

Limitations by Frequency or Age

- 1** Two Prophylaxes (1110 or 1120) or Periodontal Maintenance Treatments (4910) per calendar year.
- 2** Two Fluoride Treatments (1201 or 1203 or 1205), limited to under age 14, per calendar year
- 3** One Unilateral Space Maintainer (1510 or 1520), limited to under age 16 and replacing lost/extracted deciduous teeth, per arch per lifetime
- 4** One Bilateral Space Maintainer (1515 or 1525), limited to under age 16 and replacing lost/extracted deciduous teeth, per arch per lifetime
- 5** One Emergency Paliative Treatment (9110) in any 6-month period.
- 6** One Full-Mouth Series or Panoramic Film (0210 or 0330) in any 6 consecutive month period
- 7** One Sealant Treatment to Permanent Molar (1351), limited to under age 16 on unrestored tooth, per tooth in any 36 consecutive month period
- 8** One Diagnostic Consultation by Non-treating Dentist (9310) per dental specialty in any 12 consecutive month period
- 9** Appliance to Control Harmful Habits (8220) limited to under age 14.
- 10** Replacement of Amalgam Restoration (2110 through 2161) only after 12 or more months since prior procedure, if under age 19
- 11** Replacement of Amalgam Restoration (2110 through 2161) only after 36 or more months since prior procedure, if age 19 or older
- 12** Replacement of Resin Restoration (2330 through 2388) only after 12 or more months since prior procedure, if under age 19
- 13** Replacement of Resin Restoration (2330 through 2388) only after 36 or more months since prior procedure, if age 19 or older
- 14** One Crown (2336 or 2337 or 2710 or 2930 - 2933) per tooth in any 24 consecutive month period
- 15** Recement Bridge (6930) only after 12 or more months since initial insertion.
- 16** One Denture Rebase (5710 or 5711 or 5720 or 5721) in any 24 consecutive month period and only 12 or more months after insertion
- 17** One Denture Reline (5730 through 5761) in any 24 consecutive month period and only 12 or more months after insertion
- 18** One Denture Adjustment (5410 or 5411 or 5421 or 5422) in any 24 consecutive month period
- 19** One Tissue Conditioning (5850 or 5851) per arch in any 12 consecutive month period and only 12 or more months after denture insertion
- 20** One Periodontal Root Planing (4341), with evidence of bone loss, per quadrant in any 24 consecutive month period
- 21** One Periodontal Scaling (4341), in the absence of related treatment in prior 36 months , per quadrant in any 36 consecutive month period
- 22** One Distal or Proximal Wedge (4274), with evidence of periodontal disease of each tooth, per quadrant in any 36 consecutive month period
- 23** One Gingivectomy or Crown Lengthening (4211 or 4249), with evidence of periodontal disease of each tooth, in any 12 consecutive month period

- 25** Guided Tissue Regeneration
- 26:** Occlusal Adjustment
- 27:** Two (2) implants per year

Orthodontic treatment is limited to children up to age 19.

Limitations by Best Practice or Cosmetic Determinants

- 1** Labial Veneers are covered only for decay or injury to permanent tooth that cannot be restored with amalgam or composite filling
- 2** Resin Restoration (2330 through 2388) limited to anterior teeth. Resin Restoration to posterior teeth is reimbursed at amalgam rates.