

BRITISH COLUMBIA

Canadian Dental Care Plan (CDCP)

2025 Dental Benefit Grid

General Practitioners and Specialists

- Services in Schedule A do not require preauthorization.
- Services in Schedule B require preauthorization.
- To be eligible for payment of services rendered, oral health providers must adhere to the [CDCP Claims Processing and Payment Terms](#).
- Please refer to the [CDCP Dental Benefits Guide](#) for further information on policies, including criteria, guidelines, and limitations, under which the CDCP covers oral health care services for eligible CDCP clients.
- “L” designation under the Commercial Laboratory Fee (Lab column) corresponds to laboratory fee expenses allowed for certain procedure codes (variable laboratory fees).
- 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’s CDCP Contact Centre at 1-888-888-8110 or consult the [CDCP Dental Benefits Guide](#) on the Government of Canada website for more information.

Schedule A

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.
- Examinations performed by dental specialists and denturists do not count against the maximum number of eligible annual examinations.

First Dental Visit Orientation

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

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
01011		\$45.88						\$55.06			

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		\$77.84						\$93.41			
01102		\$105.55						\$126.66			
01103		\$116.27						\$139.52			

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		\$53.06						\$63.67			

Recall Examination

- 1 in any 12 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
01202		\$33.71						\$40.45			

Specific Examination

- 1 in any 12 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
01204		\$42.90		\$42.90	\$42.90	\$42.90		\$51.48	\$42.90	\$42.90	

Emergency Examination

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
01205		\$61.29		\$61.29	\$61.29	\$61.29		\$73.55	\$61.29	\$61.29	

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 referral and justification for the referral.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
01402					\$92.35	\$92.35					
01502									\$140.87		

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
01503									\$130.97		
01702										\$51.80	
01802				\$58.51							

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		\$104.36		\$104.36				\$104.36	\$104.36	\$104.36	\$104.36
02102		\$112.17		\$112.17				\$112.17	\$112.17	\$112.17	\$112.17

Intraoral Radiographs

- 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		\$20.41		\$20.41				\$20.41	\$20.41	\$20.41	\$20.41
02112		\$28.05		\$28.05				\$28.05	\$28.05	\$28.05	\$28.05
02113		\$35.61		\$35.61				\$35.61	\$35.61	\$35.61	\$35.61
02114		\$43.40		\$43.40				\$43.40	\$43.40	\$43.40	\$43.40
02115		\$51.08		\$51.08				\$51.08	\$51.08	\$51.08	\$51.08
02116		\$58.74		\$58.74				\$58.74	\$58.74	\$58.74	\$58.74
02117		\$66.27		\$66.27				\$66.27	\$66.27	\$66.27	\$66.27
02118		\$73.92		\$73.92				\$73.92	\$73.92	\$73.92	\$73.92
02131		\$28.63		\$28.63				\$28.63	\$28.63	\$28.63	\$28.63
02132		\$39.57		\$39.57				\$39.57	\$39.57	\$39.57	\$39.57
02141		\$20.41		\$20.41				\$20.41	\$20.41	\$20.41	\$20.41
02142		\$28.05		\$28.05				\$28.05	\$28.05	\$28.05	\$28.05
02143		\$35.61		\$35.61				\$35.61	\$35.61	\$35.61	\$35.61
02144		\$43.40		\$43.40				\$43.40	\$43.40	\$43.40	\$43.40

Panoramic

- 1 in any 60 months
- 3 in a lifetime

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
02601		\$79.08		\$79.08				\$79.08	\$79.08	\$79.08	\$79.08

0.3 Laboratory Tests

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
04311	L	\$129.57		\$155.48	\$155.48	\$155.48		\$155.48	\$155.48		
04312	L	\$209.24		\$251.09	\$251.09	\$251.09		\$251.09	\$251.09		
04313	L	\$90.37		\$108.44	\$108.44	\$108.44		\$108.44	\$108.44		
04314	L	\$90.37		\$108.44	\$108.44	\$108.44		\$108.44	\$108.44		
04315	L	\$168.14		\$201.77	\$201.77	\$201.77		\$201.77	\$201.77		
04321	L	\$121.00		\$145.20	\$145.20	\$145.20		\$145.20	\$145.20		
04322	L	\$418.49		\$502.19	\$502.19	\$502.19		\$502.19	\$502.19		
04323	L	\$121.00		\$145.20	\$145.20	\$145.20		\$145.20	\$145.20		

Microbiological Test

- 1 in any 12 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
04101	L	\$61.73		\$74.08	\$74.08	\$74.08		\$74.08	\$74.08		

Cytological Smear

- 1 in any 12 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
04401	L	\$56.81		\$68.17	\$68.17	\$68.17		\$68.17	\$65.00		

SCHEDULE A - 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		\$11.49						\$11.49	\$11.49	\$11.49	

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		\$55.80						\$55.80	\$56.30	\$55.80	
11112		\$111.60						\$111.60	\$112.60	\$111.60	
11113		\$167.40						\$167.40	\$168.90	\$167.40	
11114		\$223.20						\$223.20	\$225.20	\$223.20	
11117		\$27.90						\$27.90	\$28.20	\$27.90	

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		\$12.85						\$12.85	\$12.85		
12112		\$16.11						\$16.11	\$16.11		
12113		\$23.50						\$23.50	\$23.50		

Sealants/Preventative Resins

- Eligible only for clients 17 years of age and under, 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.
- 2 sealants/preventive restorative resins per eligible tooth in a lifetime

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
13401		\$32.50						\$39.00			
13409		\$17.80						\$21.36			
13411		\$65.37						\$78.44			
13419		\$33.64						\$40.37			

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		\$40.80						\$40.80	\$40.80		

SCHEDULE A - 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		\$121.69		\$121.69				\$146.03			
20119		\$60.50		\$60.50				\$72.60			
20121		\$168.97		\$168.97				\$202.76			
20129		\$84.49		\$84.49				\$101.39			
20131		\$38.70		\$38.70				\$46.44			
20139		\$17.78		\$17.78				\$21.34			

Restoration, Amalgam/Composite; Prefabricated, Full Coverage

- Primary incisor teeth are eligible only for those under age 5.
- 1 per surface, per tooth, in any 24 months for same provider or different provider in the same office.
- Frequency limit takes into account all amalgam, composite, and prefabricated restoration codes below.

Restoration, Amalgam, Primary Teeth

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
21111		\$122.57						\$147.08			
21112		\$154.96						\$185.95			
21113		\$177.73						\$213.28			
21114		\$204.87						\$245.84			
21115		\$235.51						\$282.61			
21121		\$122.57						\$147.08			
21122		\$154.96						\$185.95			
21123		\$177.73						\$213.28			
21124		\$204.87						\$245.84			
21125		\$235.51						\$282.61			

Restoration, Composite, Primary Teeth

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
23401		\$118.18						\$141.82		\$118.18	
23402		\$160.33						\$192.40		\$160.33	
23403		\$168.96						\$202.75		\$168.96	
23404		\$193.31						\$231.97		\$193.31	
23405		\$220.32						\$264.38		\$220.32	
23411		\$136.78						\$164.14		\$136.78	
23412		\$174.59						\$209.51		\$174.59	
23413		\$197.86						\$237.43		\$197.86	
23414		\$227.63						\$273.16		\$227.63	
23415		\$243.39						\$292.07		\$243.39	
23501		\$107.65						\$129.18			
23502		\$152.68						\$183.22			
23503		\$172.00						\$206.40			
23504		\$196.64						\$235.97			
23505		\$223.06						\$267.67			
23511		\$152.68						\$183.22			
23512		\$219.89						\$263.87			
23513		\$235.51						\$282.61			
23514		\$235.51						\$282.61			
23515		\$235.51						\$282.61			

Restoration, Amalgam, Permanent Teeth

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
21211		\$145.33		\$145.33				\$174.40		\$145.33	
21212		\$201.37		\$201.37				\$241.64		\$201.37	
21213		\$245.14		\$245.14				\$294.17		\$245.14	
21214		\$299.42		\$299.42				\$359.30		\$299.42	
21215		\$365.08		\$365.08				\$438.10		\$365.08	
21221		\$157.59		\$157.59				\$189.11		\$157.59	
21222		\$237.26		\$237.26				\$284.71		\$237.26	
21223		\$291.54		\$291.54				\$349.85		\$291.54	
21224		\$358.96		\$358.96				\$430.75		\$358.96	
21225		\$441.25		\$441.25				\$529.50		\$441.25	
21231		\$145.33		\$145.33				\$174.40		\$145.33	
21232		\$201.37		\$201.37				\$241.64		\$201.37	
21233		\$245.14		\$245.14				\$294.17		\$245.14	
21234		\$299.42		\$299.42				\$359.30		\$299.42	
21235		\$365.08		\$365.08				\$438.10		\$365.08	
21241		\$157.59		\$157.59				\$189.11		\$157.59	
21242		\$237.26		\$237.26				\$284.71		\$237.26	
21243		\$291.54		\$291.54				\$349.85		\$291.54	
21244		\$358.96		\$358.96				\$430.75		\$358.96	
21245		\$441.25		\$441.25				\$529.50		\$441.25	

Restoration, Composite, Permanent Teeth

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
23101		\$127.88		\$127.88				\$153.46		\$127.88	
23102		\$146.94		\$146.94				\$176.33		\$146.94	
23103		\$182.78		\$182.78				\$219.34		\$182.78	
23104		\$224.83		\$224.83				\$269.80		\$224.83	
23105		\$272.46		\$272.46				\$326.95		\$272.46	
23111		\$148.42		\$148.42				\$178.10		\$148.42	
23112		\$178.66		\$178.66				\$214.39		\$178.66	
23113		\$226.22		\$226.22				\$271.46		\$226.22	
23114		\$282.22		\$282.22				\$338.66		\$282.22	
23115		\$335.07		\$335.07				\$402.08		\$335.07	
23211		\$120.91		\$120.91				\$145.09		\$120.91	
23212		\$152.12		\$152.12				\$182.54		\$152.12	
23213		\$177.16		\$177.16				\$212.59		\$177.16	
23214		\$213.05		\$213.05				\$255.66		\$213.05	
23215		\$262.50		\$262.50				\$315.00		\$262.50	
23221		\$129.78		\$129.78				\$155.74		\$129.78	
23222		\$174.00		\$174.00				\$208.80		\$174.00	
23223		\$204.41		\$204.41				\$245.29		\$204.41	
23224		\$249.60		\$249.60				\$299.52		\$249.60	
23225		\$315.36		\$315.36				\$378.43		\$315.36	
23311		\$171.14		\$171.14				\$205.37		\$171.14	
23312		\$239.08		\$239.08				\$286.90		\$239.08	
23313		\$286.05		\$286.05				\$343.26		\$286.05	
23314		\$352.19		\$352.19				\$422.63		\$352.19	
23315		\$405.36		\$405.36				\$486.43		\$405.36	
23321		\$183.46		\$183.46				\$220.15		\$183.46	
23322		\$280.84		\$280.84				\$337.01		\$280.84	
23323		\$339.56		\$339.56				\$407.47		\$339.56	
23324		\$408.17		\$408.17				\$489.80		\$408.17	
23325		\$490.28		\$490.28				\$588.34		\$490.28	

Restoration, Pins

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
21401		\$36.16						\$43.39		\$43.39	
21402		\$54.46						\$65.35		\$65.35	
21403		\$69.26						\$83.11		\$83.11	
21404		\$84.49						\$101.39		\$101.39	
21405		\$98.93						\$118.72		\$118.72	

Restoration, Prefabricated

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
22201		\$243.39						\$292.07		\$243.39	
22202		\$243.39						\$292.07		\$243.39	
22211		\$235.51						\$282.61		\$235.51	
22212		\$235.51						\$282.61		\$235.51	
22401		\$243.39						\$292.07		\$243.39	
22501		\$274.91						\$329.89		\$274.91	
22301		\$243.39						\$292.07		\$243.39	
22302		\$243.39						\$292.07		\$243.39	
22311		\$243.39						\$292.07		\$243.39	
22312		\$243.39						\$292.07		\$243.39	

Prefabricated Posts

- 4 in any 120 months per client (permanent teeth only), in combination with Cores and Posts in Schedule B
- 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		\$193.49						\$232.19		\$232.19	
25732		\$309.05						\$370.86		\$370.86	
25733		\$424.62						\$509.54		\$509.54	

Post Removal

- 1 in a lifetime per permanent tooth

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
25781		\$94.55		\$113.46				\$113.46		\$113.46	
25782		\$189.11		\$226.93				\$226.93		\$226.93	

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		\$85.37						\$102.44		\$102.44	

Repair to Crowns

- 1 in any 36 months per tooth

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
29202		\$275.40								\$330.48	
29203		\$243.95								\$292.74	

SCHEDULE A - 3.0 ENDODONTICS

- The CDCP Endodontics Policy must be met. Please refer to the [oral health provider](#) page on the Sun Life CDCP website or consult the [CDCP Dental Benefits Guide](#) on the Government of Canada website for more information on the CDCP 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		\$135.70		\$162.84				\$162.84			
32222		\$134.83		\$161.80				\$161.80			
32231		\$99.81		\$119.77				\$119.77			
32232		\$85.02		\$102.02				\$102.02			
32241		\$257.40		\$308.88				\$308.00			
32242		\$257.40		\$308.88				\$308.00			
32311		\$178.60		\$214.32				\$214.32			
32312		\$213.62		\$256.34				\$256.34			
32313		\$348.45		\$418.14				\$418.14			
32314		\$380.84		\$457.01				\$457.01			
32321		\$178.60		\$214.32				\$214.32			
32322		\$281.04		\$337.25				\$337.25			

Root Canal Therapy

- Preauthorization is required for teeth ending in 8 at all times.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
33111		\$520.92		\$625.10				\$625.10			
33121		\$665.38		\$798.46				\$798.46			
33131		\$937.66		\$1,125.19				\$1,125.19			
33141		\$1,037.47		\$1,244.96				\$1,244.96			

Open and Drain

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
39201		\$94.55		\$113.46				\$113.46			
39202		\$94.55		\$113.46				\$113.46			

SCHEDULE A - 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		\$98.60			\$118.32	\$118.32			\$118.32		
41212		\$197.20			\$236.64	\$236.64			\$236.64		

- 2 units in any 12 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
41231		\$78.03			\$93.64	\$93.64			\$93.64		
41232		\$156.40			\$187.68	\$187.68			\$187.68		

Desensitization

- 2 units in any 12 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
41301		\$62.86							\$62.86		
41302		\$125.72							\$125.72		

Miscellaneous

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
42831		\$64.33						\$77.20	\$77.20		

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		\$47.10							\$56.52		
43422		\$94.20							\$113.04		
43423		\$141.31							\$169.57		
43424		\$188.41							\$226.09		
43427		\$23.56							\$28.27		

SCHEDULE A - 5.0 PROSTHODONTICS - REMOVABLE

- The Removable Prosthodontic Policy must be met. Please refer to the [oral health provider](#) page on the Sun Life CDCP website or consult the [CDCP Dental Benefits Guide](#) on the Government of Canada website for more information on the CDCP policies.
- The fee for complete and partial dentures may include, if required, impressions, models and opposing models, bite registration, articulation, try-in, and insertion. The fee also includes a 3 month period of post-insertion care. Post-insertion care services may include denture additions, adjustments, modifications, repairs/repair materials, relines, rebases, reinforcements and tissue conditioning, depending on the type of denture.
- 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 3 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	\$850.19								\$1,020.23	
51102	L	\$926.23								\$1,111.48	
51103	L	\$1,322.51								\$1,587.01	

Complete Dentures - Provisional

- 1 per arch per lifetime

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
51601	L	\$447.10								\$536.52	
51602	L	\$595.85								\$715.02	
51603	L	\$938.66								\$1,126.39	

Denture Adjustments

- After 3 months insertion or by another oral health provider than the dentist providing the prosthesis.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
54201		\$74.16								\$88.99	

Repairs and Additions

- 1 per prosthesis in any 12 months
- After 3 months insertion or by another oral health provider than the dentist providing the prosthesis.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
55101	L	\$95.43								\$114.52	
55102	L	\$95.43								\$114.52	
55201	L	\$186.48								\$223.78	
55202	L	\$186.48								\$223.78	
55203	L	\$344.96								\$413.95	
55301	L	\$95.43								\$114.52	
55302	L	\$95.43								\$114.52	
55401	L	\$186.48								\$223.78	
55402	L	\$186.48								\$223.78	
55403	L	\$344.96								\$413.95	

Reline or Rebase

- 1 per prosthesis in any 24 months
- After 3 months insertion or by another oral health provider than the dentist providing the prosthesis.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
56211		\$276.66								\$331.99	
56212		\$313.43								\$376.12	
56213		\$531.08								\$637.30	
56221		\$221.50								\$265.80	
56222		\$239.89								\$287.87	
56223		\$462.02								\$554.42	
56231	L	\$276.66								\$331.99	
56232	L	\$313.43								\$376.12	
56233	L	\$544.90								\$653.88	
56241	L	\$221.50								\$265.80	
56242	L	\$239.89								\$287.87	
56243	L	\$426.02								\$511.22	
56311	L	\$276.66								\$331.99	
56312	L	\$313.43								\$376.12	
56313	L	\$544.90								\$653.88	
56321	L	\$221.50								\$265.80	
56322	L	\$239.89								\$287.87	
56323	L	\$426.02								\$511.22	

Tissue Conditioning

- 1 per prosthesis in any 24 months
- After 3 months insertion or by another oral health provider than the dentist providing the prosthesis.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
56511		\$110.31								\$132.37	
56512		\$110.31								\$132.37	
56513		\$204.50								\$245.40	
56521		\$110.31								\$132.37	
56522		\$110.31								\$132.37	
56523		\$204.50								\$245.40	
56531		\$107.65								\$129.18	
56532		\$107.65								\$129.18	
56533		\$204.50								\$245.40	

SCHEDULE A - 7.0 ORAL AND MAXILLOFACIAL SURGERY

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
71101		\$147.08						\$176.50	\$176.50	\$147.08	
71109		\$125.20						\$150.24	\$150.24	\$125.20	
71201		\$273.74						\$328.49	\$315.30	\$273.74	
71209		\$211.87						\$254.24	\$254.24	\$211.87	
71211		\$408.97									
71219		\$322.18									
72111		\$273.98									
72119		\$212.75									
72211		\$408.97									
72219		\$328.31									
72221		\$448.85									
72229		\$336.70									
72231		\$469.24									
72239		\$349.16									
72311		\$140.96						\$169.15	\$140.96		
72319		\$119.94						\$143.93	\$119.94		
74111		\$388.72			\$466.46	\$466.46		\$466.46	\$463.00		
74112		\$759.06			\$910.87	\$910.87		\$910.87	\$901.00		
74121		\$385.22			\$462.26	\$462.26		\$462.26	\$462.26		
74122		\$755.56			\$906.67	\$906.67		\$906.67	\$906.67		
74211		\$253.85			\$304.62	\$304.62		\$304.62	\$304.62		
74212		\$380.75			\$456.90	\$456.90		\$456.90	\$456.90		
74221		\$380.75			\$456.90	\$456.90		\$456.90	\$456.90		
74222		\$507.67			\$609.20	\$609.20		\$609.20	\$609.20		
74611		\$482.40			\$578.88	\$578.88		\$578.88	\$574.00		
74612		\$852.74			\$1,023.29	\$1,023.29		\$1,023.29	\$1,012.00		
74621		\$482.40		\$578.88	\$578.88	\$578.88		\$578.88	\$574.00		
74631		\$416.74		\$500.09	\$500.09	\$500.09		\$500.09	\$496.00		
74632		\$759.06		\$910.87	\$910.87	\$910.87		\$910.87	\$901.00		
75111		\$105.06		\$126.07	\$126.07	\$126.07		\$126.07	\$126.07		
75112		\$105.06		\$126.07				\$126.07	\$126.00		
75113		\$130.75		\$156.90				\$156.90	\$143.40		
75121		\$195.24		\$234.29				\$234.29	\$234.29		
75122		\$231.00		\$277.20				\$277.20	\$277.20		
75123		\$285.76		\$342.91				\$342.91	\$342.91		
75211		\$193.49		\$232.19				\$232.19			
75301		\$182.98		\$219.58				\$219.58			
75303		\$158.69		\$190.43				\$190.43			
76941		\$495.53						\$594.64			
76949		\$185.61						\$222.73			
76951		\$85.10						\$102.12			
76952		\$169.85						\$203.82			
76961		\$187.36									
76962		\$258.27									
79601		\$64.20		\$77.04	\$77.04	\$77.04		\$77.04	\$77.04		
79602		\$104.18		\$125.02	\$125.02	\$125.02		\$125.02	\$125.02		
79605		\$68.91						\$82.69	\$82.69		
79606		\$86.67						\$104.00	\$104.00		
79701		\$580.09									
79702		\$580.09									

SCHEDULE A - 8.0 ORTHODONTICS CAN BE REQUESTED BEGINNING IN 2025 (DATE: TO BE DETERMINED)

- The CDCP Orthodontic Policy must be met. Please refer to the [oral health provider](#) page on the Sun Life CDCP website or consult the [CDCP Dental Benefits Guide](#) on the Government of Canada website for more information on the CDCP policies.
- P1000 - Examination
- P1100 - Diagnostic records

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
P1000		\$106.90					\$106.90	\$106.90			
P1100		\$391.98					\$391.98	\$391.98			

SCHEDULE A - 9.0 ADJUNCTIVE GENERAL SERVICES

Anesthesia

- The CDCP Sedation Policy must be met. Please refer to the [oral health provider](#) page on the Sun Life CDCP website or consult the [CDCP Dental Benefits Guide](#) on the Government of Canada website for more information on the CDCP policies.

Anesthesia, Conscious Sedation

- 4 in any 12 months

Nitrous Oxide

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
92411		\$47.37	\$56.84					\$56.84	\$47.37		
92412		\$86.31	\$103.57					\$103.57	\$86.31		
92413		\$124.63	\$149.56					\$149.56	\$124.63		
92414		\$162.74	\$195.29					\$195.29	\$162.74		
92415		\$179.25	\$215.10					\$215.10	\$179.25		
92416		\$213.34	\$256.01					\$256.01	\$213.34		
92417		\$247.44	\$296.93					\$296.93	\$247.44		
92418		\$281.55	\$337.86					\$337.86	\$281.55		

Oral Sedation

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
92421		\$47.90	\$57.48					\$57.48	\$47.90		
92422		\$74.46	\$89.35					\$89.35	\$74.46		
92423		\$107.95	\$129.54					\$129.54	\$107.95		
92424		\$141.10	\$169.32					\$169.32	\$141.10		
92425		\$174.25	\$209.10					\$209.10	\$174.25		
92426		\$207.40	\$248.88					\$248.88	\$207.40		
92427		\$240.55	\$288.66					\$288.66	\$240.55		
92428		\$273.70	\$328.44					\$328.44	\$273.70		

Nitrous Oxide with Oral Sedation

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
92431		\$129.04	\$154.85					\$154.85	\$129.04		
92432		\$182.01	\$218.41					\$218.41	\$182.01		
92433		\$235.02	\$282.02					\$282.02	\$235.02		
92434		\$289.17	\$347.00					\$347.00	\$289.17		
92435		\$313.70	\$376.44					\$376.44	\$313.70		
92436		\$362.41	\$434.89					\$434.89	\$362.41		
92437		\$410.15	\$492.18					\$492.18	\$410.15		
92438		\$457.87	\$549.44					\$549.44	\$457.87		

Schedule B

All procedures require preauthorization. Orthodontics can be requested beginning in 2025 (Date: to be determined).

SCHEDULE B - 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.
- Examinations performed by dental specialists and denturists do not count against the maximum number of eligible annual examinations.

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 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					\$189.11	\$189.11					
01501									\$201.69		
01701										\$111.36	
01801				\$167.05							

Diagnostic Casts, Unmounted

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
04911		\$109.44						\$109.44			
04913		\$180.11						\$180.11			

SCHEDULE B - 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		\$42.33									

SCHEDULE B - 2.0 RESTORATION

Cores and Posts

- 4 in any 120 months per client (permanent teeth only), in combination with Prefabricated Posts in Schedule A
- Cores, and prefabricated posts in combination with cores, are eligible only for those age 18 and older.
- Cores are eligible only if existing restoration is greater than 24 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		\$141.64								\$169.97	
21302		\$141.64								\$169.97	
23601		\$185.61								\$222.73	
23602		\$185.61								\$222.73	
25751		\$253.29								\$303.95	
25752		\$288.93								\$346.72	
25753		\$323.15								\$387.78	

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
25754		\$286.18								\$343.42	
25755		\$325.88								\$391.06	
25756		\$357.37								\$428.84	
25761		\$253.29								\$303.95	
25762		\$288.93								\$346.72	
25763		\$323.15								\$387.78	
25764		\$295.74								\$354.89	
25765		\$364.23								\$437.08	
25766		\$436.81								\$524.17	

Crowns

- The CDCP Crown Policy must be met. Please refer to the [oral health provider](#) page on the Sun Life CDCP website or consult the [CDCP Dental Benefits Guide](#) on the Government of Canada website for more information on the CDCP policies.
- 4 in any 120 months
- 1 in any 96 months, per tooth

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
27201	L	\$876.38								\$1,051.66	
27211	L	\$876.38								\$1,051.66	
27301	L	\$819.47								\$983.36	

Crown Removal

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
29301		\$84.75		\$101.70				\$101.70		\$101.70	

SCHEDULE B - 3.0 ENDODONTICS

- The CDCP Endodontics Policy must be met. Please refer to the [oral health provider](#) page on the Sun Life CDCP website or consult the [CDCP Dental Benefits Guide](#) on the Government of Canada website for more information on the CDCP policies.

Root Canal Therapy

- Preauthorization is required for teeth ending in 8 at all times.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
33111		\$520.92		\$625.10				\$625.10			
33121		\$665.38		\$798.46				\$798.46			
33131		\$937.66		\$1,125.19				\$1,125.19			
33141		\$1,037.47		\$1,244.96				\$1,244.96			

Retreatment of Root Canal Therapy

- 1 root canal re-treatment per tooth, per lifetime

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
33115		\$555.94		\$667.13				\$667.13			
33125		\$808.96		\$970.75				\$970.75			
33135		\$1,123.27		\$1,347.92				\$1,347.92			
33145		\$1,229.21		\$1,475.05				\$1,475.05			

Apicoectomy

- 1 apicoectomy per tooth, per lifetime

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
33601		\$168.97		\$202.76				\$202.76			
33602		\$235.51		\$282.61				\$282.61			
33603		\$309.05		\$370.86				\$370.86			
33604		\$317.81		\$381.37				\$381.37			
33605		\$164.59		\$197.51				\$197.51			
33611		\$56.65		\$67.98				\$67.98			
33612		\$78.62		\$94.34				\$94.34			
33613		\$112.06		\$134.47				\$134.47			
33614		\$125.20		\$150.24				\$150.24			

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
33621		\$439.50		\$527.40				\$527.40			
33622		\$642.62		\$771.14				\$771.14			
33623		\$760.81		\$912.97				\$912.97			
33624		\$842.23		\$1,010.68				\$1,010.68			
34111		\$439.50		\$527.40				\$527.40			
34112		\$516.55		\$619.86				\$619.86			
34121		\$443.00		\$531.60				\$531.60			
34122		\$540.18		\$648.22				\$648.22			
34123		\$609.35		\$731.22				\$731.22			
34131		\$513.92		\$616.70				\$616.70			
34132		\$606.72		\$728.06				\$728.06			
34133		\$685.52		\$822.62				\$822.62			
34134		\$770.44		\$924.53				\$924.53			
34141		\$449.13		\$538.96				\$538.96			
34142		\$533.18		\$639.82				\$639.82			
34151		\$442.13		\$530.56				\$530.56			
34152		\$524.42		\$629.30				\$629.30			
34153		\$609.35		\$731.22				\$731.22			
34161		\$513.04		\$615.65				\$615.65			
34162		\$604.97		\$725.96				\$725.96			
34163		\$682.01		\$818.41				\$818.41			
34164		\$767.81		\$921.37				\$921.37			

Retrofilling

- 1 retrofilling per tooth, per lifetime

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
34211		\$79.32		\$95.18				\$95.18			
34212		\$157.59		\$189.11				\$189.11			
34221		\$82.04		\$98.45				\$98.45			
34222		\$173.35		\$208.02				\$208.02			
34223		\$249.52		\$299.42				\$299.42			
34224		\$326.56		\$391.87				\$391.87			
34231		\$82.04		\$98.45				\$98.45			
34232		\$173.35		\$208.02				\$208.02			
34233		\$249.52		\$299.42				\$299.42			
34234		\$326.56		\$391.87				\$391.87			
34241		\$82.04		\$98.45				\$98.45			
34242		\$173.35		\$208.02				\$208.02			
34251		\$82.04		\$98.45				\$98.45			
34252		\$173.35		\$208.02				\$208.02			
34253		\$249.52		\$299.42				\$299.42			
34254		\$326.56		\$391.87				\$391.87			
34261		\$82.04		\$98.45				\$98.45			
34262		\$173.35		\$208.02				\$208.02			
34263		\$249.52		\$299.42				\$299.42			
34264		\$326.56		\$391.87				\$391.87			

SCHEDULE B - 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		\$108.19							\$127.00		
43221		\$80.79							\$96.95		
43231		\$126.53							\$147.00		
43241		\$135.56							\$157.00		
43281		\$99.14							\$116.00		

Periodontal Re-Evaluation/Evaluation

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

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
49101		\$63.40							\$76.08		
49102		\$126.80							\$152.16		

SCHEDULE B - 5.0 PROSTHODONTICS - REMOVABLE

- The CDCP Removable Prosthodontic Policy must be met. Please refer to the [oral health provider](#) page on the Sun Life CDCP website or consult the [CDCP Dental Benefits Guide](#) on the Government of Canada website for more information on the CDCP policies.
- The fee for complete and partial dentures may include, if required, impressions, models and opposing models, bite registration, articulation, try-in, and insertion. The fee also includes a 3 month period of post-insertion care. Post-insertion care services may include denture additions, adjustments, modifications, repairs/repair materials, relines, rebases, reinforcements and tissue conditioning, depending on the type of denture.
- 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 3 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	\$1,050.64								\$1,260.77	
51302	L	\$1,124.36								\$1,349.23	
51303	L	\$1,613.66								\$1,936.39	
51711	L	\$1,196.94								\$1,436.33	
51712	L	\$1,274.15								\$1,528.98	
51713	L	\$1,833.22								\$2,199.86	
51811	L	\$1,352.65								\$1,623.18	
51812	L	\$1,419.19								\$1,703.03	
51813	L	\$2,494.53								\$2,993.44	

Partial Acrylic Dentures – Provisional

- 1 per arch in any 60 months
- Preauthorization is required for the initial placement of a removable partial denture.
- Preauthorization is not required for the replacement of a removable partial denture where the initial placement was paid for by the CDCP and meets its frequency eligibility.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
52101	L	\$325.69								\$390.83	
52102	L	\$355.45								\$426.54	
52103	L	\$497.03								\$596.44	
52121	L	\$375.76								\$450.91	
52122	L	\$375.76								\$450.91	
52123	L	\$684.86								\$821.83	

Partial Acrylic Dentures

- 1 per arch in any 60 months
- Preauthorization is required for the initial placement of a removable partial denture.
- Preauthorization is not required for the replacement of a removable partial denture where the initial placement was paid for by the CDCP and meets its frequency eligibility.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
52111	L	\$377.34								\$452.81	
52112	L	\$392.22								\$470.66	
52113	L	\$692.64								\$831.17	
52201	L	\$838.73								\$1,006.48	
52202	L	\$913.15								\$1,095.78	
52203	L	\$1,576.71								\$1,892.05	
52301	L	\$492.03								\$590.44	
52302	L	\$536.68								\$644.02	
52303	L	\$770.74								\$924.89	
52311	L	\$579.58								\$695.50	
52312	L	\$632.11								\$758.53	
52313	L	\$1,090.53								\$1,308.64	
52401	L	\$547.19								\$656.63	
52402	L	\$596.22								\$715.46	
52403	L	\$1,029.07								\$1,234.88	
52711	L	\$654.87								\$785.84	
52712	L	\$714.41								\$857.29	
52713	L	\$1,232.35								\$1,478.82	

Partial Cast Dentures

- 1 per arch in any 96 months
- Preauthorization is required for the initial placement of a removable partial denture.
- Preauthorization is not required for the replacement of a removable partial denture where the initial placement was paid for by the CDCP and meets its frequency eligibility.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
53101	L	\$1,079.45								\$1,295.34	
53102	L	\$1,176.23								\$1,411.48	
53103	L	\$1,676.50								\$2,011.80	
53201	L	\$919.33								\$1,103.20	
53202	L	\$919.33								\$1,103.20	
53203	L	\$1,370.78								\$1,644.94	
53301	L	\$1,597.13								\$1,916.56	
53302	L	\$1,597.13								\$1,916.56	
53711	L	\$1,171.42								\$1,405.70	
53712	L	\$1,274.73								\$1,529.68	
53713	L	\$2,201.60								\$2,641.92	

SCHEDULE B - 7.0 ORAL AND MAXILLOFACIAL SURGERY

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
72321		\$277.53							\$277.53		
72329		\$236.39							\$236.39		
72331		\$320.43									
72339		\$272.28									
72511		\$276.66						\$331.99	\$331.99		
72519		\$138.33						\$166.00	\$166.00		
72521		\$408.86						\$490.63	\$490.63		
72529		\$204.87						\$245.84	\$245.84		
72531		\$497.28							\$596.74		
72539		\$451.76							\$542.11		
72541		\$506.91							\$608.29		
72551		\$548.94							\$658.73		
73121		\$176.85							\$212.22		

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
73411		\$190.43							\$228.52		
75302		\$182.98		\$219.58							
75401		\$176.34		\$211.61							
75403		\$163.22		\$195.86	\$195.86	\$195.86					
75411		\$435.28									
75412		\$544.11									
76201		\$835.23						\$1,002.28			
76301		\$986.15						\$1,183.38			
79603		\$95.24		\$114.29	\$114.29	\$114.29		\$114.29	\$114.29		
79604		\$95.24		\$114.29	\$114.29	\$114.29		\$114.29	\$114.29		

**SCHEDULE B - 8.0 ORTHODONTICS CAN BE REQUESTED BEGINNING IN 2025
(DATE: TO BE DETERMINED)**

- The CDCP Orthodontic Policy must be met. Please refer to the [oral health provider](#) page on the Sun Life CDCP website or consult the [CDCP Dental Benefits Guide](#) on the Government of Canada website for more information on the CDCP 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:
 - P0500 - Orthodontic Observation
 - P1200 - Initial Payment - Comprehensive treatment
 - P1300 - Incremental Payment - Comprehensive treatment
 - P1400 - Final Payment - Comprehensive treatment

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
80602		\$70.94						\$70.94			
80661		\$61.90						\$61.90			
80669		\$61.90						\$61.90			
80671		\$61.22						\$61.22			
80679		\$61.22						\$61.22			
81111	L	\$278.03						\$278.03			
81112	L	\$278.03						\$278.03			
81113	L	\$522.50						\$522.50			
81114	L	\$522.50						\$522.50			
81121	L	\$521.70						\$521.70			
81122	L	\$521.70						\$521.70			
81131	L	\$525.26						\$525.26			
81132	L	\$525.26						\$525.26			
81135	L	\$620.82						\$620.82			
81211	L	\$757.46						\$757.46			
81212	L	\$757.46						\$757.46			
81221	L	\$255.98						\$255.98			
81222	L	\$255.98						\$255.98			
81231	L	\$522.92						\$522.92			
81232	L	\$522.92						\$522.92			
81241	L	\$523.61						\$523.61			
81242	L	\$523.61						\$523.61			
81243	L	\$523.61						\$523.61			
81251	L	\$756.09						\$756.09			
81252	L	\$756.09						\$756.09			
81253	L	\$800.19						\$800.19			
81254	L	\$793.21									
P0500		\$57.63					\$57.63	\$57.63			
P1200		\$2,838.02					\$2,838.02	\$2,838.02			
P1300		\$2,365.02					\$2,365.02	\$2,365.02			
P1400		\$1,892.00					\$1,892.00	\$1,892.00			

SCHEDULE B - 9.0 ADJUNCTIVE GENERAL SERVICES

Anesthesia

- The CDCP Sedation Policy must be met. Please refer to the [oral health provider](#) page on the Sun Life CDCP website or consult the [CDCP Dental Benefits Guide](#) on the Government of Canada website for more information on the CDCP policies.

Anesthesia, Conscious Sedation

- 1 in any 12 months

Parenteral Conscious Sedation (regardless of method – IM or IV)

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
92441		\$153.36	\$184.03					\$184.03	\$153.36		
92442		\$224.14	\$268.97					\$268.97	\$224.14		
92443		\$294.93	\$353.92					\$353.92	\$294.93		
92444		\$365.73	\$438.88					\$438.88	\$365.73		
92445		\$386.77	\$464.12					\$464.12	\$386.77		
92446		\$449.10	\$538.92					\$538.92	\$449.10		
92447		\$512.43	\$614.92					\$614.92	\$512.43		
92448		\$574.78	\$689.74					\$689.74	\$574.78		

Combined techniques of inhalation plus intravenous and/or intramuscular injection

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
92451		\$153.36	\$184.03					\$184.03			
92452		\$228.22	\$273.86					\$273.86			
92453		\$284.81	\$341.77					\$341.77			
92454		\$354.63	\$425.56					\$425.56			
92455		\$443.30	\$531.96					\$531.96			
92456		\$531.96	\$638.35					\$638.35			
92457		\$622.39	\$746.87					\$746.87			
92458		\$709.53	\$851.44					\$851.44			

Deep Sedation and General Anesthesia

- 1 in any 12 months

Anesthesia, General

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
92212		\$312.89	\$375.47					\$375.47			
92213		\$406.05	\$487.26					\$487.26			
92214		\$494.12	\$592.94					\$592.94			
92215		\$520.05	\$624.06					\$624.06			
92216		\$601.47	\$721.76					\$721.76			
92217		\$682.01	\$818.41					\$818.41			
92218		\$762.56	\$915.07					\$915.07			

Provision of facilities, equipment and support services for general anesthesia when provided by a separate practitioner

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
92222		\$140.08	\$168.10					\$168.10			
92223		\$210.12	\$252.14					\$252.14			
92224		\$280.16	\$336.19					\$336.19			
92225		\$350.20	\$420.24					\$420.24			
92226		\$420.24	\$504.29					\$504.29			
92227		\$490.28	\$588.34					\$588.34			
92228		\$560.32	\$672.38					\$672.38			

Anesthesia, Deep Sedation

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
92301		\$203.23	\$243.88					\$243.88			
92302		\$287.98	\$345.58					\$345.58			
92303		\$374.10	\$448.92					\$448.92			
92304		\$458.42	\$550.10					\$550.10			
92305		\$482.40	\$578.88					\$578.88			
92306		\$557.25	\$668.70					\$668.70			
92307		\$631.29	\$757.55					\$757.55			
92308		\$705.32	\$846.38					\$846.38			

Provision of facilities, equipment and support services for deep sedation when provided by a separate practitioner

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
92321		\$51.59	\$61.91					\$61.91			
92322		\$140.08	\$168.10					\$168.10			
92323		\$210.12	\$252.14					\$252.14			
92324		\$280.16	\$336.19					\$336.19			
92325		\$350.20	\$420.24					\$420.24			
92326		\$420.24	\$504.29					\$504.29			
92327		\$490.28	\$588.34					\$588.34			
92328		\$560.32	\$672.38					\$672.38			

Office or Institutional Visit

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
94302		\$179.48									

Laboratory Fees

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
99111		I.C.								I.C.	
99222		I.C.		I.C.	I.C.	I.C.		I.C.	I.C.		
99333		I.C.								I.C.	