



# Health Insurance (Dental Services) Determination 2007

*Health Insurance Act 1973*

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I, DAVID KALISCH, delegate of the Minister for Health and Ageing, make this Determination under subsection 3C (1) of the *Health Insurance Act 1973*.

Dated 26 October 2007

DAVID KALISCH  
Delegate of the Minister for Health and Ageing

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**1 Name of Determination**

This Determination is the *Health Insurance (Dental Services) Determination 2007*.

**2 Commencement**

This Determination commences on 1 November 2007.

**3 Definitions**

In this Determination:

*Act* means the *Health Insurance Act 1973*.

*dental service* means a dental service mentioned in Schedule 1.

*eligible dental prosthetist* means an individual:

- (a) who is registered or entitled to practice as a dental prosthetist under a law of a State or Territory; and
- (b) whose registration or entitlement to practice as a dental prosthetist entitles the individual to provide services to which any of the items mentioned in Part 3 of Schedule 1 apply; and
- (c) whose name is entered in the register, kept by the Medicare Australia CEO, of dental prosthetists who can provide services to which any of the items mentioned in Part 3 of Schedule 1 apply.

*eligible dental specialist* means a person:

- (a) who is registered or licensed to practice under a law of a State or Territory in a specialty mentioned in Schedule 2; and
- (b) whose name is entered in the register, kept by the Medicare Australia CEO, of dental specialists who can provide services to which any of the items mentioned in Part 2 of Schedule 1 apply.

*eligible dentist* means a dental practitioner whose name is entered in the register, kept by the Medicare Australia CEO, of dental practitioners who can provide services to which any of the items mentioned in Part 1 of Schedule 1 apply.

*eligible patient* has the meaning given by section 6.

*GP management plan* means a plan to which item 721 or 725 of the general medical services table applies.

*multidisciplinary care plan* has the meaning given by subrule 36 (2) of the general medical services table.

*relevant provisions* means all provisions, relating to professional services or to medical services, of the Act and regulations made under the Act, and the *National Health Act 1953* and regulations made under that Act.

**team care arrangements** means team care arrangements to which item 723 or 727 of the general medical services table applies.

*Note* Unless a contrary intention appears, an expression used in this Determination has the same meaning as in the *Health Insurance Act 1973* — see section 13 of the *Legislative Instruments Act 2003*.

#### 4 Dental services

A dental service provided in accordance with this Determination is to be treated, for the relevant provisions, as if:

- (a) it were both a professional service and a medical service; and
- (b) there were an item in the general medical services table that:
  - (i) related to the service; and
  - (ii) specified for the service a fee for each State, being the fee mentioned in the item in Schedule 1 for the service.

*Note* For this Determination, an internal Territory is deemed to form part of the State of New South Wales — see subsection 3C (7) of the Act.

#### 5 Monetary limit on medicare benefits

- (1) For subsection 3C (2A) of the Act, the total of all amounts of medicare benefit paid or payable for dental services provided to a person in a relevant 2 year period must not exceed \$4 250.

- (2) In this section:

**relevant 2 year period**, for a person, has the meaning given by subsections (3) and (4).

- (3) If:

- (a) a person received a dental service on or after 1 November 2007; and
- (b) the service is the first dental service that the person has received on or after 1 November 2007;

the calendar year in which the person received that first dental service and the following calendar year is a **relevant 2 year period** for the person.

- (4) After that relevant 2 year period, each calendar year in which the person receives a dental health service and the following calendar year is a **relevant 2 year period** for the person unless the first mentioned year is already part of a relevant 2 year period because of a previous application of this subsection.

*Example 1*

A person who first receives a dental service on 25 November 2007 will be eligible for not more than \$4 250 in medicare benefits for all dental services provided to the person in 2007 and 2008.

A further relevant 2 year period commences for that person in the calendar year when the person first receives a dental service on or after 1 January 2009.

*Example 2*

A person who first receives a dental service on 15 January 2008 will be eligible for not more than \$4 250 in medicare benefits for all dental services provided to the person in 2008 and 2009.

A further relevant 2 year period commences for the person in the calendar year when the patient first receives a dental service on or after 1 January 2010.

## 6 Patient eligibility

A person is an *eligible patient* if:

- (a) the person has either:
  - (i) a GP management plan and team care arrangements in place; or
  - (ii) a multidisciplinary care plan to which item 731 of the general medical services table applies; and
- (b) his or her oral health is impacting on, or is likely to impact on, his or her general health; and
- (c) the person has been referred for a dental service under section 9; and
- (d) the person is not an admitted patient of a hospital.

## 7 Effect of election to claim private health insurance for a dental service

An item in Schedule 1 applies to a dental service only if a private health insurance benefit has not been claimed for that service.

## 8 Application of items — dental services provided by eligible providers to eligible patients

- (1) An item in Part 1 of Schedule 1 applies only to a dental service provided by an eligible dentist to an eligible patient.
- (2) An item in Part 2 of Schedule 1 applies only to a dental service provided by an eligible dental specialist to an eligible patient.
- (3) An item in Part 3 of Schedule 1 applies only to a dental service provided by an eligible dental prosthetist to an eligible patient.

## 9 Referral

- (1) A general practitioner may refer an eligible patient for a dental service only to:
  - (a) an eligible dentist; or
  - (b) an eligible dental prosthetist, if the patient:
    - (i) has no natural teeth and requires only dental prosthetic services; or
    - (ii) requires only repairs or maintenance to an existing denture.

- (2) A referral by a general practitioner must be made in the form published by the Department and described as 'Referral Form for Dental Services under Medicare', as existing on 1 November 2007, or a form that substantially complies with that form.

*Note* The form is available on the internet — see <http://www.health.gov.au>.

- (3) An eligible dentist who has provided a dental service to an eligible patient referred to the eligible dentist under this subsection or subsection (1), (4) or (5) may refer the patient to an eligible dentist, an eligible dental specialist or an eligible dental prosthetist for an additional dental service.
- (4) An eligible dental specialist who has provided a dental service to an eligible patient referred to the eligible dental specialist under this subsection or subsection (3) may refer the patient to an eligible dentist, an eligible dental specialist or an eligible dental prosthetist for an additional dental service.
- (5) An eligible dental prosthetist who has provided a dental service to an eligible patient referred to the eligible dental prosthetist under this subsection or subsection (1), (3) or (4) may refer the patient to an eligible dentist or an eligible dental prosthetist for an additional dental service.

## **10 Quotation for dental services and reporting**

- (1) This section applies if:
  - (a) an eligible dentist, an eligible dental specialist or an eligible dental prosthetist performs an initial examination and assessment of an eligible patient, including consideration of any diagnostic tests; and
  - (b) provides a course of treatment to the patient.
- (2) An item in Schedule 1 applies to a dental service included in the course of treatment only if, before beginning the course of treatment, the eligible dentist, eligible dental specialist or eligible dental prosthetist:
  - (a) gave to the eligible patient, in writing:
    - (i) a plan of the course of treatment; and
    - (ii) a quotation for each dental service and each other service (if any) in the plan; and
  - (b) gave a copy or written summary of the plan to the general practitioner who referred the patient for dental services.

## **11 Purpose of service**

- (1) An item in Schedule 1 applies to a dental service only if the primary purpose of the service is to improve the oral health or function of the eligible patient.
- (2) An item in Schedule 1 does not apply to a dental service if the primary purpose of the service is to improve the appearance of the eligible patient.

- (3) An item in Schedule 1 applies to a dental service if the primary purpose of the service is to improve the oral health or function of the eligible patient and another purpose of the service is to improve the patient's appearance.

## 12 Limitation on items — dentures and denture components

- (1) For any particular eligible patient, a set of dentures applies not more than:
- once in 8 years; or
  - if exceptional circumstances exist in relation to the patient — twice in 8 years.

- (2) In this section:

*exceptional circumstances* exist in relation to an eligible patient if:

- an eligible dentist, an eligible dental specialist or an eligible dental prosthetist is satisfied that there has been a significant change in the clinical condition of the patient that necessitates a new set of dentures for the patient; or
- the existing dentures of the patient have been irreparably damaged or lost.

*set of dentures* means:

- complete maxillary and mandibular dentures under item 85719, 86719 or 87719; or
- a complete or partial maxillary denture under item 85711, 85721, 85727, 86711, 86721, 86727, 87711, 87721 or 87727; or
- a complete or partial mandibular denture under item 85712, 85722, 85728, 86712, 86722, 86728, 87712, 87722 or 87728; or
- both:
  - a complete or partial maxillary denture under any of the items mentioned in paragraph (b); and
  - a complete or partial mandibular denture under any of the items mentioned in paragraph (c).

## 13 Limitation on number of certain services

For any particular eligible patient, an item mentioned in column 2 of the following table is applicable to a service not more than the number of times mentioned in column 3 of the table in the period mentioned in column 4 of the table.

Item	Item of service	Number of times	Period
1	85123, 85311, 85314, 85322, 85323, 85324, 86123, 86311, 86314, 86322, 86323, 86324	1	1 day
2	85927, 86927	1	3 months

## Section 14

Item	Item of service	Number of times	Period
3	85111, 85114, 85121, 86111, 86114, 86121	1	6 months
4	85039, 85047, 85131, 85141, 85221, 85225, 85245, 85433, 86036, 86039, 86047, 86131, 86141, 86221, 86225, 86245, 86433	1	12 months
5	85753, 86753, 87753	1	24 months
6	85963, 85964, 86963, 86964	1	36 months
7	85222, 86222	2	1 day
8	85115, 85213, 85234, 85986, 86115, 86213, 86234, 86235, 86986	2	12 months
9	85013, 85572, 86013, 86572	3	3 months
10	85458, 86458	3	12 months
11	85231, 85232, 85233, 85971, 86231, 86232, 86233, 86971	4	12 months
12	85771, 86771, 87771	5	3 months
13	85022, 86022	6	1 day

### 14 Limitation on provision of certain services

For any particular eligible patient, an item mentioned in column 2 of the following table is applicable to a service provided by a particular eligible dentist, eligible dental specialist or eligible dental prosthetist not more than once in the period mentioned in column 3 of the table.

Item	Item of service	Period
1	85012, 86012	6 months
2	86015, 86038, 86082	12 months
3	85011, 87011	24 months

### 15 Application of item 85433

For any particular eligible patient, item 85433 does not apply to a service provided to the patient on a day if a service described in item 85431, 85432, 85434, 85436, 85437 or 85438 is provided to the patient on the day.

### 16 Application of item 85455

For any particular eligible patient, item 85455 does not apply to a service provided to the patient on a day if a service described in item 85415, 85416, 85417 or 85418 is provided to the patient on the day.



**17      Limitation on items 85521 and 85531**

For any particular eligible patient, any combination of items 85521 and 85531 is applicable to not more than 5 services provided to the patient on a day.

**18      Application of item 85572**

For any particular eligible patient, item 85572 does not apply to a service provided to the patient on a day if a service described in any of items 85411 to 85418 or items 85431 to 85458 is provided to the patient on the day.

**19      Application of items 85733, 86733 and 87733**

- (1) For any particular eligible patient, item 85733 applies to the addition of no more than 12 teeth to a base provided to the patient under item 85721, 85722, 85727 or 85728.
- (2) For any particular eligible patient, item 86733 applies to the addition of no more than 12 teeth to a base provided to the patient under item 86721, 86722, 86727 or 86728.
- (3) For any particular eligible patient, item 87733 applies to the addition of no more than 12 teeth to a base provided to the patient under item 87721, 87722, 87727 or 87728.

**20      Application of item 86433**

For any particular eligible patient, item 86433 does not apply to a service provided to the patient on a day if a service described in item 86431, 86432, 86434, 86436, 86437 or 86438 is provided to the patient on the day.

**21      Application of item 86455**

For any particular eligible patient, item 86455 does not apply to a service provided to the patient on a day if a service described in item 86415, 86416, 86417 or 86418 is provided to the patient on the day.

**22      Limitation on items 86521 and 86531**

For any particular eligible patient, any combination of items 86521 and 86531 is applicable to not more than 5 services provided to the patient on a day.

**23      Application of item 86572**

For any particular eligible patient, item 86572 does not apply to a service provided to the patient on a day if a service described in any of items 86411 to 86418 or items 86431 to 86458 is provided to the patient on the day.

## Schedule 1      Dental services and fees

(section 3)

### Part 1            Services provided by eligible dentists

Item	Service	Fee (\$)
<b>Group A1 — Diagnostic services</b>		
<i>Subgroup 1 — Examinations</i>		
85011	Comprehensive oral examination, including: (a) evaluation of all teeth, their supporting tissues and the oral tissues to record the condition of these structures; and (b) recording an appropriate medical history and any other relevant information (Item is subject to section 14)	47.60
85012	Periodic oral examination and evaluation performed on a patient of record to determine any changes in the patient's dental and medical health since a previous comprehensive or periodic examination (Item is subject to section 14)	39.50
85013	Oral examination, limited to a problem-focused oral evaluation carried out immediately before required treatment, including recording an appropriate medical history and any other relevant information (Item is subject to section 13)	24.85
<i>Subgroup 2 — Radiological examination and interpretation</i>		
85022	Intraoral periapical or bitewing radiograph — each exposure (Item is subject to section 13)	31.15
85025	Intraoral radiograph (occlusal, maxillary or mandibular) — each exposure	55.55
85031	Extraoral radiograph (maxillary or mandibular) — each exposure	63.35
85037	Panoramic radiograph — each exposure	85.10
85039	Tomography of the skull or parts of the skull (Item is subject to section 13)	134.25
<i>Subgroup 3 — Other diagnostic services</i>		
85047	Caries activity screening test (Item is subject to section 13)	36.55
85051	Biopsy of tissue	111.85
85071	Diagnostic model — each model	54.55

Item	Service	Fee (\$)
<b>Group A2 — Preventive services</b>		
<i>Subgroup 1 — Dental prophylaxis</i>		
85111	Removal of plaque, stain or plaque and stain (Item is subject to section 13)	48.60
85113	Recontouring pre-existing restoration or restorations	18.35
85114	Removal of calculus — first visit (Item is subject to section 13)	81.00
85115	Removal of calculus — each subsequent visit (Item is subject to section 13)	52.70
85117	Bleaching, internal, for non-vital discoloured tooth — each tooth	189.80
<i>Subgroup 2 — Remineralising agents</i>		
85121	Topical application of remineralising agent — 1 treatment (Item is subject to section 13)	31.20
85123	Application of concentrated remineralising agent — single tooth (Item is subject to section 13)	24.45
<i>Subgroup 3 — Other preventive services</i>		
85131	Dietary advice — consultation of at least 15 minutes (Item is subject to section 13)	32.90
85141	Oral hygiene instruction — consultation of at least 15 minutes (Item is subject to section 13)	44.65
85161	Fissure sealing — each tooth	41.55
85165	Desensitizing procedure — each visit	24.45
85171	Odontoplasty — each tooth	45.85
<b>Group A3 — Periodontics</b>		
85213	Treatment of acute periodontal infection — each visit (Item is subject to section 13)	62.90
85221	Clinical periodontal analysis and recording (Item is subject to section 13)	47.80
85222	Root planing and subgingival curettage — no more than 8 teeth (Item is subject to section 13)	117.50
85225	Non-surgical periodontal treatment where not described in another item — each visit (Item is subject to section 13)	95.45
85231	Gingivectomy — no more than 8 teeth (Item is subject to section 13)	153.05
85232	Periodontal flap surgery — no more than 8 teeth (Item is subject to section 13)	232.65

Item	Service	Fee (\$)
85233	Osseous surgery — no more than 8 teeth (Item is subject to section 13)	392.10
85234	Osseous graft — each tooth or implant (Item is subject to section 13)	448.65
85238	Periodontal flap surgery for crown lengthening — each tooth	216.50
85241	Root resection — each root	180.40
85245	Periodontal surgery involving a tooth or an implant (Item is subject to section 13)	71.65
<b>Group A4 — Oral surgery</b>		
<i>Subgroup 1 — Extractions</i>		
85311	Removal of a tooth or part or parts of a tooth, including local anaesthesia and routine and post-operative care — first tooth extracted on a day (Item is subject to section 13)	118.50
85314	Sectional removal of a tooth, including local anaesthesia and routine post-operative care — first sectional removal on a day (Item is subject to section 13)	151.50
85316	Additional extraction requiring: (a) removal of a tooth or part or parts of a tooth; or (b) sectional removal of a tooth; on the same day as a service described in item 85311 or 85314 is provided to the patient	87.95
<i>Subgroup 2 — Surgical extractions</i>		
85322	Surgical removal of a tooth or tooth fragment, not requiring removal of bone or tooth division, including local anaesthesia and routine post-operative care — first tooth extracted on a day (Item is subject to section 13)	192.40
85323	Surgical removal of a tooth or tooth fragment, requiring removal of bone, including local anaesthesia and routine post-operative care — first tooth extracted on a day (Item is subject to section 13)	219.75
85324	Surgical removal of a tooth or tooth fragment, requiring removal of bone and tooth division, including local anaesthesia and routine post-operative care — first tooth extracted on a day (Item is subject to section 13)	295.65
85326	Additional extraction requiring surgical removal of a tooth or tooth fragment, on the same day as a service described in item 85322, 85323 or 85324 is provided to the patient	185.30

Item	Service	Fee (\$)
<i>Subgroup 3 — Surgery for prostheses</i>		
85331	Alveolectomy, including insertion of sutures, normal post-operative care and suture removal — each segment	119.95
85337	Reduction of fibrous tuberosity, including insertion of sutures, normal post-operative care and suture removal	168.60
85338	Reduction of flabby ridge, including insertion of sutures, normal post-operative care and suture removal — each segment	78.90
85341	Removal of hyperplastic tissue, including insertion of sutures, normal post-operative care and suture removal	182.80
<i>Subgroup 4 — General surgical</i>		
85377	Removal or repair of soft tissue (not described in another item), including insertion of sutures, normal post-operative care and suture removal	182.95
85378	Surgical removal of foreign body, including insertion of sutures, normal post-operative care and suture removal	103.55
<i>Subgroup 5 — Other surgical procedures</i>		
85381	Surgical exposure of unerupted tooth, including insertion of sutures, normal post-operative care and suture removal	259.35
85384	Repositioning of displaced tooth, including insertion of sutures, normal post-operative care and suture removal — each tooth	172.40
85386	Splinting of displaced tooth, including insertion of sutures, normal post-operative care and suture removal — each tooth	177.80
85387	Replantation and splinting of tooth, including insertion of sutures, normal post-operative care and suture removal	348.20
85391	Frenectomy, including insertion of sutures, normal post-operative care and suture removal	159.75
85392	Incision and drainage of abscess or cyst, including insertion of sutures, normal post-operative care and suture removal	87.50
<b>Group A5 — Endodontics</b>		
<i>Subgroup 1 — Pulp and root canal treatments</i>		
85411	Direct pulp capping	31.50
85412	Incomplete endodontic therapy — inoperable or fractured	107.75
85414	Pulpotomy	68.70
85415	Complete chemo-mechanical preparation of root canal — first canal on a tooth	193.40
85416	Complete chemo-mechanical preparation of root canal — each additional canal on a tooth for which the service described in item 85415 has been performed	92.15
85417	Root canal obturation — first canal on a tooth	188.35

Item	Service	Fee (\$)
85418	Root canal obturation — each additional canal on a tooth for which the service described in item 85417 has been performed	88.10
85419	Extirpation of pulp or debridement of root canal or canals — emergency or palliative	124.55
<i>Subgroup 2 — Periradicular surgery</i>		
85431	Periapical curettage — each root	225.50
85432	Apicectomy, including curettage — each root	279.95
85433	Exploratory periradicular surgery (Item is subject to sections 13 and 15)	114.90
85434	Apical seal, including apicectomy and periapical curettage — each canal	347.00
85436	Sealing of perforation	214.20
85437	Surgical treatment and repair of an external root resorption — each tooth	349.60
85438	Hemisection	259.35
<i>Subgroup 3 — Other endodontic services</i>		
85445	Exploration for a calcified root canal — each canal	95.45
85451	Removal of root filling — each canal	95.45
85452	Removal of cemented root canal post or post crown	95.45
85453	Removal of or bypassing fractured endodontic instrument	79.60
85455	Additional visit for irrigation or dressing, or irrigation and dressing, of the root canal system — each tooth (Item is subject to section 16)	95.45
85457	Obturation of resorption defect or perforation — non-surgical	95.45
85458	Interim therapeutic root filling — each tooth (Item is subject to section 13)	127.25
<b>Group A6 — Restorative services</b>		
<i>Subgroup 1 — Metallic restorations — direct</i>		
85511	Metallic restoration, 1 surface — direct	94.20
85512	Metallic restoration, 2 surfaces — direct	115.45
85513	Metallic restoration, 3 surfaces — direct	137.70
85514	Metallic restoration, 4 surfaces — direct	157.00
85515	Metallic restoration, 5 surfaces — direct	179.25
<i>Subgroup 2 — Adhesive restorations — anterior teeth — direct</i>		
85521	Adhesive restoration, 1 surface, anterior tooth — direct (Item is subject to section 17)	104.30

Item	Service	Fee (\$)
85522	Adhesive restoration, 2 surfaces, anterior tooth — direct	126.55
85523	Adhesive restoration, 3 surfaces, anterior tooth — direct	149.85
85524	Adhesive restoration, 4 surfaces, anterior tooth — direct	173.15
85525	Adhesive restoration, 5 surfaces, anterior tooth — direct	203.55
<i>Subgroup 3 — Adhesive Restorations — posterior teeth — direct</i>		
85531	Adhesive restoration, 1 surface, posterior tooth — direct (Item is subject to section 17)	111.40
85532	Adhesive restoration, 2 surfaces, posterior tooth — direct	139.75
85533	Adhesive restoration, 3 surfaces, posterior tooth — direct	168.10
85534	Adhesive restoration, 4 surfaces, posterior tooth — direct	189.40
85535	Adhesive restoration, 5 surfaces, posterior tooth — direct	218.75
<i>Subgroup 4 — Metallic restorations — indirect</i>		
85541	Metallic restoration, 1 surface — indirect	405.95
85542	Metallic restoration, 2 surfaces — indirect	536.45
85543	Metallic restoration, 3 surfaces — indirect	701.10
85544	Metallic restoration, 4 surfaces — indirect	819.15
85545	Metallic restoration, 5 surfaces — indirect	871.75
<i>Subgroup 5 — Tooth coloured restorations — indirect</i>		
85551	Tooth-coloured restoration, 1 surface — indirect	496.90
85552	Tooth-coloured restoration, 2 surfaces — indirect	678.95
85553	Tooth-coloured restoration, 3 surfaces — indirect	785.00
85554	Tooth-coloured restoration, 4 surfaces — indirect	888.00
85555	Tooth-coloured restoration 5 surfaces — indirect	849.40
<i>Subgroup 6 — Other restorative services</i>		
85572	Provisional restoration — intermediate or temporary (Item is subject to sections 13 and 18)	44.00
85574	Metal band — the cementation of a metal band for diagnostic purposes, protective purposes or for the placement of a provisional (intermediate) restoration	37.10
85575	Pin retention — each pin	25.30
85576	Stainless steel crown	191.75
85577	Cusp capping — each cusp	27.35
85578	Restoration of an incisal corner — each corner	27.35
85595	Removal of inlay or onlay	87.50
85596	Recementing of inlay or onlay	71.50

Item	Service	Fee (\$)
85597	Post, direct — insertion of a post into a prepared root canal to provide an anchor for an artificial crown or other restoration	133.20
<b>Group A7 — Crown and Bridge</b>		
<i>Subgroup 1 — Crowns</i>		
85613	Full crown, non metallic — indirect	1 096.35
85615	Full crown, veneered — indirect	1 035.30
85618	Full crown, metallic — indirect	974.20
85625	Core for crown including post — indirect	288.65
85627	Preliminary restoration for crown — direct	119.30
85629	Post and root cap — indirect	302.40
<i>Subgroup 2 — Temporary (provisional ) crown and bridge</i>		
85631	Provisional crown	137.60
85632	Provisional bridge — each pontic	198.55
<i>Subgroup 3 — Bridges</i>		
85642	Bridge pontic, direct — each pontic	532.40
85643	Bridge pontic, indirect — each pontic	810.25
85644	Semi-fixed attachment	258.35
85645	Precision or magnetic attachment	297.40
85649	Retainer for bonded fixture, indirect — each tooth	288.95
<i>Subgroup 4 — Crown and bridge repairs and other services</i>		
85651	Recementing crown or veneer	93.15
85652	Recementing bridge or splint — each abutment	90.90
85653	Rebonding of bridge or splint if retreatment of bridge surface is required	82.75
85655	Removal of crown	55.65
85656	Removal of bridge or splint	167.05
85658	Repair of crown, bridge or splint, including labour and laboratory costs — indirect.	345.05
85659	Repair of crown, bridge or splint — direct	227.45
<i>Subgroup 5 — Implant Prostheses</i>		
85661	Fitting of implant abutment — each abutment	520.10
85669	Removal and reattachment of prosthesis fixed to implant or implants — each implant	146.60
85671	Full crown attached to osseointegrated implant, non metallic — indirect	1 096.35



Item	Service	Fee (\$)
85672	Full crown attached to osseointegrated implant, veneered — indirect	1 233.30
85673	Full crown attached to osseointegrated implant, metallic – indirect	975.45
<b>Group A8 — Prosthodontics</b>		
<i>Subgroup 1 — Dentures and denture components</i>		
85711	Complete maxillary denture (Item is subject to section 12)	797.70
85712	Complete mandibular denture (Item is subject to section 12)	797.70
85716	Metal palate or plate	285.20
85719	Complete maxillary and mandibular dentures (Item is subject to section 12)	1 364.10
85721	Partial maxillary denture — resin, base only (Item is subject to section 12)	383.80
85722	Partial mandibular denture — resin, base only (Item is subject to section 12)	383.80
85727	Partial maxillary denture, base only, consisting of cast metal framework and including provision of casting, clasps, retainers and occlusal rests (Item is subject to section 12)	1 145.90
85728	Partial mandibular denture, base only, consisting of cast metal framework and including provision of casting, clasps, retainers and occlusal rests (Item is subject to section 12)	1 145.90
85731	Retainer — each tooth, if a service described in item 85721 or 85722 has been provided to the patient	39.80
85732	Occlusal rest — each rest, if a service described in item 85721 or 85722 has been provided to the patient	19.35
85733	Addition of tooth to the base of a new partial denture — each tooth (Item is subject to section 19)	41.10
85735	Precision or magnetic attachment	230.15
85736	Immediate tooth replacement — each tooth	8.20
85737	Resilient lining	170.80
85738	Wrought bar — joining sections of a partial prosthesis	159.15
85739	Metal backing — an extension of the casting of a cast metal partial denture to provide a backing for the denture tooth — each backing	71.90

Item	Service	Fee (\$)
<i>Subgroup 2 — Denture maintenance</i>		
85741	Adjustment of a denture to improve comfort and function — not including a routine adjustment following the insertion of a new denture or maintenance or repair of an existing denture	47.15
85743	Relining, complete denture — processed	300.80
85744	Relining, partial denture — processed	256.30
85745	Remodelling, complete denture	472.65
85746	Remodelling, partial denture	404.10
85751	Relining, complete denture, chair-side only, hard or soft material — direct	164.50
85752	Relining, partial denture — direct	138.70
85753	Cleaning and polishing of pre-existing denture (Item is subject to section 13)	38.25
<i>Subgroup 3 — Denture repairs</i>		
85761	Reattaching pre-existing tooth or clasp to denture, including labour and laboratory costs	130.20
85762	Replacing clasp on denture	136.05
85763	Repairing broken base of a complete denture, including labour and laboratory costs	117.50
85764	Repairing broken base of a partial denture, including labour and laboratory costs	130.20
85765	Replacing first tooth on denture	136.05
85767	Any repair or tooth replacement in addition to other repairs, alterations or other modifications for the same denture on the same day, including labour and laboratory costs	53.80
85768	Adding tooth to partial denture to replace an extracted or decoronated tooth — each tooth	137.70
85769	Repair or addition to metal casting	164.70
<i>Subgroup 4 — Other prosthodontic services</i>		
85771	Tissue conditioning treatment before impressions (Item is subject to section 13)	62.50
85772	Splint, resin — indirect	244.75
85773	Splint, metal — indirect	259.35
85776	Impression if required for denture repair or modification	41.55
85777	Identification — marking a dental appliance with the name of a patient or other form of enduring patient identification	33.25

Item	Service	Fee (\$)
<b>Group A9 — Orthodontics</b>		
<i>Subgroup 1 — Removable appliances</i>		
85811	Passive removable appliance — each arch	293.20
85821	Active removable appliance — each arch	503.85
85823	Functional orthopaedic appliance	439.05
<i>Subgroup 2 — Fixed appliances</i>		
85829	Partial banding — each arch	525.30
85831	Full arch banding — each arch	1 329.90
<b>Group A10 — General services</b>		
<i>Subgroup 1 — Emergencies</i>		
85911	Palliative care — interim care to relieve pain, infection, bleeding or other problems not associated with other services	61.80
<i>Subgroup 2 — Drug therapy</i>		
85926	Individually made tray for the application of medicaments to teeth or supporting tissues, other than for bleaching	143.20
85927	Supply, prescription or administration of medications and medicaments required for a service (Item subject to section 13)	24.85
<i>Subgroup 3 — Anaesthesia and sedation</i>		
85949	Treatment under general anaesthesia, if the anaesthetic is administered by a specialist anaesthetist	150.20
<i>Subgroup 4 — Occlusal therapy</i>		
85963	Clinical occlusal analysis including muscle and joint palpation (Item is subject to section 13)	79.60
85964	Registration and mounting of casts for occlusal analysis (Item is subject to section 13)	68.20
85965	Occlusal splint	474.15
85966	Adjustment of pre-existing occlusal splint — each visit	66.70
85968	Occlusal adjustment following occlusal analysis — each visit	96.85
85971	Adjunctive physical therapy for temporomandibular joint and associated structures (Item is subject to section 13)	56.40
85972	Repair or addition of occlusal splint	199.20
<i>Subgroup 5 — Miscellaneous</i>		
85981	Splinting and stabilisation, direct — each tooth	87.50

Item	Service	Fee (\$)
85986	Post-operative care if not provided for in another item (Item is subject to section 13)	63.70

## Part 2      Services provided by eligible dental specialists

Item	Service	Fee (\$)
<b>Group B1 — Diagnostic services</b>		
<i>Subgroup 1 — Examinations</i>		
86012	Periodic oral examination and evaluation performed on a patient of record to determine any changes in the patient's dental and medical health since a previous periodic examination (Item is subject to section 14)	39.50
86013	Oral examination, limited to a problem-focused oral evaluation carried out immediately before required treatment, including recording an appropriate medical history and any other relevant information (Item is subject to section 13)	24.85
86014	Consultation for advice about or discussion of treatment options for a particular dental or oral complaint, including recording an appropriate medical history and any other relevant information	57.30
86015	Extended consultation for advice about or discussion of treatment options for a particular dental or oral complaint, including recording an appropriate medical history and any other relevant information — consultation of at least 30 minutes (Item subject to section 14)	93.80
<i>Subgroup 2 — Radiological examination and interpretation</i>		
86022	Intraoral periapical or bitewing radiograph — each exposure (Item is subject to section 13)	31.15
86025	Intraoral radiograph (occlusal, maxillary or mandibular) — each exposure	55.55
86031	Extraoral radiograph (maxillary or mandibular) — each exposure	63.35
86035	Radiograph of temporomandibular joint — each exposure	91.35
86036	Cephalometric radiograph — lateral, antero-posterior, postero-anterior or submento-vertex — each exposure (Item is subject to section 13)	134.15
86037	Panoramic radiograph — each exposure	85.10
86038	Hand-wrist radiograph for skeletal age assessment (Item is subject to section 14)	79.60
86039	Tomography of the skull or parts of the skull (Item is subject to section 13)	134.25

Item	Service	Fee (\$)
<i>Subgroup 3 — Other diagnostic services</i>		
86047	Caries activity screening test (Item is subject to item 13)	36.55
86051	Biopsy of tissue	111.85
86071	Diagnostic model — each model	54.55
86082	Tooth-jaw size prediction analysis (Item is subject to section 14)	95.45
<b>Group B2 — Preventive services</b>		
<i>Subgroup 1 — Dental prophylaxis</i>		
86111	Removal of plaque, stain, or plaque and stain (Item is subject to section 13)	48.60
86113	Recontouring pre-existing restoration or restorations	18.35
86114	Removal of calculus — first visit (Item is subject to section 13)	81.00
86115	Removal of calculus — subsequent visit (Item is subject to section 13)	52.70
86117	Bleaching, internal, for non-vital discoloured tooth — each tooth	256.25
<i>Subgroup 2 — Remineralising agents</i>		
86121	Topical application of remineralising agent — 1 treatment (Item is subject to section 13)	31.20
86123	Application of concentrated remineralising agent — single tooth (Item is subject to section 13)	24.45
<i>Subgroup 3 — Other preventive services</i>		
86131	Dietary advice — a consultation of at least 15 minutes (Item is subject to section 13)	32.90
86141	Oral hygiene instruction — a consultation of at least 15 minutes (Item is subject to section 13)	44.65
86161	Fissure sealing — each tooth	41.55
86165	Desensitizing procedure — each visit	24.45
86171	Odontoplasty — each tooth	45.85
<b>Group B3 — Periodontics</b>		
86213	Treatment of acute periodontal infection — each visit (Item is subject to section 13)	62.90
86221	Clinical periodontal analysis and recording (Item is subject to section 13)	127.25

Item	Service	Fee (\$)
86222	Root planing and subgingival curettage — no more than 8 teeth (Item is subject to section 13)	162.40
86225	Non-surgical periodontal treatment if not provided for in another item — each visit (Item is subject to section 13)	127.25
86231	Gingivectomy — no more than 8 teeth (Item is subject to section 13)	214.20
86232	Periodontal flap surgery — no more than 8 teeth (Item is subject to section 13)	354.90
86233	Osseous surgery — no more than 8 teeth (Item is subject to section 13)	515.15
86234	Osseous graft — each tooth or implant (Item is subject to section 13)	563.65
86235	Gingival graft — each tooth or implant (Item is subject to section 13)	394.70
86236	Guided tissue regeneration — each tooth or implant	466.70
86237	Guided tissue regeneration — membrane removal	203.00
86238	Periodontal flap surgery for crown lengthening — each tooth	364.95
86241	Root resection — each root	225.50
86245	Periodontal surgery involving a tooth or an implant (Item is subject to section 13)	143.20
<b>Group B4 — Oral surgery</b>		
<i>Subgroup 1 — Extractions</i>		
86311	Removal of a tooth or part or parts of a tooth, including local anaesthesia and routine post-operative care — first tooth extracted on a day (Item is subject to section 13)	147.30
86314	Sectional removal of a tooth, including local anaesthesia and routine post-operative care — first sectional removal on a day (Item is subject to section 13)	201.60
86316	Additional extraction requiring: (a) removal of a tooth or part or parts of a tooth; or (b) sectional removal of a tooth; performed on the same day as a service described in item 86311 or 86314	112.20

Item	Service	Fee (\$)
<i>Subgroup 2 — Surgical extractions</i>		
86322	Surgical removal of a tooth or tooth fragment not requiring removal of bone or tooth division, including local anaesthesia and routine post-operative care — first tooth extracted on a day (Item is subject to section 13)	255.85
86323	Surgical removal of a tooth or tooth fragment requiring removal of bone, including local anaesthesia and routine post-operative care — first tooth extracted on a day (Item is subject to section 13)	317.65
86324	Surgical removal of a tooth or tooth fragment requiring both removal of bone and tooth division, including local anaesthesia and routine post-operative care — first tooth extracted on a day (Item is subject to section 13)	393.25
86326	Additional extraction requiring surgical removal of a tooth or tooth fragment, on the same day as a service described in item 86322, 86323 or 86324 is provided to the patient	245.20
<i>Subgroup 3 — Surgery for prostheses</i>		
86331	Alveolectomy, including insertion of sutures, normal post-operative care and suture removal — each segment	151.10
86332	Ostectomy, including insertion of sutures, normal post-operative care and suture removal — each jaw	417.25
86337	Reduction of fibrous tuberosity, including insertion of sutures, normal post-operative care and suture removal	224.25
86338	Reduction of flabby ridge, including insertion of sutures, normal post-operative care and suture removal — each segment	112.75
86341	Removal of hyperplastic tissue, including insertion of sutures, normal post-operative care and suture removal	246.75
86343	Repositioning of muscle attachment, including insertion of sutures, normal post-operative care and suture removal	304.50
86344	Vestibuloplasty, including insertion of sutures, normal post-operative care and suture removal	716.25
86345	Vestibuloplasty with skin or mucosal graft, including insertion of sutures, normal post-operative care and suture removal	716.25
<i>Subgroup 4 — General surgical</i>		
86371	Removal of tumour, cyst or scar — cutaneous, subcutaneous or in mucous membrane, including insertion of sutures, normal post-operative care and suture removal	185.55
86373	Removal of tumour, cyst or scar involving muscle, bone or other deep tissue, including insertion of sutures, normal post-operative care and suture removal	624.40
86375	Surgery to salivary duct, including insertion of sutures, normal post-operative care and suture removal	557.60

Item	Service	Fee (\$)
86376	Surgery to salivary gland, including insertion of sutures, normal post-operative care and suture removal	196.35
86377	Removal or repair of soft tissue not provided for in another item, including insertion of sutures, normal post-operative care and suture removal	243.55
86378	Surgical removal of foreign body, including insertion of sutures, normal post-operative care and suture removal	137.60
86379	Marsupialisation of cyst, including insertion of sutures, normal post-operative care and suture removal	293.20
<i>Subgroup 5 — Other surgical procedures</i>		
86381	Surgical exposure of unerupted tooth, including insertion of sutures, normal post-operative care and suture removal	314.00
86382	Surgical exposure and attachment of device for orthodontic traction, including insertion of sutures, normal post-operative care and suture removal	356.15
86384	Repositioning of displaced tooth, including insertion of sutures, normal post-operative care and suture removal — each tooth	229.75
86385	Surgical repositioning of unerupted tooth, including insertion of sutures, normal post-operative care and suture removal	356.15
86386	Splinting of displaced tooth, including insertion of sutures, normal post-operative care and suture removal — each tooth	239.55
86387	Replantation and splinting of a tooth, including insertion of sutures, normal post-operative care and suture removal	459.00
86388	Transplantation of tooth or tooth bud, including insertion of sutures, normal post-operative care and suture removal	517.10
86389	Surgery to isolate and preserve neurovascular tissue, including insertion of sutures, normal post-operative care and suture removal	169.85
86391	Frenectomy, including insertion of sutures, normal post-operative care and suture removal	212.35
86392	Incision and drainage of abscess or cyst, including insertion of sutures, normal post-operative care and suture removal	111.45
86393	Surgery involving the maxillary antrum, including insertion of sutures, normal post-operative care and suture removal	715.75
86394	Surgery for osteomyelitis, including insertion of sutures, normal post-operative care and suture removal	460.05
86395	Repair of nerve trunk, including insertion of sutures, normal post-operative care and suture removal	858.05
<b>Group B5 — Endodontics</b>		
<i>Subgroup 1 — Pulp and root canal treatments</i>		
86411	Direct pulp capping	41.75
86412	Incomplete endodontic therapy — inoperable or fractured	172.40



Item	Service	Fee (\$)
86414	Pulpotomy	79.60
86415	Complete chemo-mechanical preparation of root canal — first canal on a tooth	358.00
86416	Complete chemo-mechanical preparation of root canal — each additional canal on a tooth for which the service described in item 86415 has been performed	182.95
86417	Root canal obturation — first canal on a tooth	358.00
86418	Root canal obturation — each additional canal on a tooth for which the service described in item 86417 has been performed	182.95
86419	Extirpation of pulp or debridement of root canal or canals — emergency or palliative	149.50
<i>Subgroup 2 — Periradicular surgery</i>		
86431	Periapical curettage — each root	304.05
86432	Apicectomy, including curettage — each root	304.50
86433	Exploratory periradicular surgery (Item is subject to sections 13 and 20)	143.65
86434	Apical seal, including apicectomy and periapical curettage — each canal	473.65
86436	Sealing of perforation	281.90
86437	Surgical treatment and repair of an external root resorption — for each tooth	458.20
86438	Hemisection	338.30
<i>Subgroup 3 — Other endodontic services</i>		
86445	Exploration for a calcified root canal — each canal	127.25
86451	Removal of root filling — each canal	127.25
86452	Removal of cemented root canal post or post crown	119.30
86453	Removal of or bypassing fractured endodontic instrument	111.45
86455	Additional visit for irrigation or dressing, or irrigation and dressing of the root canal system — each tooth (Item is subject to section 21)	127.25
86457	Obturation of resorption defect or perforation, non-surgical	127.25
86458	Interim therapeutic root filling — each tooth (Item is subject to section 13)	143.20
<b>Group B6 — Restorative services</b>		
<i>Subgroup 1 — Metallic restorations — direct</i>		
86511	Metallic restoration, 1 surface — direct	94.20
86512	Metallic restoration, 2 surfaces — direct	115.45

Item	Service	Fee (\$)
86513	Metallic restoration, 3 surfaces — direct	137.70
86514	Metallic restoration, 4 surfaces — direct	157.00
86515	Metallic restoration, 5 surfaces — direct	179.25
<i>Subgroup 2 — Adhesive restorations — anterior teeth — direct</i>		
86521	Adhesive restoration, 1 surface, anterior tooth — direct (Item is subject to section 22)	104.30
86522	Adhesive restoration, 2 surfaces, anterior tooth — direct	126.55
86523	Adhesive restoration, 3 surfaces, anterior tooth — direct	149.85
86524	Adhesive restoration, 4 surfaces, anterior tooth — direct	173.15
86525	Adhesive restoration, 5 surfaces, anterior tooth — direct	242.05
<i>Subgroup 3 — Adhesive restorations — posterior teeth — direct</i>		
86531	Adhesive restoration, 1 surface, posterior tooth — direct (Item is subject to section 22)	111.40
86532	Adhesive restoration, 2 surfaces, posterior tooth — direct	139.75
86533	Adhesive restoration, 3 surfaces, posterior tooth — direct	168.10
86534	Adhesive restoration, 4 surfaces, posterior tooth — direct	189.40
86535	Adhesive restoration, 5 surfaces, posterior tooth — direct	283.45
<i>Subgroup 4 — Metallic restorations — indirect</i>		
86541	Metallic restoration, 1 surface — indirect	405.95
86542	Metallic restoration, 2 surfaces — indirect	536.45
86543	Metallic restoration, 3 surfaces — indirect	701.10
86544	Metallic restoration, 4 surfaces — indirect	819.15
86545	Metallic restoration, 5 surfaces — indirect	1 014.15
<i>Subgroup 5 — Tooth coloured restorations — indirect</i>		
86551	Tooth-coloured restoration, 1 surface — indirect	640.38
86552	Tooth-coloured restoration, 2 surfaces — indirect	717.05
86553	Tooth-coloured restoration, 3 surfaces — indirect	889.55
86554	Tooth-coloured restoration, 4 surfaces — indirect	956.65
86555	Tooth-coloured restoration, 5 surfaces — indirect	1 014.15
<i>Subgroup 6 — Other restorative services</i>		
86572	Provisional restoration — intermediate or temporary (Item is subject to sections 13 and 23)	44.00
86574	Metal band — the cementation of a metal band for diagnostic purposes, protective purposes or for the placement of a provisional (intermediate) restoration	37.10
86575	Pin retention — each pin	25.30

Item	Service	Fee (\$)
86576	Stainless steel crown	259.35
86577	Cusp capping — each cusp	27.35
86578	Restoration of an incisal corner — each corner	27.35
86595	Removal of inlay or onlay	127.25
86596	Recementing of inlay or onlay	71.50
86597	Post, direct — insertion of a post into a prepared root canal to provide an anchor for an artificial crown or other restoration	159.35
<b>Group B7 — Crown and bridge</b>		
<i>Subgroup 1 — Crowns</i>		
86613	Full crown, non metallic — indirect	1 436.75
86615	Full crown, veneered — indirect	1 578.60
86618	Full crown, metallic — indirect	1 275.90
86625	Core for crown including post — indirect	383.85
86627	Preliminary restoration for crown — direct	159.15
86629	Post and root cap — indirect	389.85
<i>Subgroup 2 — Temporary (provisional) crown and bridge</i>		
86631	Provisional crown	137.60
86632	Provisional bridge — each pontic	268.05
<i>Subgroup 3 — Bridges</i>		
86642	Bridge pontic, direct — each pontic	695.90
86643	Bridge pontic, indirect — each pontic	1 071.00
86644	Semi-fixed attachment	383.40
86645	Precision or magnetic attachment	378.15
86649	Retainer for bonded fixture, indirect — each tooth	394.70
<i>Subgroup 4 — Crown and bridge repairs and other services</i>		
86651	Recementing crown or veneer	105.95
86652	Recementing bridge or splint — each abutment	120.95
86653	Rebonding of bridge or splint if retreatment of bridge surface is required	113.00
86655	Removal of crown	71.65
86656	Removal of bridge or splint	167.05
86658	Repair of crown, bridge or splint, including labour and laboratory costs — indirect	422.20
86659	Repair of crown, bridge or splint — direct	307.05

Item	Service	Fee (\$)
<i>Subgroup 5 — Implant prostheses</i>		
86661	Fitting of implant abutment — each abutment	654.70
86663	Removal of implant	515.75
86664	Fitting of bar for denture — each abutment	777.10
86666	Prosthesis with metal frame attached to implants — each tooth	630.75
86669	Removal and reattachment of prosthesis fixed to implant or implants — each implant	203.00
86671	Full crown attached to osseointegrated implant, non metallic — indirect	1 436.75
86672	Full crown attached to osseointegrated implant, veneered — indirect	1 578.60
86673	Full crown attached to osseointegrated implant, metallic — indirect	1 275.90
86679	Surgical implant guide	347.75
86684	Insertion of first stage of 2-stage endosseous implant, including cost of hardware — each implant	1 353.70
86688	Insertion of 1-stage endosseous implant, including cost of hardware — each implant	1 479.80
86691	Second stage surgery of 2-stage endosseous implant, including hardware — each implant	501.10
<b>Group B8 — Prosthodontics</b>		
<i>Subgroup 1 — Denture and denture components</i>		
86711	Complete maxillary denture (Item is subject to section 12)	797.70
86712	Complete mandibular denture (Item subject to section 12)	797.70
86716	Metal palate or plate	285.20
86719	Complete maxillary and mandibular dentures (Item is subject to section 12)	1 364.10
86721	Partial maxillary denture — resin, base only (Item is subject to section 12)	383.80
86722	Partial mandibular denture — resin, base only (Item is subject to section 12)	383.80
86727	Partial maxillary denture, base only, consisting of cast metal framework and including provision of casting, clasps, retainers and occlusal rests (Item is subject to section 12)	1 145.90

Item	Service	Fee (\$)
86728	Partial mandibular denture, base only, consisting of cast metal framework including provision of casting, clasps, retainers and occlusal rests (Item is subject to section 12)	1 145.90
86731	Retainer — each tooth, if a service described in item 86721 or 86722 has been provided to the patient	39.80
86732	Occlusal rest — each rest, if a service described in item 86721 or 86722 has been provided to the patient	19.35
86733	Addition of tooth to the base of a new partial denture — each tooth (Item is subject to item 19)	41.10
86735	Precision or magnetic attachment	230.15
86736	Immediate tooth replacement — each tooth	8.20
86737	Resilient lining	170.80
86738	Wrought bar — joining sections of a partial prosthesis.	159.15
86739	Metal backing — an extension of the casting of a cast metal partial denture to provide a backing for the denture tooth — each backing	71.90
<i>Subgroup 2 — Denture maintenance</i>		
86741	Adjustment of a denture to improve comfort and function — not including a routine adjustment following the insertion of a new denture or maintenance or repair of an existing denture	47.15
86743	Relining, complete denture — processed	436.20
86744	Relining, partial denture — processed	339.25
86745	Remodelling, complete denture	557.90
86746	Remodelling, partial denture	458.20
86751	Relining, complete denture, chair-side only, hard or soft material — direct	203.00
86752	Relining, partial denture — direct	159.00
86753	Cleaning and polishing of pre-existing denture (Item is subject to section 13)	50.90
<i>Subgroup 3 — Denture repairs</i>		
86761	Reattaching pre-existing tooth or clasp to denture including labour and laboratory costs	130.20
86762	Replacing clasp on denture	136.05
86763	Repairing broken base of a complete denture including labour and laboratory costs	117.50
86764	Repairing broken base of a partial denture including labour and laboratory costs	130.20
86765	Replacing first tooth on denture	136.05

Item	Service	Fee (\$)
86767	Any repair or tooth replacement in addition to other repairs, alterations or modifications for the same denture on the same day, including labour and laboratory costs	53.80
86768	Adding tooth to partial denture to replace an extracted or decoronated tooth — each tooth	137.70
86769	Repair or addition to metal casting	164.70
<i>Subgroup 4 — Other prosthodontic services</i>		
86771	Tissue conditioning treatment before impressions (Item is subject to section 13)	62.50
86772	Splint, resin — indirect	338.30
86773	Splint, metal — indirect	338.30
86776	Impression if required for denture repair or modification	41.55
86777	Identification — marking a dental appliance with a patient's name or other form of enduring patient identification	33.25
<b>Group B9 — Orthodontics</b>		
<i>Subgroup 1 — Removable appliances</i>		
86811	Passive removable appliance — each arch	394.70
86821	Active removable appliance — each arch	717.05
86823	Functional orthopaedic appliance	563.65
<i>Subgroup 2 — Fixed appliances</i>		
86829	Partial banding — each arch	678.70
86831	Full arch banding — each arch	1 747.25
86862	Bonding of attachment for application of orthodontic force	146.60
<b>Group B10 — General services</b>		
<i>Subgroup 1 — Emergencies</i>		
86911	Palliative care — interim care to relieve pain, infection, bleeding or other problems not associated with other treatment	82.15
<i>Subgroup 2 — Drug therapy</i>		
86926	Individually made tray for the application of medicaments to the teeth or supporting tissues, other than for bleaching	143.20
86927	Supply, prescription or administration of medications and medicaments required for a service (Item is subject to section 13)	24.85
<i>Subgroup 3 — Anaesthesia and sedation</i>		
86949	Treatment under general anaesthesia, if the anaesthetic is administered by a specialist anaesthetist	150.20

Item	Service	Fee (\$)
<i>Subgroup 4 — Occlusal therapy</i>		
86963	Clinical occlusal analysis including muscle and joint palpation (Item is subject to section 13)	111.45
86964	Registration and mounting of casts for occlusal analysis (Item is subject to section 13)	84.50
86965	Occlusal splint	656.65
86966	Adjustment of pre-existing occlusal splint — each visit	83.00
86968	Occlusal adjustment following occlusal analysis — each visit	116.90
86971	Adjunctive physical therapy for temporomandibular joint and associated structures (Item is subject to section 13)	67.70
86972	Repair or addition — occlusal splint	199.20
<i>Subgroup 5 — Miscellaneous</i>		
86981	Splinting and stabilisation, direct — each tooth	111.45
86986	Post-operative care if not provided for in another item (Item is subject to section 13)	79.60

## Part 3 Services provided by eligible dental prosthetists

Item	Service	Fee (\$)
<b>Group C1 — Diagnostic services</b>		
<i>Subgroup 1 — Examinations and diagnostic services</i>		
87011	Initial denture examination, including: <ul style="list-style-type: none"> <li>(a) assessment of any existing dentures and any teeth, supporting tissues and oral tissues to construct a removable dental prosthesis or refer to an appropriate clinician; and</li> <li>(b) recording an appropriate medical history and any other relevant information</li> </ul> (Item is subject to section 14)	42.85
87014	Consultation for advice about or discussion of treatment options for a removable dental prosthesis, including the recording of an appropriate medical history and any other relevant information	34.55
87071	Diagnostic model — each model	49.05
<b>Group C2 — Prosthodontics</b>		
<i>Subgroup 1 — Dentures and denture components</i>		
87711	Complete maxillary denture (Item is subject to section 12)	724.50

Item	Service	Fee (\$)
87712	Complete mandibular denture (Item is subject to section 12)	724.50
87716	Metal palate or plate	285.20
87719	Complete maxillary and mandibular dentures (Item is subject to section 12)	1 234.25
87721	Partial maxillary denture — resin, base only (Item is subject to section 12)	342.65
87722	Partial mandibular denture — resin, base only (Item is subject to section 12)	342.65
87727	Partial maxillary denture, base only, consisting of cast metal framework and including provision of casting, clasps, retainers and occlusal rests (Item is subject to section 12)	1 067.70
87728	Partial mandibular denture, base only, consisting of cast metal framework and including provision of casting, clasps, retainers and occlusal rests. (Item is subject to section 12)	1 067.70
87731	Retainer — each tooth, if a service described in item 87721 or 87722 has been provided to the patient	35.80
87732	Occlusal rest — each rest, if a service described in item 87721 or 87722 has been provided to the patient	17.40
87733	Addition of tooth to the base of a new partial denture — each tooth (Item is subject to section 19)	37.15
87736	Immediate tooth replacement — each tooth	7.35
87737	Resilient lining	153.70
87738	Wrought bar — bar joining sections of a partial prosthesis	143.25
87739	Metal backing — extension of the casting of a cast metal partial denture to provide a backing for the denture tooth — each backing	64.70
<i>Subgroup 2 — Denture maintenance</i>		
87741	Adjustment of pre-existing denture to improve comfort and function — not including a routine adjustment following the insertion of a new denture or maintenance or repair of an existing denture	42.40
87743	Relining, complete denture — processed	270.65
87744	Relining, partial denture — processed	230.70
87745	Remodelling, complete denture	431.40
87746	Remodelling, partial denture	363.65
87751	Relining, complete denture, chair-side only, hard or soft material — direct	148.05



Item	Service	Fee (\$)
87752	Relining, partial denture — direct	124.80
87753	Cleaning and polishing of pre-existing denture (Item is subject to section 13)	34.45
<i>Subgroup 3 — Denture repairs</i>		
87761	Reattaching pre-existing tooth or clasp to denture including labour and laboratory costs	117.25
87762	Replacing clasp on denture	122.45
87763	Repairing broken base of a complete denture including labour and laboratory costs	105.70
87764	Repairing broken base of a partial denture including labour and laboratory costs	117.25
87765	Replacing first tooth on denture	122.45
87767	Any repair or tooth replacement in addition to other repairs, alterations or modifications for the same denture on the same day, including labour and laboratory costs	48.35
87768	Adding tooth to partial denture to replace an extracted or decoronated tooth — each tooth	123.90
87769	Repair or addition to metal casting	164.70
<i>Subgroup 4 — Other prosthodontic services</i>		
87771	Tissue conditioning treatment before impressions (Item is subject to section 13)	56.25
87776	Impression if required for denture repair	37.35
87777	Identification — marking a dental appliance with a patient's name or other form of enduring patient identification	29.95

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## Schedule 2      Specialties

(section 3)

Item	Specialty
1	dento-maxillofacial radiologist
2	endodontist
3	oral and maxillofacial surgeon
4	oral surgeon
5	orthodontist
6	pedodontist
7	periodontist
8	prosthodontist
9	specialist in oral medicine
10	specialist in oral pathology
11	specialist in oral pathology and oral medicine
12	specialist in special needs dentistry