

# HealthPoint Claims

## Dental Item Codes

Examinations		
011	COMPREHE ORAL EXAM	Comprehensive oral examination
012	PERIODIC ORAL EXAM	Periodic oral examination
013	ORAL EXAM - LIMITED	Oral Exam Limited
014	CONSULTATION	Consultation
015	CONSULT – EXT 30M	Consultation – extended (30 minutes or more)
016	CONSULT - REFERRAL	Consultation by referral
017	CONSULT(R) EXT 30M	Consultation by referral – extended (30 minutes or more)
018	WRITTEN REPORT	Written report (not elsewhere included)
019	REFERRAL	Referral
Radiological Examination, Analysis and Interpretation		
022	INTRAORAL PERIL OR	Intraoral radiograph – per exposure
026	CONE BEAM VOL TOMOG	Cone Beam Volumetric Tomography – Scan Acquisition – per appointment
031	EXTRA MAX/MAN XRAY	Extraoral radiograph – maxillary, mandibular – per exposure
033	SKULL XRAY 1 FILM	Lateral, antero-posterior, postero-anterior or submento-vertex radiograph of the skull – per exposure
035	RADIOGRAPH TEMP JT	Radiograph of temporomandibular joint – per exposure
036	CEPHALOMETRIC XRAY	Cephalometric radiograph – lateral, antero-posterior, postero-anterior or submento-vertex – per exposure

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Radiological Examination and Interpretation		
037	PANORAMIC XRAY	Panoramic radiograph – per exposure
038	HANDWRIST XRAY SAA	Hand-wrist radiograph for skeletal age assessment
039	TOMOGRAPHY SKULL	Computed Tomography of the skull or parts thereof
Other Diagnostic Services		
041	BAC EXAM	Bacteriological examination
042	CULTURE EXAM ID	Culture examination and identification
043	AB SENS TEST	Antibiotic sensitivity test
044	SPECI COLLECT	Collection of specimen for pathology examination
047	SALIVA SCREEN	Saliva screening test
048	MB SCREEN	Microbiological screening test
051	BIOPSY OF TISSUE	Biopsy of tissue
052	HISTOPATH EXAM	Histopathological examination of tissue
053	CYTO INVEST	Cytological investigation
055	BLOOD COLLECT	Blood collection
056	HAEM EXAM	Haematological examination
057	BIO ACT COMP BLD	Procedures to derive biologically active components from a collection of blood
059	HEAD/NECK CANCER SCREEN	Comprehensive Head and Neck Cancer examination and risk assessment

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Other Diagnostic Services		
061	PULP TESTING - PA	Pulp testing – per appointment
071	DIAGNOSTIC MODEL	Diagnostic model – per model
072	PHOTO RECORD - INT	Photographic records – intraoral – per appointment
073	PHOTO RECORD - EXT	Photographic records – extraoral – per appointment
074	DIAGNOSTIC WAX-UP	Diagnostic Modelling – physical – per tooth
075	DIAGNOSTIC MODELLING	Diagnostic Modelling – digital – per tooth
081	CEPHALO ANALYSIS	Cephalometric analysis – excluding radiographs
082	TOOTH-JAW SIZE	Tooth-jaw size prediction analysis
083	TOMOG ANALYSIS	Tomographic Analysis
087	CONE BEAM ANALYSIS SML	Cone Beam Volumetric Tomography analysis and/or interpretation – small field of view (less than one complete dental arch)
088	CONE BEAM ANA MAX/MAN SING	Cone Beam Volumetric Tomography analysis and/or interpretation – maxillary or mandibular dentition (single arch)
089	CONE BEAM ANA MAX/MAN BOTH	Cone Beam Volumetric Tomography analysis and/or interpretation – maxillary and mandibular dentition (both arches)
090	CONE BEAM ANALYSIS TMJ	Cone Beam Volumetric Tomography analysis and/or interpretation – temporomandibular joints only
091	CONE BEAM ANALYSIS OROFACIAL	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	RECONTOUR REST PE PA	Recontouring and polishing of pre-existing restoration(s) – per tooth
114	REMLV CALC/1ST VIS	Removal of calculus – first appointment
115	REMLV CALC/SUB VIS	Removal of calculus – subsequent appointment
116	ENAM MICRO ABR PER TOOTH	Enamel micro-abrasion – per tooth
117	BLEACH INT PER APP	Bleaching, internal – per application
118	BLEACH EXT PER TOOTH	Bleaching, external – per tooth
119	BLEACHING HOME APP	Bleaching, home application
Remineralisation Agents		
121	TOPICAL APP OF REM	Topical application of remineralisation agents, one treatment
122	TOPICAL REMIN PER ARCH	Topical remineralisation agents, home application – per arch
123	CONC REMIN AGENT	Application of a cariostatic agent – per tooth
Preventative Services – Other		
131	DIET ANA/ADVICE	Dietary analysis and advice
141	ORAL HYG INSTRUCT	Oral hygiene instruction
142	TOBACCO COUNSELLING	Tobacco counselling
151	PROVIDE MOUTHG	Provision of a mouthguard – indirect

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## Dental Item Codes

### Preventative Services – Other

153	BIMAX MOUTHGRD IN	Bi-maxillary mouthguard – indirect T\
161	FISSURE SEALING	Fissure and/or tooth surface sealing – per tooth
163	RESIN INFIL PER TOOTH	Resin Infiltration - per tooth
165	DESENS PROC PA	Desensitising procedure – per appointment
171	ODONTOPLASTY PER TOOTH	Odontoplasty – per tooth

### Periodontics

213	ACUTE PERIODONTAL	Treatment of acute periodontal infection – per appointment
221	PERIODONTAL ANALY	Clinical periodontal analysis and recording
222	PERI DEBRIDMENT	Periodontal Debridement – per tooth
223	NS TX PERI IMP DISEASE	Non-surgical treatment of peri-implant disease – per implant
231	GINGIVECTOMY	Gingivectomy – per tooth
232	PERIODNTL FLAP	Periodontal flap surgery – per tooth
233	SURG TX PERI IMP DISEASE	Surgical treatment of peri-implant disease – per implant
234	APP BIO ACTIVE	Application of biologically active material
235	GINGIVAL GRAFT	Gingival graft – per tooth, implant or extraction socket
236	TISSUE REGEN IMPLA	Guided tissue regeneration – per tooth or implant
237	TISS REG MEMBR REM	Guided tissue regeneration – membrane removal
238	PERIO FLAP 4 CROWN	Periodontal surgery for crown lengthening – per tooth

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### Periodontics

241	ROOT RESECTION	Root resection – per tooth
242	OSSEOUS SURGERY	Osseous surgery – per tooth or implant
246	MAX SINUS AUG TA	Maxillary sinus augmentation – Trans-alveolar technique – per sinus
247	MAX SINUS AUG LA	Maxillary sinus augmentation – Lateral wall approach – per sinus

### Preventative Services – Other

243	OSSEOUS GRAFT	Osseous graft – per tooth or implant
244	OSSEOUS GFT BLOCK	Osseous graft – block
245	PERIODONTAL SURG	Periodontal surgery involving one
250	NONSURG PERIO THERAPY	Active Non-Surgical Periodontal Therapy - per quadrant
251	SUPP PERIO THERAPY	Supportive Periodontal Therapy – per appointment

### Oral surgery - Extractions

311	REM PERMANENT TOOTH	Removal of a tooth or part(s) thereof
314	EMOVE TOOTH FRAG	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
324	REM UNERUPTED 3	Surgical removal of a tooth or tooth fragment requiring bone removal and/or tooth division

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## Dental Item Codes

### Surgery for Prostheses

331	ALVEOLOPLASTY	Alveoloplasty - per segment
332	OSTEOTOMY PER JAW	Osteotomy – per jaw
337	REDUC FIBRO TUBERO	Reduction of fibrous tuberosity
338	REDUC FLABBY RIDGE	Reduction of flabby ridge – per segment
341	REMOV HYPER TISSUE	Removal of hyperplastic tissue
343	REPOS MUSCLE ATTACH	Repositioning of muscle attachment
344	VESTIBULOPLASTY	Vestibuloplasty
345	SKIN/MUCOSAL GRAFT	Skin or mucosal graft

### Treatment of Maxillofacial Injuries

351	R/O SKIN SUBCUT OR MUMEM	Repair of skin and subcutaneous tissue or mucous membrane
352	FRAC MAX/MAND NRF	Fracture of maxilla or mandible – not requiring fixation
353	FRAC MAX/MAND WIRE IO FIX	Fracture of maxilla or mandible – with wiring of teeth or intraoral fixation
354	FRAC MAX/MAND EXT FIX	Fracture of maxilla or mandible – with external fixation
355	FRAC ZYGOMA	Fracture of zygoma
359	FRAC MAX/MAND OPEN RED	Fracture of the maxilla or mandible requiring open reduction

### Dislocations

361	MAND RELOC POST DISLOC	Mandible – relocation following dislocation
363	MAND RELOC OPEN OP	Mandible – relocation requiring open operation

### Osteotomies

365	OSTEOTOMY MAX	Osteotomy – maxilla
366	OSTEOTOMY MAND	Osteotomy - mandible

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## Dental Item Codes

### General Surgery

371	REM TUMOUR/CYST 1	Removal of tumour, cyst or scar – cutaneous, subcutaneous or in mucous membrane
373	REM TUMOUR/CYST 2	Removal of tumour, cyst or scar involving muscle, bone or other deep tissue
375	SURG SALVIA DUCT	Surgery to salivary duct
376	SURG SALVIA GLAND	Surgery to salivary gland
377	REM/REP SOFT TISSU	Repair of soft tissue
378	SURG REM FOREIGN	Surgical removal of foreign body
379	MARSUPIALIS CYST	Marsupialisation of cyst

### Other Surgical Procedures

381	SURG EXP UNERUPTED	Surgery exposure of an unerupted tooth – per tooth
382	SURG EXP TRACTION	Surgical exposure and attachment of device for orthodontic traction
384	REPOS DISPL TOOTH	Repositioning of displaced tooth/teeth – per tooth
385	SURG RPOS UNERP TOOTH	Surgical repositioning of an unerupted tooth – per tooth
386	SPLINTING OF DISPL	Splinting of displaced tooth/teeth – per displaced tooth
387	REPLA/SPLINT TOOTH	Replantation and splinting of a tooth – per avulsed or intentionally removed tooth
388	TRANS TOOTH OR TOOTH BUD	Transplantation of tooth or tooth bud
389	SURGRY NEUROVAS TI	Surgery to isolate and preserve neurovascular tissue
391	FRENECTOMY	Surgical intervention of a frenum
392	DRAINAGE OF ABSCESS	Draining of abscess
393	SURG MAX ANTRUM	Surgery involving the maxillary antrum

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## Dental Item Codes

### Other Surgical Procedures (Continued)

394	OSTEOMYELITIS SURG	Surgery for osteomyelitis
395	R/O NERVE TRUNK	Repair of nerve trunk
399	INSERTION SUTURE	Control of reactionary or secondary post-operative haemorrhage

### Endodontics – Pulp and Root Canal Treatments

411	DIRECT PULP CAP	Direct pulp capping
412	INCOMP. ENDODONTIC	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 PREP>1	Complete chemo-mechanical preparation of root canal – each additional canal
417	1 ROOT CANAL OBTUR	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)
421	RESORB CANAL FILL	Resorbable root canal filling – primary tooth

### Endodontics – Periradicular Surgery

431	PERIAPICAL CURETTA	Periapical curettage – per root
432	APICECTOMY/ROOT	Apicectomy – per root
433	EXPLOR PERIR SURG	Exploratory periradicular surgery
434	APICAL SEAL - PER CANAL	Apical seal – per canal
436	PERF SEALING	Sealing of perforation

# HealthPoint Claims

## Dental Item Codes

### Endodontics – Periradicular Surgery (Continued)

437	SRG TREAT ROOT RES	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	E/O CALCI CANAL PA	Exploration and/or negotiation of a calcified canal – per canal, per appointment
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451	R/O ROOTH FILL PER CANAL	Removal of root filling – per canal
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452	REM CMNTD ROOT CNL	Removal of a cemented root canal post or post crown
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453	R/O BYPASS FRAC ENDO INS	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	OBTUR RESORP PERF	Obturation of resorption defect or perforation (non-surgical)
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459	GUIDE ENDO REPAIR PT	Guided endodontic repair – per tooth
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### Metallic Restorations - Direct

511	METALLIC RESTOR 1	Metallic restoration – one surface – direct
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512	METALLIC RESTOR 2	Metallic restoration – two surfaces – direct
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513	METALLIC RESTOR 3	Metallic restoration – three surfaces – direct
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514	METALLIC RESTOR 4	Metallic restoration – four surfaces – direct
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515	METALLIC RESTOR 5	Metallic restoration – five surfaces - direct
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## Dental Item Codes

Adhesive Restorations – Anterior Teeth - Direct		
521	ADH REST 1 SURFACE	Adhesive restoration – one surface – anterior tooth – direct
522	ADH REST 2 SURFACE	Adhesive restoration – two surfaces – anterior tooth – direct
523	ADH REST 3 SURFACE	Adhesive restoration – three surfaces – anterior tooth – direct
524	ADH REST 4 SURFACE	Adhesive restoration – four surfaces – anterior tooth – direct
525	ADH REST 5 SURFACE	Adhesive restoration – five surfaces – anterior tooth - direct
526	VENEER ADH REST ANT DIR	Adhesive restoration – veneer – anterior tooth – direct
Adhesive Restorations – Posterior Teeth – Direct		
531	ADH REST 1 SURFACE	Adhesive restoration – one surface – posterior tooth – direct
532	ADH REST 2 SURFACE	Adhesive restoration – two surfaces – posterior tooth – direct
533	ADH REST 3 SURFACE	Adhesive restoration – three surfaces – posterior tooth – direct
534	ADH REST 4 SURFACE	Adhesive restoration – four surfaces – posterior tooth – direct
535	METALLIC RESTOR 5	Adhesive restoration – five surfaces – posterior tooth - direct
536	VENEER ADH REST POS DIR	Adhesive restoration – veneer – posterior tooth – direct

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## Dental Item Codes

Metallic Restorations – Indirect		
541	METAL RESTOR 1 SUR	Metallic restoration – one surface – indirect
542	METAL RESTOR 2 SUR	Metallic restoration – two surfaces – indirect
543	METAL RESTOR 3 SUR	Metallic restoration – three surfaces – indirect
544	METAL RESTOR 4 SUR	Metallic restoration – four surfaces – indirect
545	METAL RESTOR 5 SUR	Metallic restoration – five surfaces - indirect
Tooth-coloured Restorations - Indirect		
551	TOOTH-COL REST 1 S	Tooth-coloured restoration – one surface – indirect
552	TOOTH-COL REST 2 S	Tooth-coloured restoration – two surfaces – indirect
553	TOOTH-COL REST 3 S	Tooth-coloured restoration – three surfaces – indirect
554	TOOTH-COL REST 4 S	Tooth-coloured restoration – four surfaces – indirect
555	TOOTH-COL REST 5 S	Tooth-coloured restoration – five surfaces - indirect
556	VENEER TOOTH COL-INDIR	Tooth-coloured restoration – veneer – indirect
Other Restorative Services		
571	ADP NEW REST PROS	Adaptation of new restoration to existing removable prosthesis – per tooth
572	PROVISIONAL RESTOR	Provisional/interim restoration – per tooth
574	METAL BAND	Metal Band
575	PIN RETENTION/PIN	Pin retention – per pin
577	CUSP CAPPING - PER	Cusp capping – per cusp
578	RESTOR OF AN INCIS	Restoration of an incisal corner – per corner

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## Dental Item Codes

Other Restorative Services (Continued)		
579	BOND TOOTH FRAGMT	Bonding of tooth fragment
586	METALLIC CROWN	Performed full crown – metallic – significant tooth preparation
587	METALLIC CROWN MIN PREP	Performed full crown – metallic – minimal tooth preparation
588	CROWN TOOTH COL	Performed full crown - tooth coloured
595	REMOVE IN/ONLAY	Removal of indirect restoration
596	RECEMENT IN/ONLAY	Recementing of indirect restoration
597	POST-DIRECT	Post – direct
598	RESTORE ROOT CAP DIRECT	Restoration root capping - direct
Prosthodontics - Crowns		
611	CRWN ACRY/RESIN IN	Full crown – polymeric material – indirect
613	FULL CRWN NONMETAL	Full crown – ceramic – indirect
615	FULL CRWN VENEERED	Full crown – veneered – indirect
618	FULL CRWN METAL IN	Full crown – metallic – indirect
625	CORE-CRWN INC POST	Post and core for crown – indirect
627	PREL REST CRWN - D	Preliminary restoration for crown – direct
629	POST+ROOT CAP IN	Post and root cap - indirect

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## Dental Item Codes

### Prosthodontics – Provisional Crown and Bridge

631	TEMP (PROV) CROWN	Provisional crown – per tooth
632	TEMP (PROV) BRIDGE	Provisional bridge pontic – per pontic
633	PROV IMPANT ABUT	Provisional implant abutment – per abutment
634	PROV IMP RESTORE	Provisional implant restoration – per implant abutment

### Prosthodontics - Bridges

642	BRIDGE PONTIC -DIR	Bridge pontic – direct – per pontic
643	BRIDGE PONTIC - IN	Bridge pontic – indirect – per pontic
644	SEMI-FIXED ATTACH	Semi-fixed attachment
645	PRECISI/MAGNET ATT	Precision or magnetic attachment
648	BONDED RETAINER DIRECT PT	Bonded retainer – direct – per tooth
649	RETAINER FOR BOND	Bonded retainer – indirect – per tooth

### Prosthodontics – Crown and Bridge Repairs and Other Services

651	RECEMENTING CROWN	Recementing crown or veneer
652	RECEMENTING BRIDGE	Recementing bridge or splint – per abutment
653	REBOND BRIDGE RETR	Rebonding of bridge or splint where retreatment of bridge surface is required
655	REMOVAL OF CROWN	Removal of crown
656	REMOVAL OF BRIDGE	Removal of bridge or splint
658	REP CRWN/BRIDGE IN	Repair of crown or bridge – indirect – per crown or pontic
659	REP CRWN/BRIDGE D	Repair of crown, bridge or veneer – direct – per crown, pontic or veneer

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## Dental Item Codes

### Prosthodontics – Procedures for Implant Prostheses

661	FIT IMPLANT ABUT	Fitting of implant abutment – per abutment
663	REMOV IMP/RET DEVICE	Removal of implant and/or retention device
664	FIT BAR - DENTURE	Fitting of bar for denture – per abutment
665	PROST RESIN BASE IMP REM	Prosthesis with resin base attached to implants – removable – per arch
666	PROSTHSIS WITH MTL FIX	Prosthesis with metal frame attached to implants – fixed – per arch
667	PROS WITH MTL REMOVEABLE	Prosthesis with metal frame attached to implants – removable – per arch
668	PROST SCREW REPLACE	Implant prosthetic screw replacement
669	REM FIXED IMPLANT	Removal and reattachment of prosthesis fixed to implant(s) – per implant
671	FULL CROWN NM	Full crown attached to osseointegrated implant – non metallic – indirect
672	FULL CROWN IN	Full crown attached to osseointegrated implant – veneered – indirect
673	FULL CROWN MIN	Full crown attached to osseointegrated implant – metallic – indirect
678	DX TEMPLATE	Diagnostic template
679	SURG IMPLANT GUIDE	Surgical implant guide
684	ENDOS-IMPLANT STG1	Insertion of first stage of two-stage endosseous implant – per implant
685	MF ENDOS IMPLANT ST1	Insertion of first stage of two-stage maxillofacial endosseous implant – per implant
686	MF ENDOS IMPLANT	Insertion of one stage maxillofacial endosseous implant – per implant
687	INSERT MINI IMPLANT	Insertion of a mini-implant – per implant

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## Dental Item Codes

### Prosthodontics – Procedures for Implant Prostheses (Continued)

688	INS ONE STAGE ENDOSS IMPLANT	Insertion of one-stage endosseous implant – per implant
689	PROV IMPLANT	Provisional implant
690	PROV REN ANC DEVICE	Provisional retention or anchorage device
691	ENDOS-IMPLANT STG2	Second stage surgery of two-stage endosseous implant – per implant

### Prosthodontics - Implant Prosthesis Repairs and Maintenance

692	CLOSE SCREW ACCESS CHAM	Closure of screw access chamber
693	REMODEL FIX IMPLANT PROS	Remodelling of a fixed implant prosthesis
694	CER COM R/O	Repair or replacement of the ceramic component of an implant metal-ceramic or all ceramic crown or bridge –per prosthetic tooth
695	CLEAN POLISH IMP	Cleaning and polishing of an implant prosthesis
696	R/O FRAC ABUT SCREW	Removal of fractured abutment screw

### Prosthodontics – Dentures and Maxillofacial Prosthetics and Services

711	COMPL MAX DENTURE	Complete maxillary denture
712	COMPL MAN DENTURE	Complete mandibular denture
713	PROV COM MAX DENTURE	Provisional complete maxillary denture
714	PROV COM MAN DENTURE	Provisional complete mandibular denture
715	PROV COM MAX/MAN DENT	Provisional complete maxillary and mandibular dentures

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## Dental Item Codes

### Prosthodontics – Dentures and Maxillofacial Prosthetics and Services (Cont)

716	METAL PALATE/PLATE	Metal palate or plate
719	COMPL MAX/MAN DENT	Complete maxillary and mandibular dentures
721	PARTIAL MAX RESIN	Partial maxillary denture – resin base
722	PARTIAL MAN RESIN	Partial mandibular denture – resin base
723	PROV PART MAX DENT	Provisional partial maxillary denture
724	PROV PART MAN DENT	Provisional partial mandibular denture
727	CAST MAX METAL DENTURE	Partial maxillary denture – custom fabricated metal framework
728	CAST MAN METAL DENTURE	Partial mandibular denture – custom fabricated metal framework
731	RETAINER PER TOOTH	Retainer (clasp) – per tooth
732	OCCLUSAL REST	Occlusal rest – per rest
733	TOOTH/S PART DTRE	Tooth/teeth (partial denture)
734	OVERLAYS PER TOOTH	Overlays – per tooth
735	PREC/MAGNET ATTACH	Precision or magnetic denture attachment
736	IMMEDIATE TOOTH RPL	Immediate tooth replacement – per tooth
737	RESILIENT LINING	Resilient lining
738	WROUGHT BAR	Wrought bar
739	METAL BACK - PER B	Metal Backing of denture teeth – per backing

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## Dental Item Codes

### Prosthodontics – Denture Maintenance

741	ADJUST DENTURE	Adjustment of a denture
743	RELIN COMPL DENT	Relining – complete denture – processed
744	RELIN PARTL DENT	Relining – partial denture – processed
745	REMODEL COMPL DENT	Remodelling – complete denture
746	REMODEL PARTL DENT	Remodelling – partial denture
751	RELIN COMP DENTUR	Relining – complete denture – direct
752	RELIN PART DENTUR	Relining – partial denture – direct
753	CLEAN/POLIST DENT	Cleaning and polishing of pre-existing denture
754	DENTURE BASE MODIF	Denture base modification
755	MAINT OVERDENT ATTACH	Maintenance of overdenture attachment – per attachment

### Prosthodontics – Denture Repairs

761	REATTACH TOOTH/CLP	Reattaching pre-existing retainer (clasp) to denture
762	REPLAC/ADD CLASP	Replacing/adding retainer (clasp) to denture – per retainer (clasp)
763	REPAIR BASE COMPL	Repairing broken base of a complete denture
764	REPAIR BASE PARTL	Repairing broken base of a partial denture
765	REPL TOOTH ON DENT	Replacing and/or adding a new tooth to a denture or implant prosthesis – per tooth
766	REATTACH EX TOOTH ON DENT	Reattaching an existing tooth on denture – per denture tooth
768	ADD TOOTH TO DTRE	Adding a denture tooth to a partial denture to replace an extracted or decoronated tooth – per denture tooth

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Prosthodontics – Denture Repairs (Continued)		
769	REPAIR METAL CAST	Repair or addition to metal frame
Prosthodontics – Other Prosthodontic Services		
771	TISSUE CONDITIONING	Tissue conditioning – per application
772	SPLINT - RESIN IN	Splint – resin
773	SPLINT - METAL IN	Splint – metal – indirect
775	CHAR DENTURE BASE	Characterisation of denture base
776	IMPRESSION	Impression – denture repair/modification
777	IDENTIFICATION	Identification
778	INLAY FOR DENTURE TOOTH	Inlay for denture tooth
779	SURG GD IMMED DENTURE	Surgical guide for an immediate denture
Prosthodontics –Maxillofacial Prosthetics		
781	OBTURATOR	Obturator
782	SURG INTERIM OBTURATOR	Surgical/interim obturator
783	R/O SURG/INTERIM OBTUR	Revision of surgical/interim obturator
785	INTERIM DX MF PROTHESIS	Interim or diagnostic maxillofacial prosthesis
786	MAN RESECT PROTHESIS	Mandibular resection prosthesis
787	EXTRA ORAL PROS EAR	Extraoral prosthesis – ear
788	EXTRA ORAL PROS NOSE	Extraoral prosthesis – nose
789	EXTRA ORAL PROS EYE	Extraoral prosthesis – eye
790	ADJUST MF PROSTHESIS	Adjustment of a maxillofacial prosthesis

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## Dental Item Codes

### Orthodontics – Removable Appliances

811	PASSIVE REMOVABLE	Passive removable appliance – per arch
821	ACTIVE REMOVABLE	Active removable appliance – per arch
823	FUNC ORTHOPAEDIC	Functional orthopaedic appliance – custom fabrication
824	FUNC ORTHO PREFAB	Functional orthopaedic appliance – prefabricated
825	SEQUENTIAL PLASTIC	Sequential plastic aligners – per arch

### Orthodontics – Fixed Appliances

829	PARTIAL BANDING	Partial banding – per arch
831	FULL ARCH BAND	Full arch banding – per arch
833	R/O BAND PER ARCH	Removal of banding – per arch
841	FIXED PALATAL	Fixed palatal or lingual arch appliance
842	VERTICAL/CROSS ELASTICS	Partial banding for inter-maxillary elastics (vertical and/or cross elastics)
843	MAX EXPANSION APPL	Expansion appliance – fixed – per arch
844	SAG MOVE APP	Sagittal movement appliance
845	PASSIVE FIXED APPL	Passive appliance - fixed
846	MINOR TOOTH -FIXED	Minor tooth guidance - fixed

### Orthodontics – Extraoral Appliances

851	EXTRAORAL APPL	Extraoral appliance
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### Orthodontics - Attachments

862	BOND ATTACH ORTHO	Bonding of attachment for application of orthodontic force
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## Dental Item Codes

### Orthodontics – Other Orthodontic Services

871	ORTHODONTIC ADJ	Orthodontic adjustment
872	REATT PASS APP FIXED	Re-attachment of passive appliance – fixed
873	REP PASS APP FIXED	Repair of passive appliance – fixed
874	REM PASS APP FIXED	Removal of passive appliance – fixed
875	REP REM APPL RESIN	Repair of removable appliance – resin base
876	REP REM APPL CLP	Repair of removable appliance – clasp, spring or tooth
877	ADD REMOVE APPL	Addition to removable appliance – clasp, spring or tooth
878	RELINER REM APPL	Relining – removable appliance - processed

### Orthodontics – Complete Course of Orthodontic Treatment

881	COMPL ORTHO TREAT	Course of orthodontic treatment
882	ORTH TX ORTH SURG	Course of orthodontic treatment with orthognathic surgery

### General Services - Emergencies

911	PALLIATIVE CARE	Palliative care – per appointment
915	AH CALLOUT	After-hours callout
916	TRAVEL FOR SERVICES	Travel to provide services

### General Services – Teledentistry

919	TELECONSULT	Teleconsultation
920	EXTEND TELE CONSULT	Extended teleconsultation (30 minutes or more)
921	TELE CONSULT BY REF	Teleconsultation by referral

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## Dental Item Codes

### General Services – Drug Therapy

926	INDIV MADE TRAY	Individually made tray – medicament(s)
927	MEDICATION	Provision of medication/medicament
928	INTRAVEN CANNUL	Intravenous cannulation and establishment of infusion
929	NEUROMOD THERAPY	Provision of neuromodulator therapy

### General Services – Anaesthesia, Sedation and Relaxation Therapy

941	LOCAL ANAEST	Local anaesthesia
942	SEDATION INTRAVEN	Sedation – intravenous – per 30 minutes or part thereof
943	SEDATION INHALAT	Sedation – inhalation – per 30 minutes or part thereof
944	RELAX THERAPY	Relaxation therapy
945	LL LASER THERAPY PA	Low level laser therapy – per appointment
948	DENT ACUPUN PA	Dental acupuncture – per appointment
949	TREAT GENERAL ANAE	Treatment under general anaesthesia/sedation

### General Services – Occlusal Therapy

961	MINOR OCCLUSAL ADJ	Minor occlusal adjustment – per visit
963	CLINICAL OCCLUSAL	Clinical occlusal analysis including muscle and joint palpation
964	REGIS/MOUNT MODEL	Registration and mounting of models for occlusal analysis
965	OCCLUSAL SPLINT	Occlusal splint

# HealthPoint Claims

## Dental Item Codes

### General Services – Occlusal Therapy

966	ADJ PRE-EXIST OCC	Adjustment of pre-existing occlusal appliance – per appointment
967	PANTOGRAPHIC TRACE	Pantographic tracing
968	OCCLUSAL ADJ 1 VIS	Occlusal adjustment following occlusal analysis – per APPOINTMENT
971	ADJ PH/TH TEMPOROM	Physical therapy for temporomandibular joint and associated structures – per appointment
972	REPAIR/ADD OCCLU	Repair/addition – occlusal appliance

### Miscellaneous

981	SPLINT/STABILISATN	Splinting and stabilisation – direct – per tooth
982	ENAMEL STRIPPING	Enamel stripping – per appointment
984	BIMAX ORAL APPL	Mandibular advancement for diagnosed snoring and obstructive sleep apnoea
985	R/O ADD SNORE/APNOEA	Repair/addition – snoring or sleep apnoea device
986	POST-OP CARE	Post-operative care not otherwise included
987	RECONTOUR TISSUE PA	Recontour tissue – per appointment
990	TREATMENT NOT INCL	Treatment not otherwise included (specify)
999	GST	GST