

## ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION—Continued

<sup>1</sup> CPT/ <sup>2</sup> HPCPS	MOD	Status	Description	Physician work RVUs	Non- facility PE RVUs	Facility PE RVUs	Mal- practice RVUs	Non- facility total	Facility total	Global
D3410 .....	.....	N	Apicoect/perirad surg anter.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D3421 .....	.....	N	Root surgery bicuspid .....	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D3425 .....	.....	N	Root surgery molar .....	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D3426 .....	.....	N	Root surgery ea add root	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D3430 .....	.....	N	Retrograde filling .....	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D3450 .....	.....	N	Root amputation .....	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D3460 .....	.....	R	Endodontic endosseous implan.	0.00	0.00	0.00	0.00	0.00	0.00	YYY
D3470 .....	.....	N	Intentional replantation .....	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D3910 .....	.....	N	Isolation- tooth w rubb dam.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D3920 .....	.....	N	Tooth splitting .....	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D3950 .....	.....	N	Canal prep/fitting of dowel	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D3999 .....	.....	R	Endodontic procedure .....	0.00	0.00	0.00	0.00	0.00	0.00	YYY
D4210 .....	.....	I	Gingivectomy/plasty per quad.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4211 .....	.....	I	Gingivectomy/plasty per toot.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4240 .....	.....	N	Gingival flap proc w/ planin.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4241 .....	.....	N	Gngvl flap w rootplan 1-3 th.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4245 .....	.....	N	Apically positioned flap .....	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4249 .....	.....	N	Crown lengthen hard tis- sue.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4260 .....	.....	R	Osseous surgery per quadrant.	0.00	0.00	0.00	0.00	0.00	0.00	YYY
D4261 .....	.....	N	Osseous surgl- 3teethperquad.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4263 .....	.....	R	Bone replce graft first site	0.00	0.00	0.00	0.00	0.00	0.00	YYY
D4264 .....	.....	R	Bone replce graft each add.	0.00	0.00	0.00	0.00	0.00	0.00	YYY
D4265 .....	.....	N	Bio mtrls to aid soft/os reg	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4266 .....	.....	N	Guided tiss regen resorb	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4267 .....	.....	N	Guided tiss regen non- resorb.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4268 .....	.....	R	Surgical revision proce- dure.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4270 .....	.....	R	Pedicle soft tissue graft pr	0.00	0.00	0.00	0.00	0.00	0.00	YYY
D4271 .....	.....	R	Free soft tissue graft proc	0.00	0.00	0.00	0.00	0.00	0.00	YYY
D4273 .....	.....	R	Subepithelial tissue graft ..	0.00	0.00	0.00	0.00	0.00	0.00	YYY
D4274 .....	.....	N	Distal/proximal wedge proc.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4275 .....	.....	N	Soft tissue allograft .....	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4276 .....	.....	N	Con tissue w dble ped graft.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4320 .....	.....	N	Provision splnt intracoronal.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4321 .....	.....	N	Provisional splint extracoro	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4341 .....	.....	N	Periodontal scaling & root	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4342 .....	.....	N	Periodontal scaling 1- 3teeth.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4355 .....	.....	R	Full mouth debridement ....	0.00	0.00	0.00	0.00	0.00	0.00	YYY
D4381 .....	.....	R	Localized chemo delivery	0.00	0.00	0.00	0.00	0.00	0.00	YYY
D4910 .....	.....	N	Periodontal maint proce- dures.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4920 .....	.....	N	Unscheduled dressing change.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D4999 .....	.....	N	Unspecified periodontal proc.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D5110 .....	.....	N	Dentures complete max- illary.	0.00	0.00	0.00	0.00	0.00	0.00	XXX
D5120 .....	.....	N	Dentures complete man- dible.	0.00	0.00	0.00	0.00	0.00	0.00	XXX

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