

ONTARIO

CDCP Dental Benefit Grid

General Practitioners and Specialists

2023 Fees

April 2024 for services that do not require preauthorization (Schedule A)

October 2024 for services that require preauthorization (Schedule B) except for orthodontics, which will be available beginning in 2025.

- The coverage of dental services provided through the CDCP Plan will be reimbursed in accordance with the terms and conditions of the Plan.
- Schedule B Procedures require Preauthorization.
- Please refer to the CDCP Dental Benefits Guide for further information on policies, guidelines and criteria of dental services eligible under the CDCP Plan.
- Please refer to the CDCP Dental Claims Submission Kit for further information on terms and conditions for submitting a claim under the CDCP Plan.
- Specialists are compensated at specialist rates for selected procedures within their specialty. For all other procedures, Specialists are compensated at General Practitioners' rates.

Should you have any questions, please contact the Sun Life Contact Center at 1-888-888-8110.

Schedule A

0.0 DIAGNOSTIC

0.1 Examinations

- Up to 3 exams in any 12 months
- Excludes emergency examination.
- Frequency limitations take into account overall interaction between various examination services rendered by same provider, different providers within the same office or different office, and their eligibility period.
- Specialty complete and Specialty limited examinations (performed by specialists only) will not count against the eligible maximum examinations allowable.

First Dental Visit Orientation

- Up to the age of three (3) inclusive

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
01011		\$50.63						\$60.76			

Complete Oral Examination and Diagnosis

- 1 in any 60 months- when a complete examination is provided, it replaces the recall and the new patient limited examination for the respective eligible period.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
01101		\$75.68						\$159.13			
01102		\$113.55						\$159.13			
01103		\$151.42						\$181.70			

New Patient Limited

- 1 in a lifetime, with same provider or different provider in the same office.
- 1 in any 12 months, with different provider in a different office.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
01201		\$33.30						\$40.28			

Recall Examination

- 1 in any 12 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
01202		\$34.49						\$41.39			

Specific Examination

- 1 in any 12 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
01204		\$74.56		\$74.56	\$74.56	\$74.56		\$89.47	\$74.56	\$74.56	

Emergency Examination

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
01205		\$74.56		\$74.56	\$74.56	\$74.56		\$89.47	\$74.56	\$74.56	

Specialist Examination and Diagnosis - Limited

- 1 in any 12 months/specialty (with GP referral and justification for the referral).

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
01402					\$45.70	\$45.70					
01502									\$42.22		
01503									\$51.00		

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
01702										\$63.49	
01802				\$52.91							

0.2 Radiographs

Intraoral Radiographs, Complete series

- 1 in any 60 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
02101		\$133.21		\$133.21				\$133.21	\$133.21	\$133.21	\$133.21
02102		\$143.58		\$143.58				\$143.58	\$143.58	\$143.58	\$143.58

Intraoral Radiographs (1-8 images)

- Includes periapical, bitewing and occlusal radiographs.
- 8 in any 12 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
02111		\$29.08		\$29.08				\$29.08	\$29.08	\$29.08	\$29.08
02112		\$35.54		\$35.54				\$35.54	\$35.54	\$35.54	\$35.54
02113		\$43.12		\$43.12				\$43.12	\$43.12	\$43.12	\$43.12
02114		\$48.60		\$48.60				\$48.60	\$48.60	\$48.60	\$48.60
02115		\$58.40		\$58.40				\$58.40	\$58.40	\$58.40	\$58.40
02116		\$65.71		\$65.71				\$65.71	\$65.71	\$65.71	\$65.71
02117		\$73.28		\$73.28				\$73.28	\$73.28	\$73.28	\$73.28
02118		\$80.82		\$80.82				\$80.82	\$80.82	\$80.82	\$80.82
02131		\$34.49		\$34.49				\$34.49	\$34.49	\$34.49	\$34.49
02132		\$43.09		\$43.09				\$43.09	\$43.09	\$43.09	\$43.09
02141		\$29.08		\$29.08				\$29.08	\$29.08	\$29.08	\$29.08
02142		\$35.54		\$35.54				\$35.54	\$35.54	\$35.54	\$35.54
02143		\$43.12		\$43.12				\$43.12	\$43.12	\$43.12	\$43.12
02144		\$48.60		\$48.60				\$48.60	\$48.60	\$48.60	\$48.60

Panoramic

- 1 in any 60 months; Up to 3 in a lifetime

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
02601		\$67.88		\$67.88				\$67.88	\$67.88	\$67.88	\$67.88

0.3 Laboratory Tests

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
04311	L	\$80.73		\$96.88	\$96.88	\$96.88		\$86.00	\$96.88		
04312	L	\$80.73		\$96.88	\$96.88	\$96.88		\$86.00	\$96.88		
04313	L	\$84.53		\$101.44	\$101.44	\$101.44		\$101.44	\$101.44		
04314	L	\$84.53		\$101.44	\$101.44	\$101.44		\$101.44	\$101.44		
04315	L	\$80.73		\$96.88	\$96.88	\$96.88		\$96.88	\$96.88		
04321	L	\$174.37		\$209.24	\$209.24	\$209.24		\$185.00	\$209.24		
04322	L	\$174.37		\$209.24	\$209.24	\$209.24		\$185.00	\$209.24		
04323	L	\$113.18		\$135.82	\$135.82	\$135.82		\$135.82	\$135.82		

1.0 PREVENTION

Polishing

- ½ unit in any 12 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
11107		\$7.75						\$7.75	\$7.75	\$7.75	

Scaling

- Age 0 to 11: ½ unit in any 12 months;
- Age 12 to 16: 1 unit in any 12 months;
- Age 17+: 4 units in any 12 months in combination with root planing;

- Preauthorization is required for additional units.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
11111		\$63.00						\$63.00	\$63.00	\$63.00	
11112		\$123.00						\$123.00	\$147.60	\$123.00	
11113		\$177.00						\$177.00	\$212.40	\$177.00	
11114		\$236.00						\$236.00	\$283.20	\$236.00	
11117		\$30.00						\$30.00	\$36.00	\$30.00	

Topical Fluoride

- Age 0 to 17: 1 in any 6 months
- Age 17+: 1 in any 12 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
12111		\$7.50						\$7.50	\$7.50		
12112		\$29.05						\$29.05	\$29.05		
12113		\$33.00						\$33.00	\$33.00		

Sealants/Preventative Resins

- Eligible for only those under age 17, on occlusal surface of permanent molars (16, 26, 36, 46, 17, 27, 37, 47), bicuspid (14, 15, 24, 25, 34, 35, 44, 45), and lingual surface of permanent maxillary incisors (11, 12, 21, 22), where surfaces are unrestored.
- There is a lifetime limit of 2 sealants/preventive restorative resins per eligible tooth.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
13401		\$32.00						\$38.40			
13409		\$19.00						\$22.80			
13411		\$51.23						\$61.48			
13419		\$39.85						\$47.82			

Topical Application to Hard Tissue Lesion(s) of an Antimicrobial or Remineralization Agent

- Includes Silver Diamine Fluoride (SDF).
- 2 treatments in any 12 months.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
13601		\$67.00						\$67.00	\$67.00		

2.0 RESTORATION

Caries, Trauma and Pain Control

- Should not be considered for coverage in conjunction with the following procedures: restorations, open and drain, pulpectomy, pulpotomy, root canal if requested with the same date of service and for the same tooth.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
20111		\$115.85		\$115.85				\$139.02			
20119		\$115.85		\$115.85				\$139.02			
20121		\$115.85		\$115.85				\$139.02			
20129		\$115.85		\$115.85				\$139.02			
20131		\$34.12		\$34.12				\$40.94			
20139		\$34.12		\$34.12				\$40.94			

Restoration, Amalgam/Composite; Prefabricated, Full Coverage

- Primary incisor teeth are eligible only for those under age 5.
- 1 per tooth in any 24 months for same provider or different provider in the same office.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
21111		\$115.85						\$139.02			
21112		\$154.85						\$185.82			
21113		\$173.78						\$208.54			

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
21114		\$209.54						\$251.45			
21115		\$209.54						\$251.45			
21121		\$115.85						\$139.02			
21122		\$154.85						\$185.82			
21123		\$173.78						\$208.54			
21124		\$209.54						\$251.45			
21125		\$209.54						\$251.45			
21211		\$115.85		\$115.85				\$139.02		\$115.85	
21212		\$154.85		\$154.85				\$185.82		\$154.85	
21213		\$173.78		\$173.78				\$208.54		\$173.78	
21214		\$252.81		\$252.81				\$303.37		\$252.81	
21215		\$252.81		\$252.81				\$303.37		\$252.81	
21221		\$115.85		\$115.85				\$139.02		\$115.85	
21222		\$192.72		\$192.72				\$231.26		\$192.72	
21223		\$212.76		\$212.76				\$255.31		\$212.76	
21224		\$318.45		\$318.45				\$354.00		\$318.45	
21225		\$326.63		\$326.63				\$391.96		\$326.63	
21231		\$115.85		\$115.85				\$139.02		\$115.85	
21232		\$154.85		\$154.85				\$185.82		\$154.85	
21233		\$173.78		\$173.78				\$208.54		\$173.78	
21234		\$252.81		\$252.81				\$303.37		\$252.81	
21235		\$252.81		\$252.81				\$303.37		\$252.81	
21241		\$115.85		\$115.85				\$139.02		\$115.85	
21242		\$192.72		\$192.72				\$231.26		\$192.72	
21243		\$212.76		\$212.76				\$255.31		\$212.76	
21244		\$318.45		\$318.45				\$354.00		\$318.45	
21245		\$326.63		\$326.63				\$391.96		\$326.63	
21401		\$24.69						\$29.63		\$29.63	
21402		\$39.86						\$47.83		\$47.83	
21403		\$53.12						\$63.74		\$63.74	
21404		\$69.06						\$82.87		\$82.87	
21405		\$90.27						\$108.32		\$108.32	
22201		\$209.54						\$251.45		\$251.45	
22202		\$209.54						\$251.45		\$251.45	
22211		\$209.54						\$251.45		\$209.54	
22212		\$209.54						\$251.45		\$209.54	
22401		\$209.54						\$251.45		\$209.54	
22501		\$209.54						\$251.45		\$209.54	
23101		\$135.91		\$135.91				\$163.09		\$163.09	
23102		\$173.78		\$173.78				\$208.54		\$208.54	
23103		\$223.23		\$223.23				\$267.88		\$267.88	
23104		\$294.86		\$294.86				\$326.00		\$326.00	
23105		\$305.16		\$305.16				\$362.00		\$362.00	
23111		\$148.28		\$148.23				\$177.88		\$177.88	
23112		\$185.27		\$185.27				\$222.32		\$222.32	
23113		\$237.38		\$237.38				\$284.86		\$284.86	
23114		\$308.04		\$308.04				\$354.00		\$354.00	
23115		\$315.11		\$315.11				\$378.13		\$378.13	
23211		\$135.91		\$135.91				\$163.09		\$163.09	
23212		\$204.48		\$204.48				\$241.00		\$241.00	
23213		\$223.23		\$223.23				\$267.88		\$267.88	
23214		\$305.16		\$305.16				\$326.00		\$326.00	
23215		\$305.16		\$305.16				\$362.00		\$362.00	
23221		\$154.85		\$154.85				\$185.82		\$185.82	
23222		\$223.23		\$223.23				\$241.00		\$241.00	
23223		\$242.01		\$242.01				\$290.00		\$290.00	
23224		\$347.68		\$347.68				\$374.00		\$374.00	
23225		\$347.68		\$347.68				\$398.00		\$398.00	
23311		\$148.23		\$148.23				\$177.88		\$177.88	
23312		\$217.59		\$217.59				\$261.11		\$261.11	
23313		\$237.38		\$237.38				\$284.86		\$284.86	
23314		\$334.79		\$334.79				\$354.00		\$354.00	
23315		\$334.79		\$334.79				\$401.75		\$401.75	
23321		\$166.75		\$166.75				\$193.00		\$193.00	

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
23322		\$237.38		\$237.38				\$267.00		\$267.00	
23323		\$257.14		\$257.14				\$302.00		\$302.00	
23324		\$354.96		\$354.96				\$354.00		\$354.00	
23325		\$355.08		\$355.08				\$426.10		\$426.10	
23401		\$135.91						\$163.09		\$135.91	
23402		\$173.78						\$208.54		\$173.78	
23403		\$204.51						\$245.41		\$204.51	
23404		\$209.54						\$251.45		\$209.54	
23405		\$209.54						\$251.45		\$209.54	
23411		\$149.78						\$179.74		\$149.78	
23412		\$186.70						\$224.04		\$186.70	
23413		\$209.54						\$251.45		\$209.54	
23414		\$209.54						\$251.45		\$209.54	
23415		\$209.54						\$251.45		\$209.54	
23501		\$135.91						\$163.09			
23502		\$204.51						\$241.00			
23503		\$209.54						\$251.45			
23504		\$209.54						\$251.45			
23505		\$209.54						\$251.45			
23511		\$154.85						\$185.82			
23512		\$209.54						\$251.45			
23513		\$209.54						\$251.45			
23514		\$209.54						\$251.45			
23515		\$209.54						\$251.45			
22301		\$173.70						\$208.44		\$173.70	
22302		\$173.70						\$208.44		\$173.70	
22311		\$189.65						\$227.58		\$189.65	
22312		\$189.65						\$227.58		\$189.65	

Prefabricated Posts

- 4 in any 10 years per client (permanent teeth only)
- A prefabricated post/pin is eligible only when inadequate coronal tooth structure is remaining to retain the restoration.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
25731		\$162.70						\$160.00		\$195.24	
25732		\$244.05						\$241.00		\$292.86	
25733		\$325.41						\$322.00		\$390.49	

Post Removal

- 1 in a lifetime per permanent tooth

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
25781		\$81.00		\$97.20				\$97.20		\$97.20	
25782		\$161.98		\$194.38				\$194.38		\$194.38	

Repair to Crowns

- 1 in any 36 months per tooth

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
27721		\$290.52								\$348.62	
27722	L	\$86.10								\$103.32	

Recementation of Crowns

- 1 in any 36 months per tooth

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
29101		\$72.20						\$86.64		\$86.64	

3.0 ENDODONTICS

- The CDCP Endodontics Policy must be met. Please refer to Sunlife.ca/cdcp/provider or Canada.ca/dental for information on CDCP dental policies.

Pulpotomy/Pulpectomy

- Primary incisor teeth are eligible only for those under age 5.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
32221		\$128.49		\$154.19				\$154.19			
32222		\$206.08		\$247.30				\$247.30			
32231		\$125.80		\$150.96				\$150.96			
32232		\$66.41		\$79.69				\$79.69			
32311		\$128.49		\$222.70				\$164.27			
32312		\$137.40		\$230.35				\$180.69			
32313		\$206.08		\$328.10				\$247.30			
32314		\$240.43		\$430.10				\$288.52			
32321		\$128.49		\$154.19				\$154.19			
32322		\$128.49		\$154.19				\$154.19			

Root Canal Therapy

- Preauthorization is required for 8's at all times.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
33111		\$513.87		\$616.64				\$616.64			
33121		\$642.34		\$806.65				\$788.80			
33131		\$892.98		\$1,071.58				\$1,071.58			
33141		\$1,030.36		\$1,236.43				\$1,236.43			

Open and Drain

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
39201		\$61.81		\$76.54				\$76.54			
39202		\$61.81		\$76.54				\$76.54			

4.0 PERIODONTICS

Management of Oral Disease

- 2 units in any 12 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
41211		\$50.00			\$60.00	\$60.00			\$60.00		
41231		\$50.00			\$60.00	\$60.00			\$60.00		

Miscellaneous

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
42831		\$95.26						\$114.31	\$114.31		

Root Planing

- Age 17+: 4 units in any 12 months in combination with scaling.
- Preauthorization is required for additional units.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
43421		\$62.18							\$74.62		
43422		\$123.00							\$147.60		
43423		\$177.00							\$212.40		
43424		\$236.00							\$283.20		
43427		\$30.00							\$36.00		

5.0 PROSTHODONTICS - REMOVABLE

- The CDCP Removable Prosthodontic Policy must be met. Please refer to Sunlife.ca/cdcp/provider or Canada.ca/dental for information on CDCP dental policies.
- The fee for complete and partial dentures includes a three (3) month period of post-insertion care. The fee for immediate dentures includes the tissue conditioner, but not the processed relines/rebase.
- Denture adjustments done on the same date of service and in conjunction with the delivery of new dentures, denture repairs, relines, rebases and/or tissue conditioning, are included in the fees billed and paid for these services.
- The overall cost of replacement for a denture may be adjusted in situations where claims for relines/rebase were paid within three months prior to the request.

Complete Dentures - Standard

- 1 per arch in any 96 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
51101	L	\$864.88								\$1,037.86	
51102	L	\$1,100.72								\$1,320.86	
51103	L	\$1,415.23								\$1,698.28	

Partial Acrylic Dentures

- 1 per arch in any 60 months

Partial Cast Dentures

- 1 per arch in any 96 months
- Preauthorization is required for initial placement of partial acrylic and partial cast dentures.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
52101	L	\$362.56								\$435.07	
52102	L	\$362.56								\$435.07	
52103	L	\$471.32								\$565.58	
52111	L	\$429.18								\$515.02	
52112	L	\$429.18								\$515.02	
52113	L	\$772.52								\$927.02	
52121	L	\$429.18								\$515.02	
52122	L	\$429.18								\$515.02	
52123	L	\$772.52								\$927.02	
52201	L	\$525.76								\$630.91	
52202	L	\$525.76								\$630.91	
52203	L	\$946.37								\$1,135.64	
52301	L	\$628.99								\$754.79	
52302	L	\$628.99								\$754.79	
52303	L	\$864.88								\$1,037.86	
52311	L	\$712.56								\$855.07	
52312	L	\$712.56								\$855.07	
52313	L	\$1,282.61								\$1,539.13	
52401	L	\$600.48								\$720.58	
52402	L	\$600.48								\$720.58	
52403	L	\$1,080.87								\$1,297.04	
52711	L	\$1,195.10								\$1,366.00	
52712	L	\$1,450.95								\$1,658.00	
52713	L	\$2,381.45								\$2,857.74	
53101	L	\$1,100.72								\$1,320.86	
53102	L	\$1,100.72								\$1,320.86	
53103	L	\$1,572.46								\$1,886.95	
53201	L	\$1,022.09								\$1,226.51	
53202	L	\$1,022.09								\$1,226.51	
53203	L	\$1,493.84								\$1,792.61	
53301	L	\$1,493.84								\$1,792.61	
53302	L	\$1,493.84								\$1,792.61	
53711	L	\$1,280.10								\$1,536.12	
53712	L	\$1,280.10								\$1,536.12	

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
53713	L	\$2,304.18								\$2,765.02	

Denture Adjustments

- After three months insertion or by other than the dentist providing prosthesis

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
54201		\$72.53								\$87.04	

Repairs and Additions

- 1 per prosthesis in any 12 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
55101	L	\$72.53								\$87.04	
55102	L	\$72.53								\$87.04	
55201	L	\$108.75								\$130.50	
55202	L	\$108.75								\$130.50	
55203	L	\$145.04								\$174.05	
55301	L	\$72.53								\$87.04	
55302	L	\$72.53								\$87.04	
55401	L	\$217.54								\$261.05	
55402	L	\$217.54								\$261.05	
55403	L	\$290.04								\$348.05	

Reline or Rebase

- 1 per prosthesis in any 24 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
56211		\$87.04								\$348.05	
56212		\$87.04								\$348.05	
56213		\$130.50								\$435.07	
56221		\$130.50								\$340.26	
56222		\$174.05								\$340.26	
56223		\$87.04								\$435.07	
56231	L	\$290.04								\$348.05	
56232	L	\$362.56								\$435.07	
56233	L	\$453.19								\$543.83	
56241	L	\$290.04								\$348.05	
56242	L	\$290.04								\$348.05	
56243	L	\$453.19								\$543.83	
56311	L	\$290.04								\$348.05	
56312	L	\$290.04								\$348.05	
56313	L	\$471.32								\$565.58	
56321	L	\$290.04								\$348.05	
56322	L	\$290.04								\$348.05	
56323	L	\$471.32								\$565.58	

Tissue Conditioning

- 1 per prosthesis in any 24 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
56511		\$145.04								\$174.05	
56512		\$145.04								\$174.05	
56513		\$208.25								\$249.90	
56521		\$145.04								\$174.05	
56522		\$145.04								\$174.05	
56523		\$222.64								\$267.17	
56531		\$145.04								\$174.05	
56532		\$145.04								\$174.05	
56533		\$208.25								\$249.00	

7.0 ORAL AND MAXILLOFACIAL SURGERY

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
71101		\$147.19						\$176.63	\$176.63	\$147.19	
71109		\$77.98						\$93.58	\$93.58	\$77.98	
71201		\$228.19						\$273.83	\$273.83	\$228.19	
71209		\$228.19						\$273.83	\$273.83	\$228.19	
71211		\$205.83									
71219		\$154.25									
72111		\$227.20									
72119		\$227.20									
72211		\$340.79									
72219		\$340.79									
72221		\$453.40									
72229		\$453.40									
72231		\$495.66									
72239		\$495.66									
72311		\$105.71						\$126.85	\$105.71		
72319		\$100.76						\$120.91	\$100.76		
74111		\$349.03			\$418.84	\$418.84		\$418.84	\$418.84		
74112		\$372.28			\$446.74	\$446.74		\$446.74	\$446.74		
74121		\$295.85			\$355.02	\$355.02		\$355.02	\$355.02		
74122		\$410.91			\$493.09	\$493.09		\$493.09	\$493.09		
74211		\$230.08			\$276.10	\$431.38		\$431.38	\$431.38		
74212		\$341.53			\$409.84	\$439.34		\$439.34	\$439.34		
74221		\$315.34			\$378.41	\$439.34		\$439.34	\$439.34		
74222		\$474.84			\$569.81	\$569.81		\$569.81	\$569.81		
74611		\$280.91			\$337.09	\$337.09		\$337.09	\$337.09		
74612		\$310.33			\$372.40	\$372.40		\$372.40	\$372.40		
74621		\$361.71		\$434.05	\$434.05	\$565.91		\$569.81	\$565.91		
74631		\$335.86		\$403.03	\$403.03	\$403.03		\$403.03	\$403.03		
74632		\$369.44		\$443.33	\$443.33	\$443.33		\$443.33	\$443.33		
75111		\$105.71		\$126.85	\$126.85	\$126.85		\$126.85	\$235.65		
75112		\$105.71		\$126.85				\$126.85	\$213.00		
75113		\$239.00		\$286.80				\$286.80	\$286.80		
75121		\$232.67		\$279.20				\$288.26	\$288.26		
75122		\$232.67		\$279.20				\$304.00	\$308.87		
75123		\$259.01		\$310.81				\$350.46	\$350.46		
75211		\$152.27		\$182.72				\$341.70			
75301		\$350.54		\$420.65				\$424.30			
75303		\$185.61		\$222.73				\$562.00			
76941		\$170.19						\$204.23			
76949		\$170.19						\$204.23			
76951		\$95.11						\$114.13			
76952		\$190.16						\$228.19			
76961		\$116.34									
76962		\$170.19									
79601		\$47.54		\$57.05	\$57.05	\$57.60		\$66.00	\$84.15		
79602		\$47.54		\$57.05	\$57.05	\$57.60		\$67.00	\$87.35		
79605		\$58.20						\$117.47	\$117.47		
79606		\$68.14						\$159.34	\$159.34		
79701		\$525.76									
79702		\$525.76									

8.0 ORTHODONTICS – Not Available Until 2025

- The CDCP Orthodontic Policy must be met. Please refer to Sunlife.ca/cdcp/provider or Canada.ca/dental for information on CDCP dental policies.
- P1000 - Examination
- P1100 - Diagnostic records

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
P1000		\$126.77					\$126.77	\$126.77			
P1100		\$507.09					\$507.09	\$507.09			

9.0 ADJUNCTIVE GENERAL SERVICES

- The CDCP Sedation and General Anesthesia Policy must be met. Please refer to Sunlife.ca/cdcp/provider or Canada.ca/dental for information on CDCP dental policies.

Nitrous Oxide and Oral Sedation (stand-alone procedures and in combination)

- 4 in any 12 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
92411		\$69.25	\$72.00					\$83.10	\$69.25		
92412		\$93.09	\$95.00					\$111.71	\$93.09		
92413		\$121.52	\$117.00					\$145.82	\$121.52		
92414		\$149.93	\$140.00					\$179.92	\$149.93		
92415		\$178.34	\$163.00					\$214.01	\$178.34		
92416		\$205.00	\$185.00					\$246.00	\$205.00		
92417		\$207.76	\$208.00					\$249.31	\$207.76		
92418		\$222.33	\$232.00					\$266.80	\$222.33		
92421		\$66.19	\$72.00					\$79.43	\$66.19		
92422		\$66.19	\$72.00					\$79.43	\$66.19		
92423		\$66.19	\$72.00					\$79.43	\$66.19		
92424		\$66.19	\$72.00					\$79.43	\$66.19		
92425		\$66.19	\$72.00					\$79.43	\$66.19		
92426		\$66.19	\$72.00					\$79.43	\$66.19		
92427		\$66.19	\$72.00					\$79.43	\$66.19		
92428		\$66.19	\$72.00					\$79.43	\$66.19		
92431		\$78.36	\$81.00					\$94.03	\$78.36		
92432		\$118.66	\$115.00					\$142.39	\$118.66		
92433		\$161.28	\$149.00					\$193.54	\$161.28		
92434		\$203.00	\$183.00					\$243.60	\$203.00		
92435		\$241.00	\$218.00					\$289.20	\$241.00		
92436		\$279.00	\$252.00					\$334.80	\$279.00		
92437		\$281.49	\$285.00					\$337.79	\$281.49		
92438		\$314.36	\$319.00					\$377.23	\$314.36		

Schedule B

All Procedures in Schedule B have a Preauthorization Requirement and will be available six (6) months after Plan launch, except orthodontics, which will be available beginning in 2025.

0.0 DIAGNOSTIC

Examinations

- Frequency limitations take into account overall interaction between various examination services rendered by same provider, different providers within the same office or different office, and their eligibility period.
- Specialty complete and limited examinations (performed by specialists only) will not count against the eligible maximum examinations allowable.

Specialist Examination and Diagnosis - Complete

- 1 in any 60 months per specialty (with GP referral and justification for the referral).
- When a specialty complete examination is adjudicated, it eliminates specialty limited examination within the same specialty in that 12 month period.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
01401					\$168.29	\$178.03					
01501									\$244.79		
01701										\$244.79	
01801				\$236.77							

Laboratory Tests

- When submitting requests of laboratory tests/analysis, a copy of the laboratory report is required.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
04101	L	\$62.50		\$75.00	\$75.00	\$75.00		\$56.00	\$75.00		
04401	L	\$67.80		\$81.36	\$81.36	\$81.36		\$72.00	\$81.36		

Diagnostic Casts, Unmounted

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
04911		\$40.94						\$36.00			
04913		\$66.90						\$66.90			

1.0 PREVENTION

Interproximal Disking of Teeth

- 1 unit in any 12 months

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
16201		\$39.00									

2.0 RESTORATION

Cores and Posts

- 4 in any 120 months, on permanent teeth only.
- Eligible only for those age 18 and older.
- Cores are eligible only if existing restoration is greater than 12 months old.
- Cores may be considered for coverage only in conjunction with an approved preauthorization crown request.
- Prefabricated posts in combination with core, including pin(s) where applicable, may be considered for coverage only in conjunction with an approved preauthorization crown request.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
21301		\$301.67								\$362.00	
21302		\$301.67								\$362.00	
23601		\$312.16								\$374.59	
23602		\$319.60								\$383.52	
25751		\$310.30								\$372.36	
25752		\$310.30								\$372.36	
25753		\$310.30								\$372.36	
25754		\$310.30								\$372.36	
25755		\$310.30								\$372.36	
25756		\$310.30								\$372.36	
25761		\$310.30								\$372.36	
25762		\$310.30								\$372.36	
25763		\$310.30								\$372.36	
25764		\$414.80								\$497.76	
25765		\$414.80								\$497.76	
25766		\$414.80								\$497.76	

Crowns

- 4 in any 120 months
- The CDCP Crown Policy must be met. Please refer to Sunlife.ca/cdcp/provider or Canada.ca/dental for information on CDCP dental policies.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
27201	L	\$809.98								\$971.98	
27211	L	\$809.98								\$971.98	
27301	L	\$738.11								\$885.73	

3.0 ENDODONTICS

- The CDCP Endodontics Policy must be met. Please refer to Sunlife.ca/cdcp/provider or Canada.ca/dental for information on CDCP dental policies.

Root Canal Therapy

- Preauthorization is required for all 8's, at all times.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
33111		\$513.87		\$616.64				\$616.64			
33121		\$642.34		\$806.65				\$788.80			
33131		\$892.98		\$1,071.58				\$1,071.58			
33141		\$1,030.36		\$1,236.43				\$1,236.43			

Retreatment of Root Canal Therapy, Apicoectomy and Retrofilling

- 1 root canal re-treatment, 1 apicoectomy and 1 retrofilling per tooth, per lifetime.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
33115		\$697.28		\$836.74				\$836.74			
33125		\$834.40		\$1,001.28				\$1,001.28			
33135		\$1,149.36		\$1,379.23				\$1,379.23			
33145		\$1,291.13		\$1,549.36				\$1,549.36			
33601		\$413.55		\$496.26				\$496.26			
33602		\$485.02		\$582.02				\$582.02			
33603		\$632.51		\$759.01				\$759.01			
33604		\$728.01		\$873.61				\$873.61			
33605		\$89.73		\$107.68				\$107.68			
33611		\$121.50		\$145.80				\$145.80			
33612		\$152.12		\$181.00				\$182.54			
33613		\$182.74		\$181.00				\$219.29			
33614		\$182.74		\$219.29				\$219.29			
33621		\$310.00		\$444.55				\$444.55			
33622		\$428.00		\$613.70				\$613.70			

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
33623		\$499.00		\$714.85				\$714.85			
33624		\$600.00		\$859.36				\$859.36			
34111		\$380.02		\$456.02				\$456.02			
34112		\$440.57		\$528.68				\$528.68			
34121		\$323.02		\$387.62				\$387.62			
34122		\$449.46		\$539.35				\$539.35			
34123		\$513.66		\$616.39				\$616.39			
34131		\$323.02		\$387.62				\$387.62			
34132		\$449.46		\$539.35				\$539.35			
34133		\$513.66		\$616.39				\$616.39			
34134		\$566.02		\$679.22				\$679.22			
34141		\$380.02		\$456.02				\$456.02			
34142		\$449.46		\$539.35				\$539.35			
34151		\$386.23		\$463.48				\$463.48			
34152		\$604.31		\$725.17				\$725.17			
34153		\$577.87		\$693.44				\$693.44			
34161		\$386.23		\$463.48				\$463.48			
34162		\$559.24		\$671.09				\$671.09			
34163		\$577.87		\$693.44				\$693.44			
34164		\$642.06		\$770.47				\$770.47			
34211		\$73.15		\$87.78				\$87.78			
34212		\$82.98		\$99.58				\$99.58			
34221		\$65.19		\$78.23				\$78.23			
34222		\$82.98		\$99.58				\$99.58			
34223		\$96.80		\$116.16				\$116.16			
34224		\$130.40		\$156.48				\$156.48			
34231		\$82.98		\$99.58				\$99.58			
34232		\$96.80		\$116.16				\$116.16			
34233		\$130.40		\$156.48				\$156.48			
34234		\$161.00		\$193.20				\$193.20			
34241		\$76.69		\$92.03				\$92.03			
34242		\$82.98		\$99.58				\$99.58			
34251		\$65.19		\$78.23				\$78.23			
34252		\$82.98		\$99.58				\$99.58			
34253		\$96.80		\$116.16				\$116.16			
34254		\$130.40		\$156.48				\$156.48			
34261		\$82.98		\$99.58				\$99.58			
34262		\$96.80		\$116.16				\$116.16			
34263		\$130.40		\$156.48				\$156.48			
34264		\$161.00		\$193.20				\$193.20			

4.0 PERIODONTICS

Desensitization

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
41301		\$60.00							\$60.00		

Periodontal Splint of Ligation, Provisional, Extra Coronal

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
43211		\$95.26							\$114.31		
43221		\$192.76							\$227.00		
43231		\$47.66							\$78.20		
43241		\$95.26							\$114.31		
43281		\$92.31							\$110.77		

Periodontal Re-Evaluation/Evaluation

- Limited to those clients with an identified periodontal problem.
- Not to be used in conjunction with procedure code 01502.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
49101		\$95.26							\$114.31		
49102		\$95.26							\$114.31		

5.0 PROSTHODONTICS - REMOVABLE

- The CDCP Removable Prosthodontic Policy must be met. Please refer to Sunlife.ca/cdcp/provider or Canada.ca/dental for information on CDCP dental policies.
- The fee for complete and partial dentures includes a 3 month period of post-insertion care. The fee for immediate dentures includes the tissue conditioner, but not the processed relines/rebase.
- Denture adjustments done on the same date of service and in conjunction with the delivery of new dentures, denture repairs, relines, rebases and/or tissue conditioning, are included in the fees billed and paid for these services.
- The overall cost of replacement for a denture may be adjusted in situations where claims for relines/rebase were paid within three months prior to the request.

Complete/Immediate Dentures

- 1 per arch in any 96 months.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
51301	L	\$1,022.09								\$1,226.51	
51302	L	\$1,257.97								\$1,509.56	
51303	L	\$1,572.46								\$1,886.95	
51711	L	\$1,101.56								\$1,321.87	
51712	L	\$1,355.78								\$1,626.94	
51713	L	\$1,738.94								\$2,086.73	
51811	L	\$1,236.50								\$1,483.80	
51812	L	\$1,484.34								\$1,781.21	
51813	L	\$2,448.76								\$2,938.51	

7.0 ORAL AND MAXILLOFACIAL SURGERY

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
72321		\$211.43							\$211.43		
72329		\$200.52							\$200.52		
72331		\$232.67									
72339		\$219.82									
72511		\$105.71						\$126.85	\$126.85		
72519		\$105.71						\$126.85	\$126.85		
72521		\$349.03						\$418.84	\$418.84		
72529		\$335.86						\$403.03	\$403.03		
72531		\$349.03							\$418.84		
72539		\$335.86							\$403.03		
72541		\$210.98							\$444.90		
72551		\$328.89							\$497.04		
73121		\$232.68							\$279.22		
73411		\$232.67							\$279.20		
75302		\$448.10		\$537.72							
75401		\$155.77		\$186.92							
75403		\$147.96		\$177.55	\$177.55	\$177.55					
75411		\$394.50									
75412		\$493.12									
76201		\$529.57						\$859.96			
76301		\$773.71						\$928.45			
79603		\$105.71		\$126.85	\$126.85	\$126.85		\$126.85	\$126.85		
79604		\$105.71		\$126.85	\$126.85	\$126.85		\$126.85	\$126.85		

8.0 ORTHODONTICS

- The CDCP Orthodontic Policy must be met. Please refer to Sunlife.ca/cdcp/provider or Canada.ca/dental for information on CDCP dental policies.
- Note: Approved fees for P1500 are based on the treatment plan provided. Please see Schedule A - Section 8.0 Orthodontics for procedures P1000 and P1100.
- CDCP Orthodontic Payment Codes:

- P0500 - Orthodontic Observation
- P1200 - Initial Payment - Comprehensive treatment
- P1300 - Incremental Payment - Comprehensive treatment
- P1400 - Final Payment - Comprehensive treatment

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
80602		\$86.67						\$86.67			
80661		\$86.67						\$86.67			
80669		\$86.67						\$86.67			
80671		\$86.67						\$86.67			
80679		\$86.67						\$86.67			
81111	L	\$260.05						\$260.05			
81112	L	\$260.05						\$260.05			
81113	L	\$260.05						\$260.05			
81114	L	\$254.20						\$254.20			
81121	L	\$260.05						\$260.05			
81122	L	\$260.05						\$260.05			
81131	L	\$339.34						\$339.34			
81132	L	\$339.34						\$339.34			
81135	L	\$510.18						\$510.18			
81211	L	\$433.42						\$433.42			
81212	L	\$433.42						\$433.42			
81221	L	\$260.05						\$260.05			
81222	L	\$260.05						\$260.05			
81231	L	\$260.05						\$260.05			
81232	L	\$260.05						\$260.05			
81241	L	\$346.75						\$346.75			
81242	L	\$346.75						\$346.75			
81243	L	\$346.75						\$346.75			
81251	L	\$586.88						\$586.88			
81252	L	\$586.88						\$586.88			
81253	L	\$520.16						\$520.16			
81254	L	\$433.40									
P0500		\$68.33					\$68.33	\$68.33			
P1200		\$2,654.49					\$2,654.49	\$2,654.49			
P1300		\$2,212.08					\$2,212.08	\$2,212.08			
P1400		\$1,769.64					\$1,769.64	\$1,769.64			

9.0 ADJUNCTIVE GENERAL SERVICES

- The CDCP Sedation and General Anesthesia Policy must be met. Please refer to Sunlife.ca/cdcp/provider or Canada.ca/dental for information on CDCP dental policies.

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
92212		\$202.13	\$242.56					\$242.56			
92213		\$273.17	\$327.80					\$327.80			
92214		\$344.20	\$413.04					\$413.04			
92215		\$409.94	\$491.93					\$491.93			
92216		\$473.62	\$568.34					\$568.34			
92217		\$477.47	\$572.96					\$572.96			
92218		\$533.96	\$640.75					\$640.75			
92222		\$122.10	\$87.00					\$127.00			
92223		\$183.15	\$114.00					\$191.00			
92224		\$244.20	\$142.00					\$255.00			
92225		\$305.25	\$171.00					\$319.00			
92226		\$366.30	\$198.00					\$382.00			
92227		\$427.35	\$226.00					\$446.00			
92228		\$488.40	\$255.00					\$510.00			
92301		\$73.41	\$118.35					\$118.35			
92302		\$202.13	\$242.56					\$242.56			
92303		\$273.17	\$327.80					\$327.80			
92304		\$344.20	\$413.04					\$413.04			
92305		\$409.94	\$491.93					\$491.93			
92306		\$473.62	\$568.34					\$568.34			

Code	Lab	GP	Anest	Endo	O. Med	O. Path	Ortho	Paed	Perio	Pros	Radio
92307		\$477.47	\$572.96					\$572.96			
92308		\$533.96	\$640.75					\$640.75			
92321		\$46.98	\$56.38					\$56.38			
92322		\$93.92	\$87.00					\$112.70			
92323		\$139.83	\$114.00					\$167.80			
92324		\$186.76	\$142.00					\$224.11			
92325		\$233.74	\$171.00					\$280.49			
92326		\$279.62	\$198.00					\$335.54			
92327		\$327.15	\$226.00					\$392.58			
92328		\$372.96	\$255.00					\$447.55			
92441		\$103.28	\$97.00					\$123.94	\$103.28		
92442		\$169.00	\$155.00					\$202.80	\$169.00		
92443		\$231.00	\$211.00					\$277.20	\$231.00		
92444		\$293.00	\$269.00					\$351.60	\$293.00		
92445		\$355.00	\$326.00					\$426.00	\$355.00		
92446		\$417.00	\$383.00					\$500.40	\$417.00		
92447		\$427.82	\$440.00					\$513.38	\$427.82		
92448		\$476.56	\$496.00					\$571.87	\$476.56		
92451		\$143.44	\$172.13					\$172.13			
92452		\$198.52	\$238.22					\$238.22			
92453		\$266.39	\$319.67					\$319.67			
92454		\$331.70	\$398.04					\$398.04			
92455		\$398.31	\$477.97					\$477.97			
92456		\$464.52	\$557.42					\$557.42			
92457		\$543.48	\$652.18					\$652.18			
92458		\$619.57	\$743.48					\$743.48			
94302		\$65.24								I.C.	
99111		I.C.									
99222		I.C.		I.C.	I.C.	I.C.		I.C.	I.C.		
99333		I.C.								I.C.	