111	21.00	75%
12112	26.00	75%
12113	32.00	75%
14611	341.00	75%
14612	341.00	75%

Restorative:

Code	Fee	Core
20111	135.00	75%
20119	135.00	75%
20121	172.00	75%

Restorative:

Code	Fee	Core
20129	172.00	75%
20131	56.00	75%
20139	56.00	75%
21111	165.00	75%
21112	223.00	75%
21113	267.00	75%
21121	165.00	75%
21122	223.00	75%
21123	267.00	75%
21211	194.00	75%
21212	262.00	75%
21213	315.00	75%
21214	378.00	75%
21215	453.00	75%
21221	212.00	75%
21222	286.00	75%
21223	343.00	75%
21224	411.00	75%
21225	494.00	75%
21231	194.00	75%
21232	262.00	75%
21233	315.00	75%
21234	378.00	75%
21235	453.00	75%
21241	212.00	75%
21242	286.00	75%
21243	343.00	75%
21244	411.00	75%
21245	494.00	75%
21401	34.00	75%
21402	54.00	75%
21403	73.00	75%
21404	92.00	75%
21405	111.00	75%
22201	245.00	75%
22211	245.00	75%
22311	245.00	75%
23111	168.00	75%

Code	Fee	Core
23112	226.00	75%
23113	272.00	75%
23114	326.00	75%
23115	391.00	75%
23311	194.00	75%
23312	262.00	75%
23313	315.00	75%
23314	378.00	75%
23315	453.00	75%
23321	212.00	75%
23322	286.00	75%
23323	343.00	75%
23324	411.00	75%
23325	494.00	75%
23411	165.00	75%
23412	223.00	75%
23413	267.00	75%
23414	321.00	75%
23415	385.00	75%
23511	194.00	75%
23512	262.00	75%
23513	315.00	75%
23514	378.00	75%
23515	453.00	75%
29101	147.00	75%
29102	294.00	75%
29103	441.00	75%
29109	147.00	75%

Endodontics:

Code	Fee	Core
32221	170.00	75%
32222	221.00	75%
32232	112.00	75%
33111	676.00	75%
33113	830.00	75%
33121	923.00	75%
33123	1168.00	75%

Code	Fee	Core
33131	1156.00	75%
33133	1433.00	75%
33141	1337.00	75%

Periodontics:

Code	Fee	Core
41211	174.00	75%
41212	348.00	75%
41221	174.00	75%
41222	348.00	75%
41301	71.00	75%
41302	142.00	75%
42111	288.00	75%
42201	334.00	75%
42311	413.00	75%
42321	449.00	75%
42411	1175.00	75%
42421	762.00	75%
42431	882.00	75%
42511	741.00	75%
42521	781.00	75%
42821	147.00	75%
42831	147.00	75%
42832	294.00	75%
43421	55.00	75%
43422	110.00	75%
43423	165.00	75%
43424	220.00	75%
43425	275.00	75%
43426	330.00	75%
43427	27.50	75%

Prosthodontics:

Code	Fee	Core
55101	89.00	75%
55102	89.00	75%
55201	174.00	75%

Prosthodontics:

Code	Fee	Core
55202	174.00	75%
55301	89.00	75%
55302	89.00	75%
55401	175.00	75%
55402	175.00	75%
56211	280.00	75%
56212	280.00	75%
56221	280.00	75%
56222	280.00	75%
56231	333.00	75%
56232	333.00	75%
56241	285.00	75%
56242	285.00	75%
56311	285.00	75%
56312	285.00	75%
56321	285.00	75%
56322	285.00	75%

Oral Surgery:

Code	Fee	Core
71101	178.00	75%
71109	142.00	75%
72111	310.00	75%
72211	427.00	75%
72221	570.00	75%
72231	625.00	75%
72321	250.00	75%
72329	200.00	75%
72331	318.00	75%
72339	255.00	75%
73121	226.00	75%
73222	226.00	75%
73411	586.00	75%
75112	186.00	75%
75121	237.00	75%

Adjunctive Services:

Code	Fee	Core
91121	147.00	75%
91122	294.00	75%
91211	147.00	75%
91212	294.00	75%
91213	441.00	75%
91219	147.00	75%
92411	69.00	75% PS
92412	114.00	75% PS
92413	159.00	75% PS
92414	204.00	75% PS
92415	249.00	75% PS
92421	69.00	75% PS
92422	114.00	75% PS
92423	159.00	75% PS
92424	204.00	75% PS
92425	249.00	75% PS
92431	122.00	75% PS

Note: [P.S.] charges for professional services billed to the dentist and passed through to the patient.

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Core Dental Plan

Level III Core Coverage

Restorative:

Code	Fee	Core
23122	327.00	50%
23601	234.00	50%
23602	234.00	50%
25111	544.00	50%
25731	253.00	50%
25732	306.00	50%
25733	350.00	50%
27111	813.00	50%
27121	220.00	50%
27131	874.00	50%
27201	1027.00	50%
27211	1027.00	50%
27212	1119.00	50%
27301	1027.00	50%
27311	1027.00	50%
27601	796.00	50%
27602	796.00	50%

Prosthodontics - Removable:

Code	Fee	Core
51101	1136.00	50%
51102	1237.00	50%
51201	1449.00	50%
51202	1577.00	50%
51301	1136.00	50%
51302	1237.00	50%
51601	521.00	50%
51602	568.00	50%
52101	340.00	50%
52102	340.00	50%
52301	651.00	50%
52302	651.00	50%
52311	519.00	50%
52312	519.00	50%
53101	1376.00	50%
53102	1376.00	50%
53201	1175.00	50%
53202	1175.00	50%
53401	1354.00	50%
53402	1354.00	50%
54201	106.00	50%
54202	212.00	50%
54209	106.00	50%

Prosthodontics - Fixed:

Code	Fee	Core
62101	462.00	50%
62102	462.00	50%
62501	462.00	50%
62701	462.00	50%
62702	462.00	50%
66111	147.00	50%
66112	294.00	50%
66113	441.00	50%
66211	147.00	50%
66212	294.00	50%
66213	441.00	50%
66221	147.00	50%
66222	294.00	50%
66251	147.00	50%
66252	294.00	50%
66253	441.00	50%
66301	147.00	50%
66302	294.00	50%
66303	441.00	50%
67201	913.00	50%
67211	913.00	50%
67301	913.00	50%
67302	996.00	50%
67311	887.00	50%

Denturists:

Code	Fee	Core
31310	1809.00	50%
31320	1809.00	50%
32110	609.00	75%
32120	609.00	75%
32215	491.00	75%
32225	491.00	75%
33117	1152.00	75%
33127	1152.00	75%
33217	1040.00	75%
33220	1440.00	75%
33221	1440.00	75%
33227	1040.00	75%
36110	154.00	75%
36120	154.00	75%
36210	211.00	75%
36220	211.00	75%
41110	3478.00	50%
41114	2171.00	50%
41120	3478.00	50%
41124	2171.00	50%
41216	3478.00	50%
41226	3478.00	50%
41254	2171.00	50%
41264	2171.00	50%
41612	1602.00	50%
41622	1674.00	50%
41623	1924.00	50%
42116	609.00	75%
42126	609.00	75%
42210	491.00	75%
42220	491.00	75%
43116	1152.00	75%
43126	1152.00	75%
43217	1040.00	75%
43227	1040.00	75%
44220	1440.00	75%
44221	1440.00	75%
46110	154.00	75%
46120	154.00	75%
46210	211.00	75%
46220	211.00	75%
46310	264.00	50%
46320	264.00	50%
71010	175.00	50%
72001	268.00	50%
72032	268.00	50%

Note: Laboratory charges associated with certain dental codes are eligible expenses and where applicable will be reimbursed as a percentage of the associated code cost. Laboratory charges for dentist codes are included in the code fee.
I.C. – Independent Consideration* Core means the 3sHealth Core Dental Plan For further details on plan provisions, consult the core and enhanced plan commentaries available from your employer.