

Arkansas Kidney Disease Commission Dental Fee Schedule

Amalgam Restorations*

Code	Description	Allowance
D2140	Amalgam - one surface, primary or permanent	\$ 80.00
D2150	Amalgam - two surfaces, primary or permanent	\$ 92.00
D2160	Amalgam - three surfaces, primary or permanent	\$ 112.00
D2161	Amalgam - four or more surfaces, primary or permanent	\$ 130.00

Resin-Based Composite Restorations - Direct*

Code	Description	Allowance
D2330	Resin-based composite - one surface, anterior	\$ 94.00
D2331	Resin-based composite - two surfaces, anterior	\$ 117.00
D2332	Resin-based composite - three surfaces, anterior	\$ 134.00
D2335	Resin - four or more surfaces or involving incisal angle, anterior	\$ 171.00
D2390	Resin-based composite crown, anterior	\$ 170.00
D2391	Resin-based composite - one surface, posterior	\$ 112.00
D2392	Resin-based composite - two surfaces, posterior	\$ 143.00
D2393	Resin-based composite - three surfaces, posterior	\$ 170.00
D2394	Resin-based composite - four or more surfaces, posterior	\$ 190.00

Non-Surgical Periodontal Services*

Code	Description	Allowance
D4341	Periodontal scaling and root planing - per quadrant	\$ 160.00
D4342	Periodontal scaling and root planing - one to three teeth, per quadrant	\$ 93.00
D4355	Full mouth deridement to enable comprehensive evaluation and diagnosis	\$ 95.00

Oral and Maxillofacial Surgery

Extractions*

Code	Description	Allowance
D7140	Extraction, erupted tooth or exposed root	\$ 88.00

Surgical Extractions*

Code	Description	Allowance
D7210	Surgical removal of erupted tooth	\$ 165.00
D7220	Removal of impacted tooth - soft tissue	\$ 200.00
D7230	Removal of impacted tooth - partially bony	\$ 250.00
D7250	Surgical removal of residual tooth roots - cutting procedure	\$ 170.00

Alveoplasty - Surgical Preparation of Ridge for Dentures*

Code	Description	Allowance
D7310	Alveoplasty in conjunction with extractions - per quadrant	\$ 150.00

Anesthesia*

Code	Description	Allowance
D9220	Deep sedation/general anesthesia - first 30 minutes	\$ 259.00

*Other services may be approved upon review of treatment plan.