

BRITISH COLUMBIA Canadian Dental Care Plan (CDCP) 2024 Dental Benefit Grid

General Practitioners and Specialists

Services in Schedule A do not require preauthorization and will be available May 2024.

Services in Schedule B will require preauthorization and will be available November 2024.

- The coverage of dental services provided through the CDCP will be reimbursed in accordance with the terms and conditions of the Plan.
- Please refer to the CDCP Dental Benefits Guide for further information on policies, guidelines and criteria of dental services eligible under the CDCP.
- Specialists are compensated at specialist rates for selected procedures within their specialty. For all other procedures, Specialists are compensated at General Practitioners' rates.

Should you have any questions, please contact the Sun Life Contact Centre at 1-888-888-8110.

Schedule A

0.0 DIAGNOSTIC

0.1 Examinations

- Up to 3 exams in any 12 months
- Excludes emergency examination.
- Frequency limitations take into account overall interaction between various examination services rendered by same provider, different providers within the same office or different office, and their eligibility period.
- Specialty complete and Specialty limited examinations (performed by specialists only) will not count against the eligible maximum examinations allowable.

First Dental Visit Orientation

- Up to the age of three (3) inclusive
- 1 in a lifetime

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|------|--------|---------|-------|---------|-------|------|-------|
| 01011 | | \$44.54 | | | | | | \$53.45 | | | |

Complete Oral Examination and Diagnosis

• 1 in any 60 months- when a complete examination is provided, it replaces the recall and the new patient limited examination for the respective eligible period.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|----------|-------|------|-------|
| 01101 | | \$75.57 | | | | | | \$90.68 | | | |
| 01102 | | \$102.48 | | | | | | \$122.98 | | | |
| 01103 | | \$107.13 | | | | | | \$128.56 | | | |

New Patient Limited

- 1 in a lifetime, with same provider or different provider in the same office.
- 1 in any 12 months, with different provider in a different office.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|------|--------|---------|-------|---------|-------|------|-------|
| 01201 | | \$51.51 | | | | | | \$61.81 | | | |

Recall Examination

• 1 in any 12 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|------|--------|---------|-------|---------|-------|------|-------|
| 01202 | | \$32.73 | | | | | | \$39.28 | | | |

Specific Examination

• 1 in any 12 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|---------|---------|---------|-------|---------|---------|---------|-------|
| 01204 | | \$41.65 | | \$41.65 | \$41.65 | \$41.65 | | \$49.98 | \$41.65 | \$41.65 | |

Emergency Examination

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|---------|---------|---------|-------|---------|---------|---------|-------|
| 01205 | | \$59.50 | | \$59.50 | \$59.50 | \$59.50 | | \$71.40 | \$59.50 | \$59.50 | |

Specialist Examination and Diagnosis - Limited

• 1 in any 12 months per specialty, and up to 2 in any 12 months if the second examination is performed by a different provider of the same specialty than the provider who performed the first examination, with GP referral and justification for the referral.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----|-------|------|---------|---------|-------|------|----------|------|-------|
| 01402 | | | | | \$89.66 | \$89.66 | | | | | |
| 01502 | | | | | | | | | \$136.77 | | |

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----|-------|---------|--------|---------|-------|------|----------|---------|-------|
| 01503 | | | | | | | | | \$127.16 | | |
| 01702 | | | | | | | | | | \$50.29 | |
| 01802 | | | | \$56.81 | | | | | | | |

0.2 Radiographs

Intraoral Radiographs, Complete series

• 1 in any 60 months

| | Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|---|-------|-----|----------|-------|----------|--------|---------|-------|----------|----------|----------|----------|
| | 02101 | | \$101.32 | | \$101.32 | | | | \$101.32 | \$101.32 | \$101.32 | \$101.32 |
| Γ | 02102 | | \$108.90 | | \$108.90 | | | | \$108.90 | \$108.90 | \$108.90 | \$108.90 |

Intraoral Radiographs (1-8 images)

- Includes periapical, bitewing and occlusal radiographs.
- 8 in any 12 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|---------|--------|---------|-------|---------|---------|---------|---------|
| 02111 | | \$19.82 | | \$19.82 | | | | \$19.82 | \$19.82 | \$19.82 | \$19.82 |
| 02112 | | \$27.23 | | \$27.23 | | | | \$27.23 | \$27.23 | \$27.23 | \$27.23 |
| 02113 | | \$34.57 | | \$34.57 | | | | \$34.57 | \$34.57 | \$34.57 | \$34.57 |
| 02114 | | \$42.14 | | \$42.14 | | | | \$42.14 | \$42.14 | \$42.14 | \$42.14 |
| 02115 | | \$49.59 | | \$49.59 | | | | \$49.59 | \$49.59 | \$49.59 | \$49.59 |
| 02116 | | \$57.03 | | \$57.03 | | | | \$57.03 | \$57.03 | \$57.03 | \$57.03 |
| 02117 | | \$64.34 | | \$64.34 | | | | \$64.34 | \$64.34 | \$64.34 | \$64.34 |
| 02118 | | \$71.77 | | \$71.77 | | | | \$71.77 | \$71.77 | \$71.77 | \$71.77 |
| 02131 | | \$27.80 | | \$27.80 | | | | \$27.80 | \$27.80 | \$27.80 | \$27.80 |
| 02132 | | \$38.42 | | \$38.42 | | | | \$38.42 | \$38.42 | \$38.42 | \$38.42 |
| 02141 | | \$19.82 | | \$19.82 | | | | \$19.82 | \$19.82 | \$19.82 | \$19.82 |
| 02142 | | \$27.23 | | \$27.23 | | | | \$27.23 | \$27.23 | \$27.23 | \$27.23 |
| 02143 | | \$34.57 | | \$34.57 | | | | \$34.57 | \$34.57 | \$34.57 | \$34.57 |
| 02144 | | \$42.14 | | \$42.14 | | | | \$42.14 | \$42.14 | \$42.14 | \$42.14 |

Panoramic

• 1 in any 60 months; Up to 3 in a lifetime

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|---------|--------|---------|-------|---------|---------|---------|---------|
| 02601 | | \$76.78 | | \$76.78 | | | | \$76.78 | \$76.78 | \$76.78 | \$76.78 |

0.3 Laboratory Tests

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|----------|----------|----------|-------|----------|----------|------|-------|
| 04311 | L | \$125.80 | | \$150.96 | \$150.96 | \$150.96 | | \$150.96 | \$150.96 | | |
| 04312 | L | \$203.15 | | \$243.78 | \$243.78 | \$243.78 | | \$243.78 | \$243.78 | | |
| 04313 | L | \$87.74 | | \$105.29 | \$105.29 | \$105.29 | | \$105.29 | \$105.29 | | |
| 04314 | L | \$87.74 | | \$105.29 | \$105.29 | \$105.29 | | \$105.29 | \$105.29 | | |
| 04315 | L | \$163.24 | | \$195.89 | \$195.89 | \$195.89 | | \$195.89 | \$195.89 | | |
| 04321 | L | \$117.48 | | \$140.98 | \$140.98 | \$140.98 | | \$140.98 | \$140.98 | | |
| 04322 | L | \$406.30 | | \$487.56 | \$487.56 | \$487.56 | | \$487.56 | \$487.56 | | |
| 04323 | L | \$117.48 | | \$140.98 | \$140.98 | \$140.98 | | \$140.98 | \$140.98 | | |

Microbiological Test and Cytological Smear

• 1 per procedure in any 12 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|---------|---------|---------|-------|---------|---------|------|-------|
| 04101 | L | \$59.93 | | \$71.92 | \$71.92 | \$71.92 | | \$71.92 | \$71.92 | | |
| 04401 | L | \$55.16 | | \$66.19 | \$66.19 | \$66.19 | | \$66.19 | \$61.30 | | |

1.0 PREVENTION

Polishing

• ½ unit in any 12 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|------|--------|---------|-------|---------|---------|---------|-------|
| 11107 | | \$11.15 | | | | | | \$11.15 | \$11.15 | \$11.15 | |

Scaling

- Age 0 to 11: ½ unit in any 12 months;
- Age 12 to 16: 1 unit in any 12 months;
- Age 17+: 4 units in any 12 months in combination with root planing;
- Preauthorization is required for additional units.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|----------|----------|----------|-------|
| 11111 | | \$53.80 | | | | | | \$53.80 | \$53.80 | \$53.80 | |
| 11112 | | \$107.60 | | | | | | \$107.60 | \$107.60 | \$107.60 | |
| 11113 | | \$161.40 | | | | | | \$161.40 | \$161.40 | \$161.40 | |
| 11114 | | \$215.20 | | | | | | \$215.20 | \$215.20 | \$215.20 | |
| 11117 | | \$26.90 | | | | | | \$26.90 | \$26.90 | \$26.90 | |

Topical Fluoride

• Age 0 to 16: 1 in any 6 months

• Age 17+: 1 in any 12 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|------|--------|---------|-------|---------|---------|------|-------|
| 12111 | | \$12.48 | | | | | | \$12.48 | \$12.48 | | |
| 12112 | | \$15.64 | | | | | | \$15.64 | \$15.64 | | |
| 12113 | | \$22.40 | | | | | | \$22.40 | \$22.40 | | |

Sealants/Preventative Resins

- Eligible for only those under age 17, on occlusal surface of permanent molars (16, 26, 36, 46, 17, 27, 37, 47), bicuspids (14, 15, 24, 25, 34, 35, 44, 45), and lingual surface of permanent maxillary incisors (11, 12, 21, 22), where surfaces are unrestored.
- There is a lifetime limit of 2 sealants/preventive restorative resins per eligible tooth.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|------|--------|---------|-------|---------|-------|------|-------|
| 13401 | | \$31.10 | | | | | | \$37.32 | | | |
| 13409 | | \$17.00 | | | | | | \$20.40 | | | |
| 13411 | | \$63.47 | | | | | | \$76.16 | | | |
| 13419 | | \$32.66 | | | | | | \$39.19 | | | |

Topical Application to Hard Tissue Lesion(s) of an Antimicrobial or Remineralization Agent

- Includes Silver Diamine Fluoride (SDF).
- 2 treatments in any 12 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|------|--------|---------|-------|---------|---------|------|-------|
| 13601 | | \$39.70 | | | | | | \$39.70 | \$39.70 | | |

2.0 RESTORATION

Caries, Trauma and Pain Control

• Should not be considered for coverage in conjunction with the following procedures: restorations, open and drain, pulpectomy, pulpotomy, root canal if requested with the same date of service and for the same tooth.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|----------|--------|---------|-------|----------|-------|------|-------|
| 20111 | | \$118.15 | | \$118.15 | | | | \$141.78 | | | |
| 20119 | | \$58.74 | | \$58.74 | | | | \$70.49 | | | |
| 20121 | | \$164.05 | | \$164.05 | | | | \$196.86 | | | |
| 20129 | | \$82.03 | | \$82.03 | | | | \$98.44 | | | |
| 20131 | | \$37.57 | | \$37.57 | | | | \$45.08 | | | |
| 20139 | | \$17.26 | | \$17.26 | | | | \$20.71 | | | |

Restoration, Amalgam/Composite; Prefabricated, Full Coverage

- Primary incisor teeth are eligible only for those under age 5.
- 1 per tooth in any 24 months for same provider or different provider in the same office.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|----------------|-----|----------------------|-------|----------------------|--------|---------|-------|----------------------|-------|----------------------|-------|
| 21111 | | \$119.00 | | | | | | \$142.80 | | | |
| 21112 | | \$150.45 | | | | | | \$180.54 | | | |
| 21113 | | \$172.55 | | | | | | \$207.06 | | | |
| 21114 | | \$198.90 | | | | | | \$238.68 | | | |
| 21115 | | \$228.65 | | | | | | \$274.38 | | | |
| 21121 | | \$119.00 | | | | | | \$142.80 | | | |
| 21122 | | \$150.45 | | | | | | \$180.54 | | | |
| 21123 | | \$172.55 | | | | | | \$207.06 | | | |
| 21124 | | \$198.90 | | | | | | \$238.68 | | | |
| 21125 | | \$228.65 | | | | | | \$274.38 | | | |
| 21211 | | \$141.10 | | \$141.10 | | | | \$169.32 | | \$141.10 | |
| 21212 | | \$195.50 | | \$195.50 | | | | \$234.60 | | \$195.50 | |
| 21213 | | \$238.00 | | \$238.00 | | | | \$285.60 | | \$238.00 | |
| 21214 | | \$290.70 | | \$290.70 | | | | \$348.84 | | \$290.70 | |
| 21215 | | \$354.45 | | \$354.45 | | | | \$425.34 | | \$354.45 | |
| 21221 21222 | | \$153.00 \$230.35 | | \$153.00 \$230.35 | | | | \$183.60 | | \$153.00 \$230.35 | |
| 21222 | | \$283.05 | | \$283.05 | | | | \$276.42 \$339.66 | | \$283.05 | |
| 21223 | | \$348.50 | | \$348.50 | | | | \$418.20 | | \$348.50 | |
| 21225 | | \$428.40 | | \$428.40 | | | | \$514.08 | | \$428.40 | |
| 21223 | | \$141.10 | | \$141.10 | | | | \$169.32 | | \$141.10 | |
| 21232 | | \$195.50 | | \$195.50 | | | | \$234.60 | | \$195.50 | |
| 21233 | | \$238.00 | | \$238.00 | | | | \$285.60 | | \$238.00 | |
| 21234 | | \$290.70 | | \$290.70 | | | | \$348.84 | | \$290.70 | |
| 21235 | | \$354.45 | | \$354.45 | | | | \$425.34 | | \$354.45 | |
| 21241 | | \$153.00 | | \$153.00 | | | | \$183.60 | | \$153.00 | |
| 21242 | | \$230.35 | | \$230.35 | | | | \$276.42 | | \$230.35 | |
| 21243 | | \$283.05 | | \$283.05 | | | | \$339.66 | | \$283.05 | |
| 21244 | | \$348.50 | | \$348.50 | | | | \$418.20 | | \$348.50 | |
| 21245 | | \$428.40 | | \$428.40 | | | | \$514.08 | | \$428.40 | |
| 21401 | | \$35.11 | | | | | | \$42.13 | | \$42.13 | |
| 21402 | | \$52.87 | | | | | | \$63.44 | | \$63.44 | |
| 21403 | | \$67.24 | | | | | | \$80.69 | | \$80.69 | |
| 21404 | | \$82.03 | | | | | | \$98.44 | | \$98.44 | |
| 21405 | | \$96.05 | | | | | | \$115.26 | | \$115.26 | |
| 22201 | | \$236.30 | | | | | | \$283.56 | | \$236.30 | |
| 22202 | | \$236.30 | | | | | | \$283.56 | | \$236.30 | |
| 22211 | | \$228.65 | | | | | | \$274.38 | | \$228.65 | |
| 22212 | | \$228.65 | | | | | | \$274.38 | | \$228.65 | |
| 22401 | | \$236.30 | | | | | | \$283.56 | | \$236.30 | |
| 22501 | | \$266.90 | | #404.40 | | | | \$320.28 | | \$266.90 | |
| 23101 23102 | | \$124.16 \$142.66 | | \$124.16 \$142.66 | | | | \$148.99 \$171.19 | | \$124.16 \$142.66 | |
| 23102 | | \$142.66 | | \$142.00 | | | | \$171.19 | | \$142.00 | |
| 23103 | | \$177.46 | | \$177.46 | | | | \$212.95 | | \$177.46 | |
| 23104 | | \$264.52 | | \$264.52 | | | | \$317.42 | | \$264.52 | |
| 23111 | | \$144.10 | | \$144.10 | | | | \$172.92 | | \$144.10 | |
| 23112 | | \$173.46 | | \$173.46 | | | | \$208.15 | | \$173.46 | |
| 23113 | | \$219.63 | | \$219.63 | | | | \$263.56 | | \$219.63 | |
| 23114 | | \$274.00 | | \$274.00 | | | | \$328.80 | | \$274.00 | |
| 23115 | | \$325.31 | | \$325.31 | | | | \$390.37 | | \$325.31 | |
| 23211 | | \$117.39 | | \$117.39 | | | | \$140.87 | | \$117.39 | |
| 23212 | | \$147.69 | | \$147.69 | | | | \$177.23 | | \$147.69 | |
| 23213 | | \$172.00 | | \$172.00 | | | | \$206.40 | | \$172.00 | |
| 23214 | | \$206.84 | | \$206.84 | | | | \$248.21 | | \$206.84 | |
| 23215 | | \$254.85 | | \$254.85 | | | | \$305.82 | | \$254.85 | |
| 23221 | | \$126.00 | | \$126.00 | | | | \$151.20 | | \$126.00 | |
| 23222 | | \$168.93 | | \$168.93 | | | | \$202.72 | | \$168.93 | |
| 23223 | | \$198.46 | | \$198.46 | | | | \$238.15 | | \$198.46 | |

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|----------|--------|---------|-------|----------|-------|----------|-------|
| 23224 | | \$242.33 | | \$242.33 | | | | \$290.80 | | \$242.33 | |
| 23225 | | \$306.17 | | \$306.17 | | | | \$367.40 | | \$306.17 | |
| 23311 | | \$166.16 | | \$166.16 | | | | \$199.39 | | \$166.16 | |
| 23312 | | \$232.12 | | \$232.12 | | | | \$278.54 | | \$232.12 | |
| 23313 | | \$277.72 | | \$277.72 | | | | \$333.26 | | \$277.72 | |
| 23314 | | \$341.93 | | \$341.93 | | | | \$410.32 | | \$341.93 | |
| 23315 | | \$393.55 | | \$393.55 | | | | \$472.26 | | \$393.55 | |
| 23321 | | \$178.12 | | \$178.12 | | | | \$213.74 | | \$178.12 | |
| 23322 | | \$272.66 | | \$272.66 | | | | \$327.19 | | \$272.66 | |
| 23323 | | \$329.67 | | \$329.67 | | | | \$395.60 | | \$329.67 | |
| 23324 | | \$396.28 | | \$396.28 | | | | \$475.54 | | \$396.28 | |
| 23325 | | \$476.00 | | \$476.00 | | | | \$571.20 | | \$476.00 | |
| 23401 | | \$114.74 | | | | | | \$137.69 | | \$114.74 | |
| 23402 | | \$155.66 | | | | | | \$186.79 | | \$155.66 | |
| 23403 | | \$164.04 | | | | | | \$196.85 | | \$164.04 | |
| 23404 | | \$187.68 | | | | | | \$225.22 | | \$187.68 | |
| 23405 | | \$213.90 | | | | | | \$256.68 | | \$213.90 | |
| 23411 | | \$132.80 | | | | | | \$159.36 | | \$132.80 | |
| 23412 | | \$169.50 | | | | | | \$203.40 | | \$169.50 | |
| 23413 | | \$192.10 | | | | | | \$230.52 | | \$192.10 | |
| 23414 | | \$221.00 | | | | | | \$265.20 | | \$221.00 | |
| 23415 | | \$236.30 | | | | | | \$283.56 | | \$236.30 | |
| 23501 | | \$104.51 | | | | | | \$125.41 | | | |
| 23502 | | \$148.23 | | | | | | \$177.88 | | | |
| 23503 | | \$166.99 | | | | | | \$200.39 | | | |
| 23504 | | \$190.91 | | | | | | \$229.09 | | | |
| 23505 | | \$216.56 | | | | | | \$259.87 | | | |
| 23511 | | \$148.23 | | | | | | \$177.88 | | | |
| 23512 | | \$213.49 | | | | | | \$256.19 | | | |
| 23513 | | \$228.65 | | | | | | \$274.38 | | | |
| 23514 | | \$228.65 | | | | | | \$274.38 | | | |
| 23515 | | \$228.65 | | _ | | | _ | \$274.38 | | | |
| 22301 | | \$236.30 | | | | | | \$283.56 | | \$236.30 | |
| 22302 | | \$236.30 | | | | | | \$283.56 | | \$236.30 | |
| 22311 | | \$236.30 | | | | | | \$283.56 | | \$236.30 | |
| 22312 | | \$236.30 | | | | | | \$283.56 | | \$236.30 | |

Prefabricated Posts

- 4 in any 10 years per client (permanent teeth only)
- A prefabricated post/pin is eligible only when inadequate coronal tooth structure is remaining to retain the restoration.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|----------|-------|----------|-------|
| 25731 | | \$187.85 | | | | | | \$225.42 | | \$225.42 | |
| 25732 | | \$300.05 | | | | | | \$360.06 | | \$360.06 | |
| 25733 | | \$412.25 | | | | | | \$494.70 | | \$494.70 | |

Post Removal

• 1 in a lifetime per permanent tooth

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|----------|--------|---------|-------|----------|-------|----------|-------|
| 25781 | | \$91.80 | | \$110.16 | | | | \$110.16 | | \$110.16 | |
| 25782 | | \$183.60 | | \$220.32 | | | | \$220.32 | | \$220.32 | |

Repair to Crowns

• 1 in any 36 months per tooth

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|------|-------|----------|-------|
| 27721 | | \$262.65 | | | | | | | | \$315.18 | |
| 27722 | L | \$231.20 | | | | | | | | \$277.44 | |

Recementation of Crowns

• 1 in any 36 months per tooth

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|------|--------|---------|-------|---------|-------|---------|-------|
| 29101 | | \$82.88 | | | | | | \$99.46 | | \$99.46 | |

3.0 ENDODONTICS

• The CDCP Endodontics Policy must be met. Please refer to the <u>oral health provider</u> page on the Sun Life CDCP website or the <u>dental coverage</u> page on the Government of Canada website for more information on the CDCP dental policies.

Pulpotomy/Pulpectomy

Primary incisor teeth are eligible only for those under age 5.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|----------|--------|---------|-------|----------|-------|------|-------|
| 32221 | | \$131.75 | | \$158.10 | | | | \$158.10 | | | |
| 32222 | | \$130.90 | | \$157.08 | | | | \$157.08 | | | |
| 32231 | | \$96.90 | | \$116.28 | | | | \$116.28 | | | |
| 32232 | | \$82.54 | | \$99.05 | | | | \$99.05 | | | |
| 32311 | | \$173.40 | | \$208.08 | | | | \$208.08 | | | |
| 32312 | | \$207.40 | | \$248.88 | | | | \$248.88 | | | |
| 32313 | | \$338.30 | | \$405.96 | | | | \$405.96 | | | |
| 32314 | | \$369.75 | | \$443.70 | | | | \$443.70 | | | |
| 32321 | | \$173.40 | | \$208.08 | | | | \$208.08 | | | |
| 32322 | | \$272.85 | | \$327.42 | | | | \$327.42 | | | |

Root Canal Therapy

• Preauthorization is required for 8's at all times.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|------------|-------|------------|--------|---------|-------|------------|-------|------|-------|
| 33111 | | \$505.75 | | \$606.90 | | | | \$606.90 | | | |
| 33121 | | \$646.00 | | \$775.20 | | | | \$775.20 | | | |
| 33131 | | \$910.35 | | \$1,092.42 | | | | \$1,092.42 | | | |
| 33141 | | \$1,007.25 | | \$1,208.70 | | | | \$1,208.70 | | | |

Open and Drain

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|----------|--------|---------|-------|----------|-------|------|-------|
| 39201 | | \$91.80 | | \$110.16 | | | | \$110.16 | | | |
| 39202 | | \$91.80 | | \$110.16 | | | | \$110.16 | | | |

4.0 PERIODONTICS

Management of Oral Disease

• 2 units in any 12 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|----------|----------|-------|------|----------|------|-------|
| 41211 | | \$56.00 | | | \$67.20 | \$67.20 | | | \$67.20 | | |
| 41212 | | \$112.00 | | | \$134.40 | \$134.40 | | | \$134.40 | | |

• 2 units in any 12 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|------|----------|----------|-------|------|----------|------|-------|
| 41231 | | \$43.85 | | | \$52.62 | \$52.62 | | | \$52.62 | | |
| 41232 | | \$87.50 | | | \$105.00 | \$105.00 | | | \$105.00 | | |

Desensitization

• 2 units in any 12 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|------|----------|------|-------|
| 41301 | | \$61.03 | | | | | | | \$61.03 | | |
| 41302 | | \$122.06 | | | | | | | \$122.06 | | |

Miscellaneous

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|------|--------|---------|-------|---------|---------|------|-------|
| 42831 | | \$62.46 | | | | | | \$74.95 | \$74.95 | | |

Root Planing

- Age 17+: 4 units in any 12 months in combination with scaling.
- Preauthorization is required for additional units.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|------|----------|------|-------|
| 43421 | | \$45.73 | | | | | | | \$54.88 | | |
| 43422 | | \$91.46 | | | | | | | \$109.75 | | |
| 43423 | | \$137.19 | | | | | | | \$164.63 | | |
| 43424 | | \$182.92 | | | | | | | \$219.50 | | |
| 43427 | | \$22.87 | | | | | | | \$27.44 | | |

5.0 PROSTHODONTICS - REMOVABLE

- The Removable Prosthodontic Policy must be met. Please refer to the <u>oral health provider</u> page on the Sun Life CDCP website or the <u>dental coverage</u> page on the Government of Canada website for more information on the CDCP dental policies.
- The fee for complete and partial dentures includes a three (3) month period of post-insertion care. The fee for immediate dentures includes the tissue conditioner, but not the processed reline/rebase.
- Denture adjustments done on the same date of service and in conjunction with the delivery of new dentures, denture repairs, relines, rebases and/or tissue conditioning, are included in the fees billed and paid for these services.
- The overall cost of replacement for a denture may be adjusted in situations where claims for reline/rebase were paid within three months prior to the request.

Complete Dentures - Standard

• 1 per arch in any 96 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|------------|-------|------|--------|---------|-------|------|-------|------------|-------|
| 51101 | L | \$825.43 | | | | | | | | \$990.52 | |
| 51102 | L | \$899.25 | | | | | | | | \$1,079.10 | |
| 51103 | | \$1 283 99 | | | | | | | | \$1 540 79 | |

Complete Dentures - Provisional

1 per arch per lifetime

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|------|-------|------------|-------|
| 51601 | L | \$425.85 | | | | | | | | \$511.02 | |
| 51602 | L | \$567.80 | | | | | | | | \$681.36 | |
| 51603 | L | \$894.29 | | | | | | | | \$1,073.15 | |

Partial Acrylic Dentures - Provisional

• 1 per arch in any 60 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|------|-------|----------|-------|
| 52101 | L | \$316.20 | | | | | | | | \$379.44 | |
| 52102 | L | \$345.10 | | | | | | | | \$414.12 | |
| 52103 | L | \$482.55 | | | | | | | | \$579.06 | |
| 52121 | L | \$364.82 | | | | | | | | \$437.78 | |
| 52122 | L | \$364.82 | | | | | | | | \$437.78 | |
| 52123 | L | \$664.91 | | | | | | | | \$797.89 | |

Partial Acrylic Dentures

- 1 per arch in any 60 months
- Preauthorization is required for initial placement

Partial Cast Dentures

- 1 per arch in any 96 months
- Preauthorization is required for initial placement

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|------------|-------|------|--------|---------|-------|------|-------|------------|-------|
| 52111 | L | \$366.35 | | | | | | | | \$439.62 | |
| 52112 | L | \$380.80 | | | | | | | | \$456.96 | |
| 52113 | L | \$672.47 | | | | | | | | \$806.96 | |
| 52201 | L | \$814.30 | | | | | | | | \$977.16 | |
| 52202 | L | \$886.55 | | | | | | | | \$1,063.86 | |
| 52203 | L | \$1,530.79 | | | | | | | | \$1,836.95 | |
| 52301 | L | \$477.70 | | | | | | | | \$573.24 | |
| 52302 | L | \$521.05 | | | | | | | | \$625.26 | |
| 52303 | L | \$748.29 | | | | | | | | \$897.95 | |
| 52311 | L | \$562.70 | | | | | | | | \$675.24 | |
| 52312 | L | \$613.70 | | | | | | | | \$736.44 | |
| 52313 | L | \$1,058.77 | | | | | | | | \$1,270.52 | |
| 52401 | L | \$531.25 | | | | | | | | \$637.50 | |
| 52402 | L | \$578.85 | | | | | | | | \$694.62 | |
| 52403 | L | \$999.10 | | | | | | | | \$1,198.92 | |
| 52711 | L | \$635.80 | | | | | | | | \$762.96 | |
| 52712 | L | \$693.60 | | | | | | | | \$832.32 | |
| 52713 | L | \$1,196.46 | | | | | | | | \$1,435.75 | |
| 53101 | L | \$1,048.01 | | | | | | | | \$1,257.61 | |
| 53102 | L | \$1,141.97 | | | | | | | | \$1,370.36 | |
| 53103 | L | \$1,627.67 | | | | | | | | \$1,953.20 | |
| 53201 | L | \$892.55 | | | | | | | | \$1,071.06 | |
| 53202 | L | \$892.55 | | | | | | | | \$1,071.06 | |
| 53203 | L | \$1,330.85 | | | | | | | | \$1,597.02 | |
| 53301 | L | \$1,550.61 | | | | | | | | \$1,860.73 | |
| 53302 | L | \$1,550.61 | | | | | | | | \$1,860.73 | |
| 53711 | L | \$1,137.30 | | | | | | | | \$1,364.76 | |
| 53712 | L | \$1,237.60 | | | | | | | | \$1,485.12 | |
| 53713 | L | \$2,137.48 | | | | | | | | \$2,564.98 | |

Denture Adjustments

• After three months insertion or by other than the dentist providing prosthesis.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|------|--------|---------|-------|------|-------|---------|-------|
| 54201 | | \$72.00 | | | | | | | | \$86.40 | |

Repairs and Additions

• 1 per prosthesis in any 12 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|------|-------|----------|-------|
| 55101 | L | \$92.65 | | | | | | | | \$111.18 | |
| 55102 | L | \$92.65 | | | | | | | | \$111.18 | |
| 55201 | L | \$181.05 | | | | | | | | \$217.26 | |
| 55202 | L | \$181.05 | | | | | | | | \$217.26 | |
| 55203 | L | \$334.91 | | | | | | | | \$401.89 | |
| 55301 | L | \$92.65 | | | | | | | | \$111.18 | |
| 55302 | L | \$92.65 | | | | | | | | \$111.18 | |
| 55401 | L | \$181.05 | | | | | | | | \$217.26 | |
| 55402 | L | \$181.05 | | | | | | | | \$217.26 | |
| 55403 | L | \$334.91 | | | | | | | | \$401.89 | |

Reline or Rebase

• 1 per prosthesis in any 24 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|------|-------|----------|-------|
| 56211 | | \$268.60 | | | | | | | | \$322.32 | |
| 56212 | | \$304.30 | | | | | | | | \$365.16 | |
| 56213 | | \$515.61 | | | | | | | | \$618.73 | |

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|------|-------|----------|-------|
| 56221 | | \$215.05 | | | | | | | | \$258.06 | |
| 56222 | | \$232.90 | | | | | | | | \$279.48 | |
| 56223 | | \$264.71 | | | | | | | | \$317.65 | |
| 56231 | L | \$268.60 | | | | | | | | \$322.32 | |
| 56232 | L | \$304.30 | | | | | | | | \$365.16 | |
| 56233 | L | \$529.03 | | | | | | | | \$634.84 | |
| 56241 | L | \$215.05 | | | | | | | | \$258.06 | |
| 56242 | L | \$232.90 | | | | | | | | \$279.48 | |
| 56243 | L | \$413.61 | | | | | | | | \$496.33 | |
| 56311 | L | \$268.60 | | | | | | | | \$322.32 | |
| 56312 | L | \$304.30 | | | | | | | | \$365.16 | |
| 56313 | L | \$529.03 | | | | | | | | \$634.84 | |
| 56321 | L | \$215.05 | | | | | | | | \$258.06 | |
| 56322 | L | \$232.90 | | | | | | | | \$279.48 | |
| 56323 | Ĺ | \$413.61 | | | | | | | | \$496.33 | |

Tissue Conditioning

• 1 per prosthesis in any 24 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|------|-------|----------|-------|
| 56511 | | \$107.10 | | | | | | | | \$128.52 | |
| 56512 | | \$107.10 | | | | | | | | \$128.52 | |
| 56513 | | \$198.54 | | | | | | | | \$238.25 | |
| 56521 | | \$107.10 | | | | | | | | \$128.52 | |
| 56522 | | \$107.10 | | | | | | | | \$128.52 | |
| 56523 | | \$198.54 | | | | | | | | \$238.25 | |
| 56531 | | \$104.51 | | | | | | | | \$125.41 | |
| 56532 | | \$104.51 | | | | | | | | \$125.41 | |
| 56533 | | \$198.54 | | | | | | | | \$238.25 | |

7.0 ORAL AND MAXILLOFACIAL SURGERY

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|----------|----------|----------|-------|----------|----------|----------|-------|
| 71101 | | \$142.80 | | | | | | \$171.36 | \$168.00 | \$142.80 | |
| 71109 | | \$121.55 | | | | | | \$145.86 | \$143.00 | \$121.55 | |
| 71201 | | \$265.77 | | | | | | \$318.92 | \$299.50 | \$265.77 | |
| 71209 | | \$205.70 | | | | | | \$246.84 | \$246.84 | \$205.70 | |
| 71211 | | \$397.06 | | | | | | | | | |
| 71219 | | \$312.80 | | | | | | | | | |
| 72111 | | \$266.00 | | | | | | | | | |
| 72119 | | \$206.55 | | | | | | | | | |
| 72211 | | \$397.06 | | | | | | | | | |
| 72219 | | \$318.75 | | | | | | | | | |
| 72221 | | \$435.78 | | | | | | | | | |
| 72229 | | \$326.89 | | | | | | | | | |
| 72231 | | \$455.57 | | | | | | | | | |
| 72239 | | \$338.99 | | | | | | | | | |
| 72311 | | \$136.85 | | | | | | \$164.22 | \$136.85 | | |
| 72319 | | \$116.45 | | | | | | \$139.74 | \$116.45 | | |
| 74111 | | \$377.40 | | | \$452.88 | \$452.88 | | \$452.88 | \$444.00 | | |
| 74112 | | \$736.95 | | | \$884.34 | \$884.34 | | \$884.34 | \$867.00 | | |
| 74121 | | \$374.00 | | | \$448.80 | \$448.80 | | \$448.80 | \$448.80 | | |
| 74122 | | \$733.55 | | | \$880.26 | \$880.26 | | \$880.26 | \$880.26 | | |
| 74211 | | \$246.46 | | | \$295.75 | \$295.75 | | \$295.75 | \$295.75 | | |
| 74212 | | \$369.66 | | | \$443.59 | \$443.59 | | \$443.59 | \$443.59 | | |
| 74221 | | \$369.66 | | | \$443.59 | \$443.59 | | \$443.59 | \$443.59 | | |
| 74222 | | \$492.88 | | | \$591.46 | \$591.46 | | \$591.46 | \$591.46 | | |
| 74611 | | \$468.35 | | | \$562.02 | \$562.02 | | \$562.02 | \$551.00 | | |
| 74612 | | \$827.90 | | | \$993.48 | \$993.48 | | \$993.48 | \$974.00 | | |
| 74621 | | \$468.35 | | \$562.02 | \$562.02 | \$562.02 | | \$562.02 | \$551.00 | | _ |
| 74631 | | \$404.60 | | \$485.52 | \$485.52 | \$485.52 | | \$485.52 | \$476.00 | | |
| 74632 | | \$736.95 | | \$884.34 | \$884.34 | \$884.34 | | \$884.34 | \$867.00 | | |
| 75111 | | \$102.00 | | \$122.40 | \$122.40 | \$122.40 | | \$122.40 | \$122.40 | | |
| 75112 | | \$102.00 | | \$122.40 | | | | \$122.40 | \$120.00 | | |

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|----------|----------|----------|-------|----------|----------|------|-------|
| 75113 | | \$126.94 | | \$152.33 | | | | \$152.33 | \$136.60 | | |
| 75121 | | \$189.55 | | \$227.46 | | | | \$227.46 | \$227.46 | | |
| 75122 | | \$224.27 | | \$269.12 | | | | \$269.12 | \$269.12 | | |
| 75123 | | \$277.44 | | \$332.93 | | | | \$332.93 | \$332.93 | | |
| 75211 | | \$187.85 | | \$225.42 | | | | \$225.42 | | | |
| 75301 | | \$177.65 | | \$213.18 | | | | \$213.18 | | | |
| 75303 | | \$154.07 | | \$184.88 | | | | \$184.88 | | | |
| 76941 | | \$481.10 | | | | | | \$577.32 | | | |
| 76949 | | \$180.20 | | | | | | \$216.24 | | | |
| 76951 | | \$82.62 | | | | | | \$99.14 | | | |
| 76952 | | \$164.90 | | | | | | \$197.88 | | | |
| 76961 | | \$181.90 | | | | | | | | | |
| 76962 | | \$250.75 | | | | | | | | | |
| 79601 | | \$62.33 | | \$74.80 | \$74.80 | \$74.80 | | \$74.80 | \$74.80 | | |
| 79602 | | \$101.15 | | \$121.38 | \$121.38 | \$121.38 | | \$121.38 | \$119.40 | | |
| 79605 | | \$66.90 | | | | | | \$80.28 | \$79.00 | | |
| 79606 | | \$84.15 | | | | | | \$100.98 | \$99.30 | | |
| 79701 | | \$563.19 | | | | | | | | | |
| 79702 | | \$563.19 | | | | | | | | | |

8.0 ORTHODONTICS – NOT AVAILABLE UNTIL 2025

- The CDCP Orthodontic Policy must be met. Please refer to the <u>oral health provider</u> page on the Sun Life CDCP website or the <u>dental coverage</u> page on the Government of Canada website for more information on the CDCP dental policies.
- P1000 Examination
- P1100 Diagnostic records

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|----------|----------|-------|------|-------|
| P1000 | | \$103.79 | | | | | \$103.79 | \$103.79 | | | |
| P1100 | | \$380.56 | | | | | \$380.56 | \$380.56 | | | |

9.0 ADJUNCTIVE GENERAL SERVICES

The CDCP Sedation and General Anesthesia Policy must be met. Please refer to the <u>oral health</u> <u>provider</u> page on the Sun Life CDCP website or the <u>dental coverage</u> page on the Government of Canada website for more information on the CDCP dental policies.

Nitrous Oxide and Oral Sedation (stand-alone procedures and in combination)

• 4 in any 12 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|----------|------|--------|---------|-------|----------|----------|------|-------|
| 92411 | | \$45.99 | \$55.19 | | | | | \$55.19 | \$45.99 | | |
| 92412 | | \$83.80 | \$100.56 | | | | | \$100.56 | \$83.80 | | |
| 92413 | | \$121.00 | \$145.20 | | | | | \$145.20 | \$121.00 | | |
| 92414 | | \$158.00 | \$189.60 | | | | | \$189.60 | \$158.00 | | |
| 92415 | | \$174.03 | \$208.84 | | | | | \$208.84 | \$174.03 | | |
| 92416 | | \$207.13 | \$248.56 | | | | | \$248.56 | \$207.13 | | |
| 92417 | | \$240.23 | \$288.28 | | | | | \$288.28 | \$240.23 | | |
| 92418 | | \$273.35 | \$328.02 | | | | | \$328.02 | \$273.35 | | |
| 92421 | | \$46.50 | \$55.80 | | | | | \$55.80 | \$46.50 | | |
| 92422 | | \$46.50 | \$55.80 | | | | | \$55.80 | \$46.50 | | |
| 92423 | | \$46.50 | \$55.80 | | | | | \$55.80 | \$46.50 | | |
| 92424 | | \$46.50 | \$55.80 | | | | | \$55.80 | \$46.50 | | |
| 92425 | | \$46.50 | \$55.80 | | | | | \$55.80 | \$46.50 | | |
| 92426 | | \$46.50 | \$55.80 | | | | | \$55.80 | \$46.50 | | |
| 92427 | | \$46.50 | \$55.80 | | | | | \$55.80 | \$46.50 | | |
| 92428 | | \$46.50 | \$55.80 | | | | | \$55.80 | \$46.50 | | |
| 92431 | | \$125.28 | \$150.34 | | | | | \$150.34 | \$125.28 | | |
| 92432 | | \$176.71 | \$212.05 | | | | | \$212.05 | \$176.71 | | |
| 92433 | | \$228.17 | \$273.80 | | | | | \$273.80 | \$228.17 | | |
| 92434 | | \$280.75 | \$336.90 | | | | | \$336.90 | \$280.75 | | |
| 92435 | | \$304.56 | \$365.47 | | | | | \$365.47 | \$304.56 | | |

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|----------|------|--------|---------|-------|----------|----------|------|-------|
| 92436 | | \$351.85 | \$422.22 | | | | | \$422.22 | \$351.85 | | |
| 92437 | | \$398.20 | \$477.84 | | | | | \$477.84 | \$398.20 | | |
| 92438 | | \$444.53 | \$533.44 | | | | | \$533.44 | \$444.53 | | |

Schedule B

All procedures requiring preauthorization will be available November 2024, except orthodontics, which will be available beginning in 2025.

0.0 DIAGNOSTIC

Examinations

- Frequency limitations take into account overall interaction between various examination services rendered by same provider, different providers within the same office or different office, and their eligibility period.
- Specialty complete and limited examinations (performed by specialists only) will not count against the eligible maximum examinations allowable.

Specialist Examination and Diagnosis - Complete

- 1 in any 60 months per specialty and up to 2 in any 60 months if the second examination is performed by a different provider of the same specialty than the provider who performed the first examination, with GP referral and justification for the referral
- When a specialty complete examination is adjudicated, it eliminates specialty limited examination within the same specialty in that 12 month period.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----|-------|----------|----------|----------|-------|------|----------|----------|-------|
| 01401 | | | | | \$183.60 | \$183.60 | | | | | |
| 01501 | | | | | | | | | \$195.82 | | |
| 01701 | | | | | | | | | | \$108.12 | |
| 01801 | | | | \$162.18 | | | | | | | |

Diagnostic Casts, Unmounted

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|----------|-------|------|-------|
| 04911 | | \$106.25 | | | | | | \$106.25 | | | |
| 04913 | | \$174.86 | | | | | | \$174.86 | | | |

1.0 PREVENTION

Interproximal Disking of Teeth

1 unit in any 12 months

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|------|--------|---------|-------|------|-------|------|-------|
| 16201 | | \$41.10 | | | | | | | | | |

2.0 RESTORATION

Cores and Posts

- 4 in any 120 months, on permanent teeth only.
- Eligible only for those age 18 and older.
- Cores are eligible only if existing restoration is greater than 12 months old.
- Cores may be considered for coverage only in conjunction with an approved preauthorization crown request.
- Prefabricated posts in combination with core, including pin(s) where applicable, may be considered for coverage only in conjunction with an approved preauthorization crown request.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|------|-------|----------|-------|
| 21301 | | \$137.51 | | | | | | | | \$165.01 | |
| 21302 | | \$137.51 | | | | | | | | \$165.01 | |
| 23601 | | \$180.20 | | | | | | | | \$216.24 | |
| 23602 | | \$180.20 | | | | | | | | \$216.24 | |
| 25751 | | \$245.91 | | | | | | | | \$295.09 | |
| 25752 | | \$280.51 | | | | | | | | \$336.61 | |

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|------|-------|----------|-------|
| 25753 | | \$313.74 | | | | | | | | \$376.49 | |
| 25754 | | \$277.84 | | | | | | | | \$333.41 | |
| 25755 | | \$316.39 | | | | | | | | \$379.67 | |
| 25756 | | \$346.96 | | | | | | | | \$416.35 | |
| 25761 | | \$245.91 | | | | | | | | \$295.09 | |
| 25762 | | \$280.51 | | | | | | | | \$336.61 | |
| 25763 | | \$313.74 | | | | | | | | \$376.49 | |
| 25764 | | \$287.13 | | | | | | | | \$344.56 | |
| 25765 | | \$353.62 | | | | | | | | \$424.34 | |
| 25766 | | \$424.09 | | | | | | | | \$508.91 | |

Crowns

- 4 in any 120 months
- The CDCP Crown Policy must be met. Please refer to the <u>oral health provider</u> page on the Sun Life CDCP website or the <u>dental coverage</u> page on the Government of Canada website for more information on the CDCP dental policies.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|------|-------|------------|-------|
| 27201 | L | \$850.85 | | | | | | | | \$1,021.02 | |
| 27211 | L | \$850.85 | | | | | | | | \$1,021.02 | |
| 27301 | L | \$795.60 | | | | | | | | \$954.72 | |

3.0 ENDODONTICS

• The CDCP Endodontics Policy must be met. Please refer to the <u>oral health provider</u> page on the Sun Life CDCP website or the <u>dental coverage</u> page on the Government of Canada website for more information on the CDCP dental policies.

Root Canal Therapy

• Preauthorization is required for all 8's, at all times.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|------------|-------|------------|--------|---------|-------|------------|-------|------|-------|
| 33111 | | \$505.75 | | \$606.90 | | | | \$606.90 | | | |
| 33121 | | \$646.00 | | \$775.20 | | | | \$775.20 | | | |
| 33131 | | \$910.35 | | \$1,092.42 | | | | \$1,092.42 | | | |
| 33141 | | \$1.007.25 | | \$1,208,70 | | | | \$1,208,70 | | | |

Retreatment of Root Canal Therapy, Apicoectomy and Retrofilling

• 1 root canal re-treatment, 1 apicoectomy and 1 retrofilling per tooth, per lifetime.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|------------|-------|------------|--------|---------|-------|------------|-------|------|-------|
| 33115 | | \$539.75 | | \$647.70 | | | | \$647.70 | | | |
| 33125 | | \$785.40 | | \$942.48 | | | | \$942.48 | | | |
| 33135 | | \$1,090.55 | | \$1,308.66 | | | | \$1,308.66 | | | |
| 33145 | | \$1,193.41 | | \$1,432.09 | | | | \$1,432.09 | | | |
| 33601 | | \$164.05 | | \$196.86 | | | | \$196.86 | | | |
| 33602 | | \$228.65 | | \$274.38 | | | | \$274.38 | | | |
| 33603 | | \$300.05 | | \$360.06 | | | | \$360.06 | | | |
| 33604 | | \$308.55 | | \$370.26 | | | | \$370.26 | | | |
| 33605 | | \$159.80 | | \$191.76 | | | | \$191.76 | | | |
| 33611 | | \$55.00 | | \$66.00 | | | | \$66.00 | | | |
| 33612 | | \$76.33 | | \$91.60 | | | | \$91.60 | | | |
| 33613 | | \$108.80 | | \$130.56 | | | | \$130.56 | | | |
| 33614 | | \$121.55 | | \$145.86 | | | | \$145.86 | | | |
| 33621 | | \$426.70 | | \$512.04 | | | | \$512.04 | | | |
| 33622 | | \$623.90 | | \$748.68 | | | | \$748.68 | | | |
| 33623 | | \$738.65 | | \$886.38 | | | | \$886.38 | | | |
| 33624 | | \$817.70 | | \$981.24 | | | | \$981.24 | | | |
| 34111 | | \$426.70 | | \$512.04 | | | | \$512.04 | | | |
| 34112 | | \$501.50 | | \$601.80 | | | | \$601.80 | | | |
| 34121 | | \$430.10 | | \$516.12 | | | | \$516.12 | | | |
| 34122 | | \$524.45 | | \$629.34 | | | | \$629.34 | | | |

| Code | Lab GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|----------|-------|----------|--------|---------|-------|----------|-------|------|-------|
| 34123 | \$591.60 | | \$709.92 | | | | \$709.92 | | | |
| 34131 | \$498.95 | | \$598.74 | | | | \$598.74 | | | |
| 34132 | \$589.05 | | \$706.86 | | | | \$706.86 | | | |
| 34133 | \$665.55 | | \$798.66 | | | | \$798.66 | | | |
| 34134 | \$748.00 | | \$897.60 | | | | \$897.60 | | | |
| 34141 | \$436.05 | | \$523.26 | | | | \$523.26 | | | |
| 34142 | \$517.65 | | \$621.18 | | | | \$621.18 | | | |
| 34151 | \$429.25 | | \$515.10 | | | | \$515.10 | | | |
| 34152 | \$509.15 | | \$610.98 | | | | \$610.98 | | | |
| 34153 | \$591.60 | | \$709.92 | | | | \$709.92 | | | |
| 34161 | \$498.10 | | \$597.72 | | | | \$597.72 | | | |
| 34162 | \$587.35 | | \$704.82 | | | | \$704.82 | | | |
| 34163 | \$662.15 | | \$794.58 | | | | \$794.58 | | | |
| 34164 | \$745.45 | | \$894.54 | | | | \$894.54 | | | |
| 34211 | \$77.01 | | \$92.41 | | | | \$92.41 | | | |
| 34212 | \$153.00 | | \$183.60 | | | | \$183.60 | | | |
| 34221 | \$79.65 | | \$95.58 | | | | \$95.58 | | | |
| 34222 | \$168.30 | | \$201.96 | | | | \$201.96 | | | |
| 34223 | \$242.25 | | \$290.70 | | | | \$290.70 | | | |
| 34224 | \$317.05 | | \$380.46 | | | | \$380.46 | | | |
| 34231 | \$79.65 | | \$95.58 | | | | \$95.58 | | | |
| 34232 | \$168.30 | | \$201.96 | | | | \$201.96 | | | |
| 34233 | \$242.25 | | \$290.70 | | | | \$290.70 | | | |
| 34234 | \$317.05 | | \$380.46 | | | | \$380.46 | | | |
| 34241 | \$79.65 | | \$95.58 | | | | \$95.58 | | | |
| 34242 | \$168.30 | | \$201.96 | | | | \$201.96 | | | |
| 34251 | \$79.65 | | \$95.58 | | | | \$95.58 | | | |
| 34252 | \$168.30 | | \$201.96 | | | | \$201.96 | | | |
| 34253 | \$242.25 | | \$290.70 | | | | \$290.70 | | | |
| 34254 | \$317.05 | | \$380.46 | | | | \$380.46 | | | |
| 34261 | \$79.65 | | \$95.58 | | | | \$95.58 | | | |
| 34262 | \$168.30 | | \$201.96 | | | | \$201.96 | | | |
| 34263 | \$242.25 | | \$290.70 | | | | \$290.70 | | | |
| 34264 | \$317.05 | | \$380.46 | | | | \$380.46 | | | |

4.0 PERIODONTICS

Periodontal Splint of Ligation, Provisional, Extra Coronal

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|------|--------|---------|-------|------|----------|------|-------|
| 43211 | | \$105.04 | | | | | | | \$121.00 | | |
| 43221 | | \$78.44 | | | | | | | \$94.13 | | |
| 43231 | | \$122.84 | | | | | | | \$140.00 | | |
| 43241 | | \$131.61 | | | | | | | \$150.00 | | |
| 43281 | | \$96.25 | | | | | | | \$110.00 | | |

Periodontal Re-Evaluation/Evaluation

- Limited to those clients with an identified periodontal problem
- Not to be used in conjunction with procedure code 01502

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|------|--------|---------|-------|------|---------|------|-------|
| 49101 | | \$61.55 | | | | | | | \$73.86 | | |
| 49102 | | \$61.55 | | | | | | | \$73.86 | | |

5.0 PROSTHODONTICS - REMOVABLE

- The CDCP Removable Prosthodontic Policy must be met. Please refer to the <u>oral health provider</u> page on the Sun Life CDCP website or the <u>dental coverage</u> page on the Government of Canada website for more information on the CDCP dental policies.
- The fee for complete and partial dentures includes a 3 month period of post-insertion care. The fee for immediate dentures includes the tissue conditioner, but not the processed reline/rebase.

- Denture adjustments done on the same date of service and in conjunction with the delivery of new dentures, denture repairs, relines, rebases and/or tissue conditioning, are included in the fees billed and paid for these services.
- The overall cost of replacement for a denture may be adjusted in situations where claims for reline/rebase were paid within three months prior to the request.

Complete/Immediate Dentures

1 per arch in any 96 months.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|------------|-------|------|--------|---------|-------|------|-------|------------|-------|
| 51301 | L | \$1,020.04 | | | | | | | | \$1,224.05 | |
| 51302 | L | \$1,091.61 | | | | | | | | \$1,309.93 | |
| 51303 | L | \$1,566.66 | | | | | | | | \$1,879.99 | |
| 51711 | L | \$1,162.08 | | | | | | | | \$1,394.50 | |
| 51712 | L | \$1,237.04 | | | | | | | | \$1,484.45 | |
| 51713 | L | \$1,779.83 | | | | | | | | \$2,135.80 | |
| 51811 | L | \$1,313.25 | | | | | | | | \$1,575.90 | |
| 51812 | L | \$1,377.85 | | | | | | | | \$1,653.42 | |
| 51813 | L | \$2,421.87 | | | | | | | | \$2,906.24 | |

7.0 ORAL AND MAXILLOFACIAL SURGERY

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|-------|----------|----------|----------|-------|------------|----------|------|-------|
| 72321 | | \$269.45 | | | | | | | \$269.45 | | |
| 72329 | | \$229.50 | | | | | | | \$229.50 | | |
| 72331 | | \$311.10 | | | | | | | | | |
| 72339 | | \$264.35 | | | | | | | | | |
| 72511 | | \$268.60 | | | | | | \$322.32 | \$322.32 | | |
| 72519 | | \$134.30 | | | | | | \$161.16 | \$161.16 | | |
| 72521 | | \$396.95 | | | | | | \$476.34 | \$476.34 | | |
| 72529 | | \$198.90 | | | | | | \$238.68 | \$238.68 | | |
| 72531 | | \$482.80 | | | | | | | \$579.36 | | |
| 72539 | | \$438.60 | | | | | | | \$526.32 | | |
| 72541 | | \$492.15 | | | | | | | \$590.58 | | |
| 72551 | | \$532.95 | | | | | | | \$639.54 | | |
| 73121 | | \$171.70 | | | | | | | \$206.04 | | |
| 73411 | | \$184.88 | | | | | | | \$221.86 | | |
| 75302 | | \$177.65 | | \$213.18 | | | | | | | |
| 75401 | | \$171.20 | | \$205.44 | | | | | | | |
| 75403 | | \$158.47 | | \$190.16 | \$190.16 | \$190.16 | | | | | |
| 75411 | | \$422.60 | | | | | | | | | |
| 75412 | | \$528.26 | | | | | | | | | |
| 76201 | | \$810.90 | | | | | | \$973.08 | | | |
| 76301 | | \$957.43 | | | | | | \$1,148.92 | | | |
| 79603 | | \$92.47 | | \$110.96 | \$110.96 | \$110.96 | | \$110.96 | \$110.96 | | |
| 79604 | | \$92.47 | | \$110.96 | \$110.96 | \$110.96 | | \$110.96 | \$110.96 | | |

8.0 ORTHODONTICS - NOT AVAILABLE UNTIL 2025

- The CDCP Orthodontic Policy must be met. Please refer to the <u>oral health provider</u> page on the Sun Life CDCP website or the <u>dental coverage</u> page on the Government of Canada website for more information on the CDCP dental policies.
- Note: Approved fees for P1500 are based on the treatment plan provided. Please see Schedule A Section 8.0 Orthodontics for procedures P1000 and P1100.
- CDCP Orthodontic Payment Codes:
 - o P0500 Orthodontic Observation
 - o P1200 Initial Payment Comprehensive treatment
 - o P1300 Incremental Payment Comprehensive treatment
 - o P1400 Final Payment Comprehensive treatment

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|---------|-------|------|--------|---------|-------|---------|-------|------|-------|
| 80602 | | \$68.87 | | | | | | \$68.87 | | | |

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|------------|-------|------|--------|---------|------------|------------|-------|------|-------|
| 80661 | | \$60.10 | | | | | | \$60.10 | | | |
| 80669 | | \$60.10 | | | | | | \$60.10 | | | |
| 80671 | | \$59.44 | | | | | | \$59.44 | | | |
| 80679 | | \$59.44 | | | | | | \$59.44 | | | |
| 81111 | L | \$269.93 | | | | | | \$269.93 | | | |
| 81112 | L | \$269.93 | | | | | | \$269.93 | | | |
| 81113 | L | \$507.28 | | | | | | \$507.28 | | | |
| 81114 | L | \$507.28 | | | | | | \$507.28 | | | |
| 81121 | L | \$506.50 | | | | | | \$506.50 | | | |
| 81122 | L | \$506.50 | | | | | | \$506.50 | | | |
| 81131 | L | \$509.96 | | | | | | \$509.96 | | | |
| 81132 | L | \$509.96 | | | | | | \$509.96 | | | |
| 81135 | L | \$602.74 | | | | | | \$602.74 | | | |
| 81211 | L | \$735.40 | | | | | | \$735.40 | | | |
| 81212 | L | \$735.40 | | | | | | \$735.40 | | | |
| 81221 | L | \$248.52 | | | | | | \$248.52 | | | |
| 81222 | L | \$248.52 | | | | | | \$248.52 | | | |
| 81231 | L | \$507.69 | | | | | | \$507.69 | | | |
| 81232 | L | \$507.69 | | | | | | \$507.69 | | | |
| 81241 | L | \$508.36 | | | | | | \$508.36 | | | |
| 81242 | L | \$508.36 | | | | | | \$508.36 | | | |
| 81243 | L | \$508.36 | | | | | | \$508.36 | | | |
| 81251 | L | \$734.07 | | | | | | \$734.07 | | | |
| 81252 | L | \$734.07 | | | | | | \$734.07 | | | |
| 81253 | L | \$767.68 | | | | | | \$767.68 | | | |
| 81254 | L | \$770.11 | | | | | | | | | |
| P0500 | | \$55.95 | | | | | \$55.95 | \$55.95 | | | |
| P1200 | | \$2,755.36 | | | | | \$2,755.36 | \$2,755.36 | | | |
| P1300 | | \$2,296.14 | | | | | \$2,296.14 | \$2,296.14 | | | |
| P1400 | | \$1,836.89 | | | | | \$1,836.89 | \$1,836.89 | | | |

9.0 ADJUNCTIVE GENERAL SERVICES

• The CDCP Sedation and General Anesthesia Policy must be met. Please refer to the <u>oral health</u> <u>provider</u> page on the Sun Life CDCP website or the <u>dental coverage</u> page on the Government of Canada website for more information on the CDCP dental policies.

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|----------|------|--------|---------|-------|----------|-------|------|-------|
| 92212 | | \$303.78 | \$364.54 | | | | | \$364.54 | | | |
| 92213 | | \$394.22 | \$473.06 | | | | | \$473.06 | | | |
| 92214 | | \$479.73 | \$575.68 | | | | | \$575.68 | | | |
| 92215 | | \$504.90 | \$605.88 | | | | | \$605.88 | | | |
| 92216 | | \$583.95 | \$700.74 | | | | | \$700.74 | | | |
| 92217 | | \$662.15 | \$794.58 | | | | | \$794.58 | | | |
| 92218 | | \$740.35 | \$888.42 | | | | | \$888.42 | | | |
| 92222 | | \$136.00 | \$163.20 | | | | | \$163.20 | | | |
| 92223 | | \$204.00 | \$244.80 | | | | | \$244.80 | | | |
| 92224 | | \$272.00 | \$326.40 | | | | | \$326.40 | | | |
| 92225 | | \$340.00 | \$408.00 | | | | | \$408.00 | | | |
| 92226 | | \$408.00 | \$489.60 | | | | | \$489.60 | | | |
| 92227 | | \$476.00 | \$571.20 | | | | | \$571.20 | | | |
| 92228 | | \$544.00 | \$652.80 | | | | | \$652.80 | | | |
| 92301 | | \$197.31 | \$236.77 | | | | | \$236.77 | | | |
| 92302 | | \$279.59 | \$335.51 | | | | | \$335.51 | | | |
| 92303 | | \$363.20 | \$435.84 | | | | | \$435.84 | | | |
| 92304 | | \$445.07 | \$534.08 | | | | | \$534.08 | | | |
| 92305 | | \$468.35 | \$562.02 | | | | | \$562.02 | | | |
| 92306 | | \$541.02 | \$649.22 | | | | | \$649.22 | | | |
| 92307 | | \$612.90 | \$735.48 | | | | | \$735.48 | | | |
| 92308 | | \$684.78 | \$821.74 | | | | | \$821.74 | | | |
| 92321 | | \$50.09 | \$60.11 | | | | | \$60.11 | | | |
| 92322 | | \$136.00 | \$163.20 | | | | | \$163.20 | | | |
| 92323 | | \$204.00 | \$244.80 | | | | | \$244.80 | | | |
| 92324 | | \$272.00 | \$326.40 | | | | | \$326.40 | | | |

| Code | Lab | GP | Anest | Endo | O. Med | O. Path | Ortho | Paed | Perio | Pros | Radio |
|-------|-----|----------|----------|------|--------|---------|-------|----------|----------|------|-------|
| 92325 | | \$340.00 | \$408.00 | | | | | \$408.00 | | | |
| 92326 | | \$408.00 | \$489.60 | | | | | \$489.60 | | | |
| 92327 | | \$476.00 | \$571.20 | | | | | \$571.20 | | | |
| 92328 | | \$544.00 | \$652.80 | | | | | \$652.80 | | | |
| 92441 | | \$148.89 | \$178.67 | | | | | \$178.67 | \$148.89 | | |
| 92442 | | \$217.61 | \$261.13 | | | | | \$261.13 | \$217.61 | | |
| 92443 | | \$286.34 | \$343.61 | | | | | \$343.61 | \$286.34 | | |
| 92444 | | \$355.08 | \$426.10 | | | | | \$426.10 | \$355.08 | | |
| 92445 | | \$375.50 | \$450.60 | | | | | \$450.60 | \$375.50 | | |
| 92446 | | \$436.02 | \$523.22 | | | | | \$523.22 | \$436.02 | | |
| 92447 | | \$497.50 | \$597.00 | | | | | \$597.00 | \$497.50 | | |
| 92448 | | \$558.04 | \$669.65 | | | | | \$669.65 | \$558.04 | | |
| 92451 | | \$148.89 | \$178.67 | | | | | \$178.67 | | | |
| 92452 | | \$221.57 | \$265.88 | | | | | \$265.88 | | | |
| 92453 | | \$276.51 | \$331.81 | | | | | \$331.81 | | | |
| 92454 | | \$344.30 | \$413.16 | | | | | \$413.16 | | | |
| 92455 | | \$430.39 | \$516.47 | | | | | \$516.47 | | | |
| 92456 | | \$516.47 | \$619.76 | | | | | \$619.76 | | | |
| 92457 | | \$604.26 | \$725.11 | | | | | \$725.11 | | | |
| 92458 | | \$688.86 | \$826.63 | | | | | \$826.63 | | | |
| 94302 | | \$174.25 | | | | - | | | | | |
| 99111 | | I.C. | | | | | | | | I.C. | |
| 99222 | | I.C. | | I.C. | I.C. | I.C. | | I.C. | I.C. | | |
| 99333 | | I.C. | | | | | | | | I.C. | |