

HealthPoint Claims

Dental Item Codes

Examination		
011	INITIAL CONSULT	Comprehensive oral examination
012	PERIODIC EXAM	Periodic oral examination
013	ORAL EXAM LIMITED	Oral Exam Limited
014	CONSULT/EXAM	Consultation, including examination
015	EXT CONS 30 MINS	Consultation – extended (30 minutes) – including examination
016	CONSULT BY REFER	Consultation by referral
017	CONSULT BY REFER EXT CONS 30 MINS	Consultation by referral – extended (30 minutes or more)
018	WRITTEN REPORT	Written report
019	LETTER OF REFERRAL	Letter of referral
Radiological Examination and Interpretation		
022	BITEWING XRAY 1 F	Intraoral periapical or bitewing radiograph – single film
025	INTRA OCCLUSN XRAY	Intraoral radiograph – occlusal, maxillary or mandibular – single film
026	CONE BEAM VOL TOMOGRAPHY	Cone Beam Volumetric Tomography – Scan Acquisition – per appointment
031	EXTRA MAX/MAN XRAY	Extraoral radiograph – occlusal, maxillary or mandibular – single film
033	SKULL XRAY 1 FILM	Lateral, antero-posterior, posterior-anterior or submentovertex radiograph of the skull – single film
035	TEMP MANDIBLE XRAY	Radiograph of temporomandibular joint – single film

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Radiological Examination and Interpretation

036	CEPHALOMETRIC XRAY	Cephalometric radiograph – lateral, antero-posterior, posterlo-anterior or submento-vertex
037	PANORAMIC XRAY	Panoramic radiograph
038	HANDWRIST XRAY	Hand-wrist radiograph for skeletal age assessment
039	SKULL TOMOGRAPHY	Tomography of the skull or parts thereof

Other Diagnostic Services

041	BACTERIOLOGICAL EXAM	Bacteriological examination
042	CULTURE EXAM+IDENT	Culture examination and identification
043	ANTIBIOTIC TEST	Antibiotic sensitivity test
044	COLLECT PATH LAB	Collection (non-invasive) of sample for pathological laboratory examination
047	SALIVA SCREEN TEST	Saliva screening test
048	BACTERIOLOGICAL SCREEN TEST	Bacteriological screening test
051	BIOPSY OF TISSUE	Biopsy of tissue
052	HISTOPATHOLOGICAL EXAM	Histopathological examination of tissue
053	CYTOLOGICAL EXAM	Cytological investigation
054	MUCOSAL SCREEN	Mucosal screening
055	BLOOD SAMPLE	Blood sample
056	HAEMATOLOGICAL EXAM	Haematological examination
059	CANCER SCREENING	Comprehensive Head and Neck Cancer examination and risk assessment

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Other Diagnostic Services		
061	PULP TEST	Pulp testing – per visit
071	DIAGNOSTIC CAST	Diagnostic model – per model
072	PHOTO RECORD INTRA	Photographic records – intraoral
073	PHOTO RECORD EXTRA	Photographic records - extraoral
074	DIAGNOSTIC WAX-UP	Diagnostic wax-up
075	DIAGNOSTIC MODELLING	Diagnostic Modelling
081	CEPHALO ANALYSIS	Cephalometric analysis – excluding radiographs
082	TOOTH-JAW SIZE	Tooth-jaw size prediction analysis
083	TOMOGRAPHIC ANALYSIS	Tomographic Analysis
085	ELECTROMYOGRAPHIC RECORDING	Electromyographic recording
086	ELECTROMYOGRAPHIC ANALYSIS	Electromyographic analysis
087	CONE BEAM VOL TOMOGRAPHY ANALYSIS	Cone Beam Volumetric Tomography analysis and/or interpretation – small field of view (less than one complete dental arch)
088	CONE BEAM VOL TOMOGRAPHY ANALYSIS	Cone Beam Volumetric Tomography analysis and/or interpretation – maxillary or mandibular dentition (single arch)
089	CONE BEAM VOL TOMOGRAPHY ANALYSIS	Cone Beam Volumetric Tomography analysis and/or interpretation – maxillary and mandibular dentition (both arches)
090	CONE BEAM VOL TOMOGRAPHY ANALYSIS	Cone Beam Volumetric Tomography analysis and/or interpretation – temporomandibular joints only
091	CONE BEAM VOL TOMOGRAPHY ANALYSIS	Cone Beam Volumetric Tomography analysis and/or interpretation – orofacial structures

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Dental Item Codes

Dental Prophylaxis and Bleaching		
111	REMOVAL OF PLAQUE	Removal of plaque and / or stain
113	RECONTOURING	Recontouring existing restorations
114	REMLV CALC/PLAQ 1	Removal of calculus – first visit
115	REMLV CALC/PLAQ 2	Removal of calculus – subsequent visit
116	ENAMEL	Enamel micro-abrasion – per tooth
117	BLEACH INT	Bleaching, internal – per tooth
118	BLEACH EXT	Bleaching, external – per tooth
119	SELF APPLY BLEACH	Bleaching, home application – per arch
Remineralisation Agents		
121	TOPICAL REMIN 1	Topical application of remineralisation and/or cariostatic agents, one treatment
122	TOPICAL REMIN 2	Topical application of remineralisation and/or cariostatic agents, home application – per arch
123	CONCENTRATED REMIN	Concentrated remineralisation and/or cariostatic agents, application – single tooth
Preventative Services – Other		
131	DIETARY ADVICE	Dietary advice
141	ORAL HYGIENE	Oral hygiene instruction
142	TOBACCO COUNSEL	Tobacco counselling
151	MOUTHGUARD	Provision of a mouthguard – indirect T

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Dental Item Codes

Preventative Services – Other		
153	BI-MAX MOUTHGUARD	Bi-maxillary mouthguard – indirect T
161	FISSURE SEALING	Fissure and/or tooth surface sealing – per tooth
165	DESENSITISING	Desensitising procedure – per visit
171	ODONTOPLASTY	Odontoplasty – per tooth
Periodontics		
213	ACUTE PERIODONTAL	Treatment of acute periodontal infection – per visit
221	PERIODONTAL ANALYSIS	Clinical periodontal analysis and recording
222	PERIODONTAL DEBRIDE	Periodontal Debridement – per tooth
223	NON SURGICAL TX OF PERI IMPLANT DISEASE	Non-surgical treatment of peri-implant disease – per implant
231	GINGIVECTOMY	Gingivectomy – per tooth or implant
232	PERIODONTAL FLAP SUR	Periodontal flap surgery – per tooth or implant
233	SURGICAL TX OF PERI IMPLANT DISEASE	Surgical treatment of peri-implant disease – per implant
234	APP OF BIO ACTIVE MATERIAL	Application of biologically active material
235	GINGIVAL GRAFT	Gingival graft – per tooth or implant
236	TISSUE REGENERATION	Guided tissue regeneration – per tooth or implant
237	TISSUE REGENERATION	Guided tissue regeneration – membrane removal
238	PERIODONTAL FLAP SUR	Periodontal flap surgery for crown lengthening – per tooth

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Dental Item Codes

Periodontics		
241	ROOT RESECTION	Root resection – per tooth
242	OSSEOUS SURGERY	Osseous surgery – per tooth or implant
246	MAX SINUS AUGMENT – TRANS ALVEOLAR	Maxillary sinus augmentation – Trans-alveolar technique – per sinus
247	MAX SINUS AUGMENT – LATERAL WALL	Maxillary sinus augmentation – Lateral wall approach – per sinus
Preventative Services – Other		
243	OSSEOUS GRAFT	Osseous graft – per tooth or implant
244	OSSEOUS GRAFT	Osseous graft – block
245	PERIODONTAL SURG	Periodontal surgery involving one tooth or implant
250	PERIODONTAL THERAPY	Active Non-Surgical Periodontal Therapy - per quadrant
251	SUPP PERIODONTAL THERAPY	Supportive Periodontal Therapy – per appointment
Oral surgery - Extractions		
311	REM PERMANENT TOOTH	Removal of a tooth or part(s) thereof
314	REM SECTIONAL	Sectional removal of a tooth or part(s) thereof
Surgical Extractions		
322	REM UNERUPTED 1	Surgical removal of a tooth or tooth fragment not requiring removal of bone or tooth division
323	REM UNERUPTED 2	Surgical removal of a tooth or tooth fragment requiring removal of bone
324	REM UNERUPTED 3	Surgical removal of a tooth or tooth fragment requiring both removal of bone and tooth division

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Dental Item Codes

Surgery for Prostheses		
331	ALVEOLECTOMY	Alveolectomy per segment
332	OSTEOTOMY	Osteotomy
337	RED FIBROUS TUBERO	Reduction of fibrous tuberosity
338	RED FLABBY RIDGE	Reduction of flabby ridge – per segment
341	REM HYPER TISSUE	Removal of hyperplastic tissue
343	REPOS MUSCLE ATTCH	Repositioning of muscle attachment
344	VESTIBULOPLASTY	Vestibuloplasty
345	SKIN or MUCOSAL GRAFT	Skin or mucosal graft
Treatment of Maxillofacial Injuries		
351	REP/SUBCUT TISS	Repair of skin and subcutaneous tissue or mucous membrane
352	FRAC MAX-NO SPLINT	Fracture of maxilla or mandible – not requiring splinting
353	FRAC MAX-WIRING	Fracture of maxilla or mandible – with wiring of teeth or intraoral fixation
354	FRAC MAX-EXTN FIX	Fracture of maxilla or mandible – with external fixation
355	FRACTURE OF ZYGOMA	Fracture of zygoma
359	FRAC OPEN REDUCTN	Fracture of the maxilla or mandible requiring open reduction
Dislocations		
361	MANDIBLE RELOCTN	Mandible – relocation following dislocation
363	DISLOCATN OPEN OP	Mandible – relocation requiring open operation
Osteotomies		
365	OSTEOTOMY MAXILLA	Osteotomy – maxilla
366	OSTEOTOMY MANDIBLE	Osteotomy - mandible

HealthPoint Claims

Dental Item Codes

General Surgery		
371	REM TUMOUR/CYST	Removal of tumour, cyst or scar – cutaneous, subcutaneous or in mucous membrane
373	REM TUMOUR MUSC	Removal of tumour, cyst or scar involving muscle, bone or other deep tissue
375	SURG SALIVARY DUCT	Surgery to salivary duct
376	SURG SALIVARY GLND	Surgery to salivary gland
377	REM/REP SOFT TISSUE	Removal or repair of soft tissue (not elsewhere defined)
378	SURG REM FORGN BDY	Surgical removal of foreign body
379	MARSUPIAL SATN CYST	Marsupialization of cyst
Other Surgical Procedures		
381	SURG EXP UNERUPTED	Surgery exposure of unerupted tooth
382	ORTHODONTIC TRACTN	Surgical exposure and attachment of device for orthodontic traction
384	REPOS DISP TOOTH	Repositioning of displaced tooth/teeth – per tooth
385	SURG REPOS UNERUPT	Surgical repositioning of unerupted tooth
386	REPOS/SPLINTING	Splinting of displaced tooth/teeth – per tooth
387	REPLANTATION TOOTH	Replantation and splinting of a tooth
388	TRANSPLANT TOOTH	Transplantation of tooth or tooth bud
389	SURG NEUROVASCULAR TISSUE	Surgery to isolate and preserve neurovascular tissue
391	FRENECTOMY	Frenectomy
392	DRAINAGE OF ABSCESS	Draining of abscess
393	SURG MAXIL ANTRUM	Surgery involving the maxillary antrum

HealthPoint Claims

Dental Item Codes

Other Surgical Procedures (Continued)

394	OSTEOMYELITIS	Surgery for osteomyelitis
395	REPAIR NERVE TRUNK	Repair of nerve trunk
399	CNTRL HAEMORRHAGE	Control of reactionary or secondary post-operative haemorrhage

Endodontics – Pulp and Root Canal Treatments

411	DIRECT PULP CAPPING	Direct pulp capping
412	INCOMP ENDOD THERAPY	Incomplete endodontic therapy (tooth not suitable for further treatment)
414	PULPOTOMY	Pulpotomy
415	ROOT CANAL PREP	Complete chemo-mechanical preparation of root canal – one canal
416	ROOT CANAL ADDL	Complete chemo-mechanical preparation of root canal – each additional canal
417	ROOT CANAL OBTURAT	Root canal obturation – one canal
418	OBTURATION ADDL	Root canal obturation – each additional canal
419	EXTIRPATION PULPRT	Extirpation of pulp or debridement of root canal(s) – emergency or palliative
421	RESORB ROOT CANAL	Resorbable root canal filling – primary tooth

Endodontics – Periradicular Surgery

431	ENDO-PERIAP CURETT	Periapical curettage – per root
432	ENDO-APICECTOMY/RT	Apicectomy – per root
433	EXPLOR PERIRAD SURG	Exploratory periradicular surgery
434	APICAL SEAL	Apical seal – per canal
436	SEAL PERFORATION	Sealing of perforation

HealthPoint Claims

Dental Item Codes

Endodontics – Periradicular Surgery (Continued)

437	REP EXT ROOT RESORP	Surgical treatment and repair of external root resorption – per tooth
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438	HEMISECTION	Hemisection of tooth
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Other Endodontic Services

445	EXPLORE CANAL	Exploration and/or negotiation of a calcified canal – per canal, per visit
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451	REM ROOT FILLING	Removal of root filling – per canal
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452	REM POST/POST CRWN	Removal of a cemented root canal post or post crown
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453	REM FRAC INSTRUMNT	Removal or bypassing fractured endodontic instrument
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455	IRRIGATE/DRESS CNL	Additional visit for irrigation and/or dressing of the root canal system – per tooth
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457	OBTURATE DFCT/PERF	Obturation of resorption defect or perforation (non-surgical)
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458	INTERIM ROOT FILL	Interim therapeutic root filling – per tooth
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Metallic Restorations - Direct

511	METAL REST ONE SURF	Metallic restoration – one surface – direct
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512	METAL REST TWO SURF	Metallic restoration – two surfaces – direct
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513	METAL REST THREE SURF	Metallic restoration – three surfaces – direct
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514	METAL REST FOUR SURF	Metallic restoration – four surfaces – direct
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515	METAL REST FIVE SERV	Metallic restoration – five surfaces - direct
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Dental Item Codes

Adhesive Restorations – Anterior Teeth - Direct

521	ADH REST ONE SURF	Adhesive restoration – one surface – anterior tooth – direct
522	ADH REST TWO SURF	Adhesive restoration – two surfaces – anterior tooth – direct
523	ADH REST THREE SURF	Adhesive restoration – three surfaces – anterior tooth – direct
524	ADH REST FOUR SURF	Adhesive restoration – four surfaces – anterior tooth – direct
525	ADH REST FIVE SURF	Adhesive restoration – five surfaces – anterior tooth - direct
526	ADH REST VENEER ANTERIOR TOOTH	Adhesive restoration – veneer – anterior tooth – direct

Adhesive Restorations – Posterior Teeth - Direct

531	ADH REST 1 POST	Adhesive restoration – one surface – posterior tooth – direct
532	ADH REST 2 POST	Adhesive restoration – two surfaces – posterior tooth – direct
533	ADH REST 3 POST	Adhesive restoration – three surfaces – posterior tooth – direct
534	ADH REST 4 POST	Adhesive restoration – four surfaces – posterior tooth – direct
535	ADH REST 5 POST	Adhesive restoration – five surfaces – posterior tooth - direct
536	ADH REST VENEER POSTERIOR TOOTH	Adhesive restoration – veneer – posterior tooth – direct

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Dental Item Codes

Metallic Restorations – Indirect

541	METAL REST 1 SURF	Metallic restoration – one surface – indirect
542	METAL REST 2 SURF	Metallic restoration – two surfaces – indirect
543	METAL REST 3 SURF	Metallic restoration – three surfaces – indirect
544	METAL REST 4 SURF	Metallic restoration – four surfaces – indirect
545	METAL REST 5 SURF	Metallic restoration – five surfaces - indirect

Tooth-coloured Restorations - Indirect

551	TOOTH COL REST 1 SURF	Tooth-coloured restoration – one surface – indirect
552	TOOTH COL REST 2 SURF	Tooth-coloured restoration – two surfaces – indirect
553	TOOTH COL REST 3 SURF	Tooth-coloured restoration – three surfaces – indirect
554	TOOTH COL REST 4 SURF	Tooth-coloured restoration – four surfaces – indirect
555	TOOTH COL REST 5 SURF	Tooth-coloured restoration – five surfaces - indirect
556	TOOTH COL REST VENEER INDIRECT	Tooth-coloured restoration – veneer – indirect

Other Restorative Services

571	ADAPTION NEW RESTORATION	Adaptation of new restoration to existing removable prosthesis – per tooth
572	PROV TEMP REST	Provisional (intermediate/temporary) restoration – per tooth
574	METAL BAND	Metal Band
575	PIN RETENTION	Pin retention – per pin
577	CUSP CAPPING	Cusp capping – per cusp
578	REST INCISAL CNR	Restoration of an incisal corner – per corner

HealthPoint Claims

Dental Item Codes

Other Restorative Services (Continued)		
579	BOND TOOTH FRAG	Bonding of tooth fragment
586	CROWN METALLIC WITH TOOTH PREP	Crown – metallic – with tooth preparation – preformed
587	CROWN METALLIC MINIMAL PREP	Crown – metallic – minimal tooth preparation – preformed
588	CROWN TOOTH COLOUR	Crown – tooth-coloured – preformed
595	REM INDIRECT REST	Removal of indirect restoration
596	RECEMENT IND REST	Recementing of indirect restoration
597	POST - DIRECT	Post - direct
Prosthodontics - Crowns		
611	FULL ACRY INDIRECT	Full crown – acrylic resin – indirect
613	FULL NON-METAL INDIRECT	Full crown – non-metallic – indirect
615	FULL VENEERED INDIRECT	Full crown – veneered – indirect
618	FULL METALLIC INDIRECT	Full crown – metallic – indirect
625	POST AND CORE INDIRECT	Post and core for crown – indirect
627	PRELIM REST DIRECT	Preliminary restoration for crown – direct
629	POST ROOT CAP INDIRECT	Post and root cap - indirect

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Dental Item Codes

Prosthodontics – Provisional Crown and Bridge

631	PROV CROWN	Provisional crown – per tooth
632	PROV BRIDGE PONTIC	Provisional bridge pontic – per pontic
633	PROV IMPLANT ABUT	Provisional implant abutment – per abutment
634	PROV IMPLANT REST	Provisional implant restoration – per implant abutment

Prosthodontics - Bridges

642	BRIDGE PONTIC DIRECT	Bridge pontic – direct – per pontic
643	BRIDGE PONTIC INDIRECT	Bridge pontic – indirect – per pontic
644	SEMI-FIX ATTACH	Semi-fixed attachment
645	PREC OR MAG ATTACH	Precision or magnetic attachment
649	RET BOND FIX INDIRECT	Retainer for bonded fixture – indirect – per tooth

Prosthodontics – Crown and Bridge Repairs and Other Services

651	RECEMENT CRWN OR VENEER	Recementing crown or veneer
652	RECEMENT BRIDGE OR SPLINT	Recementing bridge or splint – per abutment
653	REBOND BRIDGE OR SPLINT	Rebonding of bridge or splint where retreatment of bridge surface is required
655	REMOVE CROWN	Removal of crown
656	REMOVE BRIDGE OR SPLINT	Removal of bridge or splint
658	REP CRWN BRID OR SPL INDIRECT	Repair of crown, bridge or splint – indirect
659	REP CRWN BRID OR SPL DIRECT	Repair of crown, bridge or splint - direct

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Dental Item Codes

Prosthodontics – Procedures for Implant Prostheses		
661	FIT IMPLANT ABUT	Fitting of implant abutment – per abutment
663	REM IMPANT/RET DEV	Removal of implant and/or retention device
664	FIT DENTURE BAR	Fitting of bar for denture – per abutment
665	PROS RESIN BASE ATTCH IMPLANTS	Prosthesis with resin base attached to implants – removable – per arch
666	PROS METAL ATTCH IMPLANTS	Prosthesis with metal frame attached to implants – fixed – per arch
667	PROS METAL ATTCH IMPLANTS REM	Prosthesis with metal frame attached to implants – removable – per arch
668	FIX/ABUT SCREW REM/REPL	Fixture or abutment screw removal and replacement
669	REM PROS IMPLANTS	Removal and reattachment of prosthesis fixed to implant(s) – per implant
671	FULL CRWN NON METAL INDIRECT	Full crown attached to osseointegrated implant – non metallic – indirect
672	FULL CRWN VENEER INDIRECT	Full crown attached to osseointegrated implant – veneered – indirect
673	FULL CRWN METAL INDIRECT	Full crown attached to osseointegrated implant – metallic – indirect
678	DIAGNOSTIC TEMPLATE	Diagnostic template
679	SURG IMPLANT GUIDE	Surgical implant guide
684	INS ONE OF TWO STAGE ENDOSS IMPLANT	Insertion of first stage of two-stage endosseous implant – per implant
688	INS ONE STAGE ENDOSS IMPLANT	Insertion of one-stage endosseous implant – per implant
689	PROVISIONAL IMPLANT	Provisional implant
690	PROV RET DEVICE	Provisional retention device

HealthPoint Claims

Dental Item Codes

Prosthodontics – Procedures for Implant Prostheses (Continued)

691	STAGE TWO SURG ENDOSS IMPLANT	Second stage surgery of two-stage endosseous implant – per implant
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Prosthodontics – Dentures and Denture Components

711	COMP MAX DENT	Complete maxillary denture
712	COMP MAND DENT	Complete mandibular denture
713	PROV COMP MAXILLARY DENTURE	Provisional complete maxillary denture
714	PROV COMPLETE MANDIBULAR DENTURE	Provisional complete mandibular denture
715	PROV COMP MAX AND MAN DENTURE	Provisional complete maxillary and mandibular dentures
716	METAL PALATE OR PLATE	Metal palate or plate
719	COMP MAX/MAND	Complete maxillary and mandibular dentures
721	PART MAX DENT RESIN	Partial maxillary denture – resin base
722	PART MAND DENT RESIN	Partial mandibular denture – resin base
723	PROV PART MAXILLARY DENTURE	Provisional partial maxillary denture
724	PROV PART MANDIBULAR DENTURE	Provisional partial mandibular denture
727	PART MAX DENT METAL	Partial maxillary denture – cast metal framework
728	PART MAND DENT METAL	Partial mandibular denture – cast metal framework
730	DVA USE ONLY	A code number for Department of Veterans' Affairs use only

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Dental Item Codes

Prosthodontics – Dentures and Denture Components

731	RETAINER	Retainer – per tooth
732	OCCLUSAL REST	Occlusal rest – per rest
733	PART DENTURE	Tooth/teeth (partial denture)

Prosthodontics – Dentures and Denture Components

734	OVERLAYS	Overlays – per tooth
735	PREC / MAG DENT ATTCH	Precision or magnetic denture attachment
736	IMMEDIATE TOOTH REPL	Immediate tooth replacement – per tooth
737	RESILIENT LINING	Resilient lining
738	WROUGHT BAR	Wrought bar
739	METAL BACKING	Metal Backing

Prosthodontics – Denture Maintenance

741	ADJUST DENTURE	Adjustment of a denture
743	RELINING COMP DENT PROC	Relining – complete denture – processed
744	RELINING PART DENT PROC	Relining – partial denture – processed
745	REMODEL COMP DENT	Remodelling – complete denture
746	REMODEL PART DENT	Remodelling – partial denture
751	RELINING COMP DENT DIRECT	Relining – complete denture – direct
752	RELINING PART DENT DIRECT	Relining – partial denture – direct
753	CLEAN AND POLISH	Cleaning and polishing of pre-existing denture
754	DENT BASE MODIFY	Denture base modification

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Dental Item Codes

Prosthodontics – Denture Repairs		
761	REATTACH TOOTH/CLP	Reattaching pre-existing clasp to denture
762	REPLACE/ADD CLASP	Replacing/adding clasp to denture – per clasp
763	REPAIR BASE COMP DENT	Repairing broken base of a complete denture
764	REPAIR BASE PART DENT	Repairing broken base of a partial denture
765	REPL TOOTH COMPL	Replacing/adding new tooth on denture – per tooth
766	REATTACH EXIST TOOTH	Reattaching existing tooth on denture – per tooth
768	ADD TOOTH PARTIAL	Adding tooth to partial denture to replace an extracted or decoronated tooth – per tooth
769	REP/ADD TO METAL CAST	Repair or addition to metal casting
Prosthodontics – Other Prosthodontic Services		
771	TISSUE CONDITIONING	Tissue conditioning preparatory to impressions – per application
772	SPLINT RESIN INDIRECT	Splint – resin – indirect
773	SPLINT METAL INDIRECT	Splint – metal – indirect
774	OBTURATOR	Obturator
775	CHARACTER DENT BASE	Characterisation of denture base
776	IMPRESS DENT REP/MOD	Impression – denture repair/modification
777	IDENTIFICATION	Identification
778	INLAY DENTURE TOOTH	Inlay for denture tooth
779	SURG GUIDE IMMED DENT	Surgical guide for an immediate denture

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Dental Item Codes

Orthodontics – Removable Appliances

811	PASS REM APPLIANCE	Passive removable appliance – per arch
821	ACTIVE REM APPLIANCE	Active removable appliance – per arch
823	FUNCT ORTHO APPLIANCE	Functional orthopaedic appliance
824	FUNCT ORTH APPLIANCE PREFAB	Functional orthopaedic appliance – prefabricated
825	SEQ PLASTIC ALIGNERS	Sequential plastic aligners – per arch

Orthodontics – Fixed Appliances

829	PARTIAL BANDING	Partial banding – per arch
831	FULL ARCH BANDING	Full arch banding – per arch
833	REMOVE BANDING	Removal of banding – per arch
841	FIX PALATAL/LINGUAL	Fixed palatal or lingual arch appliance
842	PART BAND ELAST	Partial banding for inter-maxillary elastics (cross elastics)
843	MAXILLARY EXP APPL	Maxillary expansion appliance

Orthodontics – Fixed Appliances

845	PASSIVE FIX APPL	Passive fixed appliance
846	MINOR TOOTH GUIDE	Minor tooth guidance - fixed

Orthodontics – Extraoral Appliances

851	EXTRAORAL APPLIANCE	Extraoral appliance
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Orthodontics - Attachments

862	BONDING ATTACHMENT	Bonding of attachment for application of orthodontic force
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Orthodontics – Other Orthodontic Services

871	ORTHODONTIC ADJUST	Orthodontic adjustment
872	REATTACH PASSIVE APP	Re-attachment of passive appliance – fixed
873	REPAIR PASSIVE APP	Repair of passive appliance – fixed
874	REMOVAL PASS APP	Removal of passive appliance – fixed
875	REP REM APP RESIN	Repair of removable appliance – resin base
876	REP REM APP CLASP	Repair of removable appliance – clasp, spring or tooth
877	ADD TO REM APP CLASP	Addition to removable appliance – clasp, spring or tooth
878	RELINING REM APP PROC	Relining – removable appliance - processed

Orthodontics – Complete Course of Orthodontic Treatment

881	COM CRSE ORTH TREAT	Complete course of orthodontic treatment
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General Services - Emergencies

911	PALLIATIVE CARE	Palliative care
915	AFTER HRS CALLOUT	After-hours callout
916	TRAVEL	Travel to provide services

General Services – Drug Therapy

926	INDIV MADE TRAY	Individually made tray – medicament(s)
927	PROV MEDICATN	Provision of medication/medicament
928	INTRA CANNULATION	Intravenous cannulation and establishment of infusion

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Dental Item Codes

General Services – Anaesthesia, Sedation and Relaxation Therapy

941	LOCAL ANAESTHESIA	Local anaesthesia
942	SEDATION IV	Sedation – intravenous – per 30 minutes or part thereof
943	SEDATION INHALATION	Sedation – inhalation – per 30 minutes or part thereof
944	RELAX THERAPY	Relaxation therapy
945	LOW LEVEL LASER	Low level laser therapy – per appointment
948	DENTAL ACUPUNCTURE	Dental acupuncture – per appointment
949	GEN ANAESTHESIA/SED	Treatment under general anaesthesia/sedation

General Services – Occlusal Therapy

961	MINOR OCCLUS ADJ	Minor occlusal adjustment – per visit
963	CLINICAL OCCLUSAL	Clinical occlusal analysis including muscle and joint palpation
964	REGN CAST OCCLUS	Registration and mounting of models for occlusal analysis
965	OCCLUSAL SPLINT	Occlusal splint
966	ADJ OCCLUS SPLINT	Adjustment of pre-existing occlusal splint – per visit
967	PANTOGRAPH TRACE	Pantographic tracing
968	OCCLUSAL ADJ	Occlusal adjustment following occlusal analysis – per visit
971	ADJUNCT PHYS THER	Adjunctive physical therapy for temporomandibular joint and associated structures
972	REP/ADJ OCCLUSAL SPL	Repair/addition – occlusal splint

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Dental Item Codes

Miscellaneous		
981	SPLINT STABILISE DIR	Splinting and stabilisation – direct – per tooth
982	ENAMEL STRIPPING	Enamel stripping – per visit
983	SING ARCH ORAL APPL	Single arch oral appliance for diagnosed snoring and obstructive snoring and sleep apnoea
984	BI-MAX ORAL APPL	Bi-maxillary oral appliance for diagnosed snoring and obstructive snoring and sleep apnoea
985	REPAIR / ADD SNORING OR SLEEP APNOEA DEVICE	Repair/addition – snoring or sleep apnoea device
986	POST-OP CARE	Post-operative care not otherwise included
987	RECONTOUR TISSUE	Recontour tissue – per appointment
990	TREATMENT NOT INCL	Treatment not otherwise included (specify)
999	GST	GST