

# Tower Dental Discount Plan

## MEMBERSHIP FEES

**\$120/person**  
**\$200 - Husband and Spouse/Domestic Partner**  
**\$325 Family**

## DIAGNOSTIC TREATMENT

ADA CODE	TREATMENT	MEMBER PAYS
D0120	Periodic Oral evaluation.....	N/C
D0140	Limited Oral evaluation, problem focused .....	N/C
D0150	Comprehensive oral evaluation (first visit).....	\$10
D0210	Intraoral-complete series (including bitewings).....	\$35
D0220	Intraoral-periapical-first film.....	\$10
D0230	Intraoral-periapical each additional film.....	\$8
D0270	Bitewing-single film .....	\$10
D0272	Bitewing-two films.....	\$15
D0274	Bitewing-Four films.....	ONE FREE PER YEAR

## PREVENTATIVE TREATMENT

D1110	Prophylaxis-Adult.....	\$35
D1120	Prophylaxis-Child.....	\$25
D1201	Application of fluoride (including prophylaxis) Child.....	\$35
D1205	Application of fluoride (including prophylaxis)Adult.....	\$45
D1203	Application of fluoride (excluding prophylaxis)Child.....	\$10
D1204	Application of fluoride (excluding prophylaxis)Adult.....	\$10
D1330	Oral Hygiene instruction.....	N/C
D1351	Sealant-per tooth.....	\$20
D1510	Space Maintainer-fixed unilateral type.....	\$120
D1515	Space Maintainer-fixed bilateral type.....	\$165

## RESTORATIVE PROCEDURES

D2140	Amalgam-1 surface, per tooth.....	\$50
D2150	Amalgam-2 surfaces, per tooth.....	\$60
D2160	Amalgam-3 surfaces, per tooth.....	\$80
D2161	Amalgam-4 or more surfaces, , per tooth.....	\$120
D2330	Resin based composite-1 surface, anterior.....	\$65
D2331	Resin based composite-2 surfaces, anterior.....	\$80
D2332	Resin based composite-3 surfaces, anterior.....	\$95
D2335	Resin based composite-4 surfaces.....	\$140
D2391	Resin based composite-1 surfaces, posterior.....	\$75
D2392	Resin based composite-2 surfaces, posterior.....	\$95
D2393	Resin based composite-3 surfaces, posterior.....	\$110
D2394	Resin based composite-4 surfaces, posterior.....	\$175
D2510	Inlay-metallic.....	\$400
D2740	Crown-porcelain / Ceramic Substrate.....	\$900
D2750	Crown-porcelain fused to high noble metal.....	\$725
D2790	Crown- full cast high noble metal.....	\$700
D2920	Recement Crown.....	\$100
D2940	Sedative filling.....	\$50
D2950	Crown Build up, including any pins.....	\$75
D2951	Pin retention per tooth in addition to restoration.....	\$45
D2952	Cast post and core in addition to crown.....	\$225

D2970	Temporary crown (artificial over damaged tooth).....	\$150
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## ENDODONTIC PROCEDURES

D3220	Therapeutic pulpotomy (excluding final restoration).....	\$75
D3310	Root canal, anterior (excluding final restoration).....	\$375
D3320	Root canal, bicuspid (excluding final restoration).....	\$450
D3330	Root canal, molar (excluding final restoration).....	\$675

## PERIODONTIC PROCEDURES

D4341	Periodontal scaling and root planning-per quadrant .....	\$125
D4355	Full mouth debridement .....	\$65
D4381	Locally administered antibiotic.....	\$40
D4910	Periodontal maintenance procedures following active therapy.....	\$65

## PROSTHODONTIC REMOVABLE

D5110	Complete upper denture.....	\$950
D5120	Complete lower denture.....	\$950
D5130	Immediate upper denture.....	\$1100
D5140	Immediate lower denture.....	\$1100
D5211	Upper partial-acrylic base.....	\$950
D5212	Lower partial-acrylic base.....	\$950
D5410	Adjust complete denture-upper.....	\$75
D5411	Adjust complete denture-lower.....	\$75
D5421	Adjust partial denture-upper.....	\$75
D5422	Adjust partial denture-lower.....	\$75
D5520	Replace missing or broken teeth complete denture(Each tooth).....	\$50
D5630	Repair or replace broken clasp.....	\$50
D5640	Replace broken teeth-per tooth.....	\$50
D5650	Add tooth to existing partial denture.....	\$150
D5660	Add clasp to existing partial denture.....	\$75

## PROSTHODONTICS, FIXED BRIDGES

D6240	Pontic-porcelain fused to high noble metal.....	\$725
D6750	Crown-porcelain fused to high noble metal.....	\$725
D6930	Recement Bridge.....	\$150
D6950	Precision attachment.....	\$200
D6970	Cast post and core in addition to partial denture retainer.....	\$250
D6971	Cast post as part or partial denture retainer.....	\$300

## ORAL SURGERY

D7111	Extraction of coronal remnants-deciduous tooth.....	\$75
D7140	Extraction, erupted tooth or exposed root.....	\$100
D7210	Surgical removal of erupted tooth.....	\$200

## ADJUNCTIVE GENERAL SERVICES

D0016	Failed appointment (without 24hr. notice).....	\$35
D9110	Palliative (emergency) treatment of dental pain.....	\$75
D9310	Consultation- per session (diagnostic service provided by dentist other than dentist providing treatment).....	\$30

Tower Dentistry Members will pay at the time of service

The Tower Dental Plan is not insurance. The plan is a discount only valid at Tower Dentistry

## **Tower Dental Discount Plan**

The Dentist may charge fees for any procedure that presents unusual difficulties and circumstances. The Dentist will discuss fees with patient prior to treatment.

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