

# Dental Schedule of Fees – ADF Services



Bupa Health Services Pty Ltd

Prices are effective from 1 July 2021.

Item Code	Description	ACT	NSW	NT	QLD	SA	TAS	VIC	WA
D011	Comprehensive Oral Examination	62.93	54.81	62.93	54.81	54.30	55.83	61.92	70.54
D012	Periodic Oral Examination	57.86	50.75	56.84	50.75	51.77	51.77	53.29	63.95
D013	Oral Examination - Limited	53.29	47.20	50.75	43.14	47.71	46.69	50.24	59.89
D014	Consultation	74.10	65.47	61.92	65.47	56.84	61.92	60.90	70.54
D015	Consultation - Extended (30minutes or more)	99.47	86.78	91.86	87.29	73.08	86.28	80.19	90.34
D016	Consultation by Referral including Examination	104.55	92.87	91.86	99.47	61.92	88.31	66.99	76.13
D017	Consultation by Referral - Extended (30minutes or more)	106.58	94.40	106.58	101.50	72.07	92.87	80.19	91.35
D018	Written Report (Not elsewhere included)	29.44	29.44	29.44	29.44	29.44	29.44	29.44	29.44
D019	Letter of Referral	23.35	23.35	23.35	23.35	23.35	23.35	23.35	23.35
D022	Intraoral Periapical or Bitewing Radiograph - Per Exposure	46.69	41.11	46.69	41.11	41.62	41.11	43.65	49.23
D025	Intraoral Radiograph - Occlusal, Maxillary, Mandibular - Per Exposure	68.51	59.89	58.87	52.78	51.77	52.27	51.77	61.92
D026	Cone Beam Volumetric Tomography - Scan Acquisition - Per Appointment	101.50	101.50	101.50	101.50	101.50	101.50	101.50	101.50
D031	Extraoral Radiograph - Maxillary, Mandibular - Per Exposure	58.87	52.27	58.87	51.77	50.75	51.77	50.75	59.89
D033	Lateral, Antero-Posterior, Postero-Anterior or Submento-Vertex - Per Exposure	119.77	105.56	121.80	105.56	91.86	105.56	93.38	107.08

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D035	Radiograph of Temporomandibular Joint - Per Exposure	127.38	112.67	127.89	112.67	97.95	112.67	99.47	113.17
D036	Cephalometric Radiograph - Lateral, Antero-Posterior, Postero-Anterior or Submento-Vertex - Per Exposure	105.56	92.37	91.86	105.56	86.28	86.28	86.28	99.98
D037	Panoramic Radiograph - Per Exposure	144.13	126.88	138.55	120.28	120.79	120.28	122.82	144.64
D038	Hand-Wrist Radiograph for Skeletal Age Assessment	61.92	54.30	62.93	58.87	51.26	60.90	52.78	60.90
D039	Computed Tomography of the Skull or Parts Thereof	152.25	132.97	152.25	132.97	149.21	132.97	150.22	177.63
D041	Bacteriological Examination	40.09	37.56	40.60	37.56	35.53	39.59	35.53	39.59
D042	Culture Examination And Identification	48.72	44.66	49.74	44.66	41.62	46.18	41.62	46.18
D043	Antibiotic Sensitivity Test	27.91	24.36	30.45	26.39	24.36	27.41	24.36	27.41
D044	Collection of Specimen For Pathology Examination	27.91	25.38	30.45	26.39	24.36	27.41	25.38	27.41
D047	Saliva Screening Test	24.36	21.32	24.87	22.33	20.30	23.35	21.32	23.35
D048	Bacteriological Screening Test	48.72	44.66	49.74	44.66	42.12	46.18	42.12	46.18
D051	Biopsy of Tissue	104.55	98.46	107.59	98.46	95.41	103.53	95.41	103.53
D052	Histopathological Examination of Tissue	59.89	54.81	60.90	56.33	53.80	58.36	53.80	58.36
D053	Cytological Investigation	59.89	54.81	60.90	56.33	53.80	58.36	53.80	58.36
D054	Oral Mucosal Screening	59.89	54.81	60.90	56.33	53.80	58.36	53.80	58.36
D055	Blood Sample	59.89	54.81	60.90	56.33	53.80	58.36	53.80	58.36
D056	Haematological Examination	59.89	54.81	60.90	56.33	53.80	58.36	53.80	58.36
D059	Comprehensive Head/Neck Cancer Examine and Risk Assessment	60.90	52.78	62.93	52.78	53.29	53.80	60.90	70.54
D061	Pulp Testing - Per Appointment	32.99	28.42	33.50	29.94	26.90	31.47	28.93	31.47
D071	Diagnostic Model - Per Model	70.54	61.41	64.96	56.84	55.83	61.41	58.87	65.47

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D072	Photographic Records - Intraoral - Per Appointment	47.71	41.62	41.11	36.03	28.93	36.03	31.97	34.00
D073	Photographic Records - Extraoral- Per Appointment	41.11	36.03	33.50	36.03	28.42	28.93	31.97	34.00
D074	Diagnostic Wax-Up	127.89	112.67	127.38	112.67	113.68	112.67	115.20	136.01
D075	Diagnostic Modelling	81.71	71.56	82.72	76.13	68.01	80.69	69.02	79.68
D081	Cephalometric Analysis - Excluding Radiographs	81.71	71.56	82.72	76.13	68.01	80.69	69.02	79.68
D082	Tooth-Jaw Size Prediction Analysis	54.30	47.71	54.81	49.74	44.66	51.77	45.68	51.26
D083	Tomographic Analysis	96.43	96.43	111.65	97.44	106.58	111.65	96.43	116.73
D085	Electromyographic Recording	43.65	38.57	43.65	38.57	35.02	38.57	35.02	38.57
D086	Electromyographic Analysis	28.42	29.44	27.41	40.60	28.42	28.42	38.57	22.33
D087	Cone Beam Volumetric Tomography Analysis and Interpretation (< One Dental Arch)	30.45	30.45	30.45	30.45	30.45	30.45	30.45	30.45
D088	Cone Beam Volumetric Tomography Analysis and Interpretation (Single Dental Arch)	35.53	35.53	35.53	35.53	35.53	35.53	35.53	35.53
D089	Cone Beam Volumetric Tomography Analysis and Interpretation (Both Dental Arches)	45.68	45.68	45.68	45.68	45.68	45.68	45.68	45.68
D090	Cone Beam Volumetric Tomography Analysis and Interpretation - Temporomandibular Joint	50.75	50.75	50.75	50.75	50.75	50.75	50.75	50.75
D091	Cone Beam Volumetric Tomography Analysis and Interpretation - Orofacial Structures	60.90	60.90	60.90	60.90	60.90	60.90	60.90	60.90

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D111	Removal of Plaque and/or Stain	57.86	51.77	57.86	51.77	58.36	53.80	56.33	62.93
D113	Recontouring and Polishing of Pre-existing Restoration(s) - Per Appointment	27.91	25.38	28.42	24.36	24.36	24.87	24.36	27.41
D114	Removal of Calculus - First Appointment	119.77	104.55	110.64	102.52	102.52	102.52	105.56	122.31
D115	Removal of Calculus - Subsequent Appointment	119.77	104.55	110.64	102.52	102.52	102.52	106.58	122.31
D116	Enamel Micro-Abrasion - Per Tooth	76.13	66.48	95.41	70.04	75.11	72.07	62.93	73.08
D117	Bleaching, Internal - Per Tooth	243.60	215.69	243.60	215.69	223.30	213.66	226.35	266.44
D118	Bleaching, External - Per Tooth	64.96	64.96	64.96	64.96	64.96	64.96	64.96	64.96
D119	Bleaching, Home Application - Per Arch	203.00	203.00	203.00	203.00	203.00	203.00	203.00	203.00
D121	Topical Application of Remineralisation and/or cariostatic agents, One Treatment	36.03	31.97	34.00	31.97	31.97	30.96	46.18	54.30
D122	Topical Remineralisation and/or cariostatic agents, Home Application - Per Arch	193.36	169.00	195.90	180.67	159.36	188.28	160.37	187.27
D123	Concentrated Remineralisation and/or cariostatic agents, application - Single Tooth	51.77	45.17	51.77	45.17	40.60	45.17	40.60	47.20
D131	Dietary Analysis and Advice	25.38	25.38	25.38	25.38	25.38	25.38	25.38	25.38
D141	Oral Hygiene Instruction	27.41	27.41	27.41	27.41	27.41	27.41	27.41	27.41
D151	Provision of a Mouthguard - Indirect	223.30	203.00	225.33	203.00	203.00	203.00	203.00	230.41

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D153	Bi-maxillary Mouthguard - Indirect	284.20	252.74	284.20	252.74	246.65	252.74	246.65	288.26
D161	Fissure and/or Tooth Surface Sealing - Per Tooth	49.74	44.66	49.74	44.66	40.60	41.62	48.72	56.33
D165	Desensitising Procedure - Per Appointment	43.14	38.57	97.95	40.60	31.97	42.12	36.54	53.80
D171	Odontoplasty - Per Tooth	27.41	24.36	27.41	25.88	23.85	26.90	23.35	27.41
D213	Treatment of Acute Periodontal Infection - Per Appointment	104.55	93.38	126.88	92.87	82.22	93.38	107.08	91.86
D221	Clinical Periodontal Analysis and Recording	89.83	79.17	104.04	64.96	34.51	52.78	41.62	50.75
D222	Periodontal Debridement - Per Tooth	62.42	62.42	62.42	62.42	62.42	62.42	62.42	62.42
D223	Non-Surgical Treatment of Peri-Implant Disease - Per Implant	41.62	41.62	41.62	41.62	41.62	41.62	41.62	41.62
D231	Gingivectomy - Per Tooth	94.40	94.40	94.40	94.40	146.67	94.40	164.43	94.40
D232	Periodontal Flap Surgery - Per Tooth	233.45	233.45	233.45	233.45	260.35	233.45	288.26	233.45
D233	Surgical Treatment of Peri-Implant Disease - Per Implant	243.60	243.60	243.60	243.60	243.60	243.60	243.60	243.60
D234	Application of Biologically Active Material	192.85	192.85	192.85	192.85	192.85	192.85	192.85	192.85
D235	Gingival Graft - Per Tooth, Implant or Extraction Socket	411.08	411.08	411.08	411.08	692.74	411.08	691.22	411.08
D236	Guided Tissue Regeneration - Per Tooth or Implant	411.08	406.00	456.75	426.30	584.13	411.08	585.66	426.30
D237	Guided Tissue Regeneration - Membrane Removal	253.75	253.75	253.75	203.00	253.75	253.75	253.75	263.90
D238	Periodontal Flap Surgery for Crown Lengthening - Per Tooth	224.32	218.23	224.32	205.03	194.88	205.03	242.59	224.32
D241	Root Resection - Per Root	205.03	205.03	213.15	223.30	208.08	223.30	209.09	223.30

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D242	Osseous Surgery - Per Tooth or Implant	385.70	385.70	365.40	369.46	461.83	385.70	460.30	385.70
D243	Osseous Graft - Per Tooth or Implant	406.00	406.00	507.50	406.00	615.60	406.00	614.58	507.50
D244	Osseous Graft - Block	812.00	812.00	812.00	812.00	730.80	812.00	730.80	812.00
D245	Periodontal Surgery Involving One Tooth	174.07	174.07	174.07	174.07	131.95	174.07	174.07	174.07
D246	Maxillary Sinus Augmentation - Trans-Alveolar Technique - Per Sinus	203.00	208.08	203.00	208.08	203.00	203.00	203.00	203.00
D247	Maxillary Sinus Augment - Lateral Wall Approach - Per Sinus	812.00	812.00	812.00	812.00	812.00	812.00	812.00	812.00
D250	Active Non-Surgical Periodontal Therapy - Per Quadrant	284.20	284.20	284.20	284.20	284.20	284.20	284.20	284.20
D251	Supportive Periodontal Therapy - Per Appointment	152.25	152.25	152.25	152.25	152.25	152.25	152.25	152.25
D311	Removal of a Tooth or Part(s) Thereof	176.61	156.31	174.58	152.25	129.92	157.33	135.00	157.33
D314	Sectional Removal of a Tooth or Part(s) Thereof	245.63	215.18	242.59	203.00	155.30	228.38	156.31	182.70
D322	Surgical Removal of a Tooth or Tooth Fragment not Requiring Removal of Bone or Tooth Division	279.13	247.66	280.14	243.60	216.20	233.45	216.20	237.00
D323	Surgical Removal of a Tooth or Tooth Fragment Requiring Removal of Bone	355.25	316.68	340.03	289.28	268.98	296.38	279.13	294.35
D324	Surgical Removal of a Tooth or Tooth Fragment Requiring Both Removal of Bone and Tooth Division	421.23	380.63	416.15	360.33	314.65	360.33	314.65	355.25
D331	Alveolectomy - Per Segment	253.75	253.75	243.60	243.60	172.55	243.60	267.96	253.75
D332	Ostectomy - Per Jaw	253.75	253.75	243.60	243.60	248.68	243.60	248.68	253.75
D337	Reduction of Fibrous Tuberosity	167.48	167.48	167.48	167.48	167.48	167.48	167.48	187.78
D338	Reduction of Flabby Ridge - Per Segment	167.48	167.48	167.48	167.48	167.48	167.48	167.48	187.78

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D341	Removal of Hyperplastic Tissue	167.48	167.48	167.48	167.48	167.48	167.48	167.48	187.78
D343	Repositioning of Muscle Attachments	277.10	277.10	277.10	277.10	277.10	277.10	277.10	277.10
D344	Vestibuloplasty	548.10	558.25	548.10	548.10	569.42	548.10	567.89	558.25
D345	Skin or Mucosal Graft	548.10	558.25	548.10	548.10	569.42	548.10	567.89	558.25
D351	Repair of Skin and Subcutaneous Tissue or Mucous Membrane	187.78	187.78	182.70	182.70	183.72	182.70	184.73	182.70
D352	Fracture of Maxilla or Mandible - Not Requiring Fixation	182.70	182.70	182.70	182.70	187.78	183.72	182.70	187.78
D353	Fracture of Maxilla or Mandible - With Wiring of Teeth or Intraoral fixation	253.75	253.75	253.75	253.75	258.83	255.78	253.75	258.83
D354	Fracture of Maxilla or Mandible - With External Fixation	426.30	426.30	426.30	426.30	431.38	431.38	426.30	436.45
D355	Fracture of Zygoma	426.30	426.30	426.30	426.30	431.38	431.38	426.30	436.45
D359	Fracture of the Maxilla or Mandible Requiring Open Reduction	456.75	456.75	456.75	456.75	461.83	461.83	456.75	466.90
D361	Mandible - Relocation Following Dislocation	96.43	96.43	96.43	96.43	96.43	96.43	96.43	96.43
D363	Mandible - Relocation Requiring Open Operation	142.10	142.10	142.10	142.10	147.18	143.12	142.10	152.25
D365	Osteotomy - Maxilla	730.80	730.80	730.80	730.80	760.24	740.95	735.88	740.95
D366	Osteotomy - Mandible	730.80	730.80	730.80	730.80	737.91	740.95	735.88	730.80
D371	Removal of Tumour, Cyst or Scar - Cutaneous, Subcutaneous or in Mucous Membrane	152.25	152.25	147.18	152.25	155.30	147.18	166.46	152.25
D373	Removal of Tumour, Cyst or Scar involving Muscle, Bone or other Deep Tissue	233.45	233.45	233.45	223.30	213.15	223.30	213.15	233.45
D375	Surgery to Salivary Duct	192.85	192.85	203.00	192.85	200.97	192.85	200.97	192.85

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D376	Surgery to Salivary Gland	233.45	233.45	233.45	223.30	203.00	223.30	203.00	233.45
D377	Removal or Repair of Soft Tissue (Not Elsewhere Defined)	86.78	86.78	96.43	86.78	86.78	86.78	86.78	86.78
D378	Surgical Removal of Foreign Body	166.46	166.46	166.46	166.46	162.40	166.46	166.46	166.46
D379	Marsupialisation of Cyst	147.18	147.18	152.25	142.10	142.10	152.25	148.70	142.10
D381	Surgical Exposure of Unerupted Tooth - Per Tooth	208.08	233.45	223.30	223.30	208.08	223.30	210.11	223.30
D382	Surgical Exposure and Attachment of Device for Orthodontic Traction	291.81	291.81	291.81	291.81	263.90	291.81	291.81	291.81
D384	Repositioning of Displaced Tooth/Teeth - Per Tooth	111.65	111.65	111.65	111.65	86.28	111.65	86.28	131.95
D385	Surgical Repositioning of Unerupted Tooth - Per Tooth	271.01	271.01	271.01	271.01	271.01	271.01	271.01	271.01
D386	Splinting of Displaced Tooth/Teeth - Per Tooth	152.25	152.25	152.25	152.25	142.10	152.25	142.10	152.25
D387	Replantation and Splinting of a Tooth - Per Tooth	152.25	152.25	152.25	152.25	152.25	152.25	152.25	152.25
D388	Transplantation of Tooth or Tooth Bud	396.36	396.36	396.36	396.36	396.36	396.36	396.36	396.36
D389	Surgery to Isolate and Preserve Neurovascular Tissue	65.98	68.01	81.20	65.98	50.75	56.84	66.99	75.11
D391	Frenectomy	182.70	182.70	182.70	182.70	167.48	182.70	179.66	182.70
D392	Drainage of Abscess	71.05	71.05	96.43	63.95	62.93	62.93	62.93	71.05
D393	Surgery involving the Maxillary Antrum	203.00	208.08	208.08	208.08	208.08	208.08	208.08	208.08
D394	Surgery for Osteomyelitis	304.50	304.50	304.50	304.50	304.50	314.65	304.50	304.50
D395	Repair of Nerve Trunk	131.95	131.95	131.95	131.95	131.95	131.95	131.95	131.95
D399	Control of Reactionary or Secondary Post-Operative Haemorrhage	40.60	40.60	40.60	40.60	30.45	40.60	31.47	40.60



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D411	Direct Pulp Capping	61.41	53.29	61.41	54.81	32.48	53.29	33.50	54.81
D412	Incomplete Endodontic Therapy (Tooth not Suitable for Further Treatment)	131.95	121.80	142.10	121.80	121.80	142.10	121.80	142.10
D414	Pulpotomy	106.58	101.50	126.88	101.50	81.20	126.88	82.22	121.80
D415	Complete Chemo-Mechanical Preparation of Root Canal - One Canal	258.83	253.75	263.90	263.90	233.45	304.50	243.60	253.75
D416	Complete Chemo-Mechanical Preparation of Root Canal - Each Additional Canal	142.10	126.88	123.83	131.95	88.31	162.40	92.37	121.80
D417	Root Canal Obturation - One Canal	258.83	253.75	263.90	263.90	257.81	304.50	259.84	253.75
D418	Root Canal Obturation - Each Additional Canal	142.10	126.88	121.80	131.95	88.31	162.40	92.37	121.80
D419	Extirpation of Pulp or Debridement of Root Canal(s) ? Emergency or Palliative	235.48	208.08	235.48	212.64	155.30	212.64	155.30	212.64
D421	Resorbable Root Canal Filling - Primary Tooth	152.25	152.25	152.25	152.25	173.06	137.03	131.95	131.95
D431	Periapical Curettage - Per Root	162.40	162.40	182.70	162.40	167.48	162.40	167.48	162.40
D432	Apicectomy - Per Root	271.01	271.01	271.01	271.01	225.33	271.01	271.01	271.01
D433	Exploratory Periradicular Surgery	162.40	162.40	182.70	162.40	167.48	162.40	167.48	162.40
D434	Apical Seal - Per Canal	352.21	352.21	352.21	352.21	304.50	352.21	304.50	352.21
D436	Sealing of Perforation	167.48	167.48	162.40	152.25	131.95	162.40	155.80	162.40
D437	Surgical Treatment and Repair of External Root Resorption - Per Tooth	352.21	352.21	352.21	352.21	233.45	352.21	223.30	352.21
D438	Hemisection	181.18	181.18	181.18	181.18	167.48	181.18	181.18	181.18
D445	Exploration and/or Negotiation of a Calcified Canal - Per Canal, Per Appointment	101.50	101.50	126.88	101.50	86.28	101.50	88.31	111.65
D451	Removal of Root Filling - Per Canal	101.50	101.50	106.58	101.50	76.13	103.53	76.13	111.65

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D452	Removal of a Cemented Root Canal Post or Post Crown	131.95	131.95	142.10	131.95	126.88	131.95	131.95	142.10
D453	Removal or Bypassing Fractured Endodontic Instrument	131.95	131.95	142.10	131.95	126.88	131.95	131.95	142.10
D455	Additional Visit for Irrigation and/or Dressing of the Root Canal System ? Per Tooth	126.88	121.80	147.18	126.88	97.44	137.03	124.85	131.95
D457	Obturation of Resorption Defect or Perforation (Non-Surgical)	103.53	103.53	103.53	103.53	103.53	103.53	103.53	103.53
D458	Interim Therapeutic Root Filling - Per Tooth	131.95	131.95	131.95	131.95	116.73	131.95	125.86	131.95
D511	Metallic Restoration - One Surface - Direct	152.25	133.47	152.25	119.77	113.68	159.36	113.68	126.88
D512	Metallic Restoration - Two Surfaces - Direct	182.70	162.40	170.52	144.13	135.00	185.75	138.04	157.83
D513	Metallic Restoration - Three Surfaces - Direct	213.15	188.79	193.87	170.52	164.43	226.35	164.43	191.33
D514	Metallic Restoration - Four Surfaces - Direct	243.60	215.69	230.41	192.85	179.66	253.75	179.66	207.06
D515	Metallic Restoration - Five Surfaces - Direct	289.28	256.29	274.05	216.70	195.90	268.98	200.97	225.33
D521	Adhesive Restoration - One Surface - Anterior Tooth - Direct	166.46	147.68	153.27	133.47	122.82	152.25	122.82	140.58
D522	Adhesive Restoration - Two Surfaces - Anterior Tooth - Direct	190.82	171.54	186.76	155.30	146.16	178.64	147.18	169.51
D523	Adhesive Restoration - Three Surfaces - Anterior Tooth - Direct	227.36	201.48	199.96	188.28	168.49	203.00	168.49	191.33
D524	Adhesive Restoration - Four Surfaces - Anterior Tooth - Direct	251.72	223.30	239.54	228.88	185.75	233.45	185.75	211.12
D525	Adhesive Restoration - Five Surfaces - Anterior Tooth - Direct	304.50	269.99	278.11	258.83	220.26	256.80	220.26	253.75

Item Code	Description	ACT	NSW	NT	QLD	SA	TAS	VIC	WA
D526	Adhesive Restoration - Veneer - Anterior Tooth - Direct	304.50	304.50	309.58	304.50	251.72	304.50	251.72	304.50
D531	Adhesive Restoration - One Surface - Posterior Tooth - Direct	170.52	148.19	172.55	147.68	131.95	157.33	131.95	150.22
D532	Adhesive Restoration - Two Surfaces - Posterior Tooth - Direct	217.21	188.79	199.96	174.58	165.45	190.82	165.45	188.79
D533	Adhesive Restoration - Three Surfaces - Posterior Tooth - Direct	245.63	215.69	233.45	203.00	200.97	218.23	195.90	227.36
D534	Adhesive Restoration - Four Surfaces - Posterior Tooth - Direct	280.14	248.68	276.08	243.60	210.11	243.60	209.09	242.59
D535	Adhesive Restoration - Five Surfaces - Posterior Tooth - Direct	304.50	269.99	304.50	269.99	225.33	274.05	225.33	258.83
D536	Adhesive Restoration - Veneer - Posterior Tooth - Direct	309.58	304.50	309.58	304.50	251.72	304.50	251.72	304.50
D541	Metallic Restoration - One Surface - Indirect	431.38	431.38	431.38	431.38	406.00	431.38	431.38	431.38
D542	Metallic Restoration - Two Surfaces - Indirect	634.88	634.88	634.88	634.88	548.10	634.88	634.88	634.88
D543	Metallic Restoration - Three Surfaces - Indirect	862.75	862.75	862.75	862.75	649.60	862.75	872.39	862.75
D544	Metallic Restoration - Four Surfaces - Indirect	1015.00	1015.00	1015.00	1015.00	933.80	1015.00	1015.00	1015.00
D545	Metallic Restoration - Five Surfaces - Indirect	1116.50	1116.50	1116.50	1116.50	1015.00	1116.50	1151.01	1116.50
D551	Tooth-Coloured Restoration - One Surface - Indirect	456.75	456.75	456.75	456.75	334.95	456.75	334.95	456.75
D552	Tooth-Coloured Restoration - Two Surfaces - Indirect	720.65	720.65	720.65	720.65	695.28	720.65	695.28	720.65

Item Code	Description	ACT	NSW	NT	QLD	SA	TAS	VIC	WA
D553	Tooth-Coloured Restoration - Three Surfaces - Indirect	1015.00	1015.00	1116.50	1015.00	832.30	1116.50	923.65	1015.00
D554	Tooth-Coloured Restoration - Four Surfaces - Indirect	1116.50	1116.50	1218.00	1116.50	893.20	1218.00	1065.75	1116.50
D555	Tooth-Coloured Restoration - Five Surfaces - Indirect	1218.00	1218.00	1370.25	1218.00	923.65	1319.50	1207.85	1218.00
D556	Tooth - Coloured Restoration - Veneer - Indirect	1116.50	1116.50	1116.50	1116.50	837.38	1116.50	1119.55	1116.50
D571	Adaptation of New Restoration to Existing Removable Prosthesis - Per Tooth	27.41	27.41	27.41	27.41	27.41	27.41	27.41	27.41
D572	Provisional (Intermediate/Temporary) Restoration - Per Tooth	105.05	92.87	119.77	81.20	51.77	93.38	51.77	55.83
D574	Metal Band	152.25	133.47	116.73	113.68	82.22	128.91	82.22	86.28
D575	Pin Retention - Per Pin	38.06	32.99	37.05	32.99	30.45	33.50	33.50	38.57
D577	Cusp Capping - Per Cusp	35.53	31.47	35.53	31.47	27.41	31.47	27.41	31.47
D578	Restoration of an Incisal Corner - Per Corner	35.53	31.47	35.53	31.47	27.41	31.47	27.41	31.47
D579	Bonding of Tooth Fragment	167.48	147.68	172.55	147.68	127.89	153.77	129.92	147.68
D586	Crown - Metallic - With Tooth Preparation - Preformed	182.70	182.70	182.70	182.70	157.33	182.70	160.37	182.70
D587	Crown - Metallic - Minimal Tooth Preparation - Preformed	164.43	164.43	164.43	164.43	132.46	164.43	142.10	164.43
D588	Crown - Tooth-Coloured - Preformed	284.20	284.20	284.20	284.20	284.20	284.20	284.20	284.20
D595	Removal of Indirect Restoration	111.65	111.65	111.65	111.65	109.62	111.65	109.62	111.65
D596	Recementing of Indirect Restoration	107.08	107.08	107.08	107.08	105.56	107.08	105.56	107.08
D597	Post - Direct	162.40	162.40	162.40	162.40	154.28	162.40	162.40	162.40
D611	Full Crown - Acrylic Resin - Indirect	710.50	710.50	710.50	710.50	619.15	710.50	619.15	710.50

Item Code	Description	ACT	NSW	NT	QLD	SA	TAS	VIC	WA
D613	Full Crown - Non-Metallic - Indirect	1725.50	1624.00	1674.75	1624.00	1507.28	1674.75	1573.25	1674.75
D615	Full Crown - Veneered - Indirect	1725.50	1624.00	1674.75	1624.00	1476.83	1674.75	1532.65	1674.75
D618	Full Crown - Metallic - Indirect	1624.00	1624.00	1624.00	1624.00	1319.50	1624.00	1385.48	1624.00
D625	Post and Core for Crown ? Indirect	406.00	406.00	406.00	406.00	324.80	406.00	355.25	406.00
D627	Preliminary Restoration For Crown - Direct	228.38	203.00	228.38	203.00	156.31	228.38	223.30	228.38
D629	Post and Root Cap - Indirect	406.00	406.00	406.00	406.00	355.25	406.00	367.43	406.00
D631	Provisional Crown - Per Tooth	203.00	203.00	203.00	203.00	131.95	203.00	152.25	203.00
D632	Provisional Bridge Pontic - Per Pontic	284.20	284.20	284.20	284.20	113.68	284.20	113.68	284.20
D633	Provisional Implant Abutment - Per Abutment	203.00	203.00	203.00	203.00	138.04	203.00	145.15	203.00
D634	Provisional Implant Restoration - Per Implant Abutment	304.50	304.50	304.50	304.50	106.58	304.50	111.65	304.50
D642	Bridge Pontic - Direct - Per Pontic	507.50	507.50	507.50	507.50	350.18	507.50	355.25	507.50
D643	Bridge Pontic - Indirect - Per Pontic	1218.00	1218.00	1218.00	1218.00	923.65	1218.00	1065.75	1218.00
D644	Semi-Fixed Attachment	253.75	253.75	263.90	253.75	253.75	263.90	253.75	263.90
D645	Precision or Magnetic Attachment	253.75	253.75	263.90	253.75	253.75	263.90	253.75	263.90
D649	Retainer for Bonded Fixture - Indirect - Per Tooth	299.43	294.35	324.80	294.35	192.85	294.35	243.60	294.35
D651	Recementing Crown or Veneer	137.03	121.80	142.10	121.80	113.68	121.80	113.68	124.34
D652	Recementing Bridge or Splint - Per Abutment	167.48	147.68	167.48	147.68	113.68	148.70	113.68	125.35
D653	Rebonding of Bridge or Splint where Retreatment of Bridge Surface is required	195.90	174.58	152.25	128.91	127.89	142.10	127.89	143.12
D655	Removal of Crown	135.00	116.73	117.74	116.73	72.07	104.04	72.07	77.14
D656	Removal of Bridge or Splint	152.25	133.47	152.25	133.47	87.29	133.98	87.29	94.40
D658	Repair of Crown, Bridge or Splint - Indirect	228.38	201.48	228.38	201.48	182.70	201.48	182.70	199.45

Item Code	Description	ACT	NSW	NT	QLD	SA	TAS	VIC	WA
D659	Repair of Crown, Bridge or Splint - Direct	182.70	161.89	182.70	154.28	144.13	186.25	148.19	172.55
D661	Fitting of Implant Abutment - Per Abutment	1015.00	1015.00	1015.00	1015.00	730.80	1015.00	730.80	1015.00
D663	Removal of Implant and/or Retention Device	304.50	304.50	304.50	304.50	268.98	304.50	276.08	304.50
D664	Fitting of Bar for Denture - Per Abutment	304.50	304.50	304.50	304.50	203.00	304.50	203.00	304.50
D665	Prosthesis with Resin Base Attached to Implants - Removable - Per Arch	1015.00	1015.00	1015.00	1015.00	1035.30	1015.00	1035.30	1015.00
D666	Prosthesis with Metal Frame Attached to Implants - Fixed - Per Arch	1218.00	1218.00	1218.00	1218.00	1035.30	1218.00	1035.30	1218.00
D667	Prosthesis with Metal Frame Attached to Implants - Removable - Per Arch	1218.00	1218.00	1218.00	1218.00	1035.30	1218.00	1035.30	1218.00
D668	Fixture or Abutment Screw Removal and Replacement	182.70	182.70	182.70	182.70	106.58	182.70	106.58	182.70
D669	Removal and Reattachment of Prosthesis Fixed to Implant(s) - Per Implant	203.00	203.00	203.00	203.00	199.96	203.00	182.70	223.30
D671	Full Crown attached to Osseointegrated Implant ? Non-Metallic ? Indirect	1725.50	1624.00	1674.75	1624.00	1573.25	1684.90	1573.25	1674.75
D672	Full Crown attached to Osseointegrated Implant ? Veneered ? Indirect	1725.50	1624.00	1674.75	1624.00	1573.25	1684.90	1868.11	1674.75
D673	Full Crown attached to Osseointegrated Implant ? Metallic ? Indirect	1725.50	1624.00	1674.75	1624.00	1339.80	1684.90	1441.30	1674.75
D678	Diagnostic Template	345.10	345.10	355.25	324.80	314.65	355.25	314.65	355.25
D679	Surgical Implant Guide	355.25	355.25	355.25	365.40	350.18	355.25	355.25	355.25
D684	Insertion of First Stage of Two-Stage Endosseous Implant ? Per Implant	1877.75	1877.75	1877.75	1877.75	1319.50	1877.75	1415.93	1877.75
D688	Insertion of One Stage Endosseous Implant - Per Implant	1877.75	1877.75	1877.75	1877.75	1319.50	1877.75	1415.93	1877.75

Item Code	Description	ACT	NSW	NT	QLD	SA	TAS	VIC	WA
D689	Provisional Implant	416.15	416.15	416.15	416.15	416.15	416.15	416.15	416.15
D690	Provisional Retention or Anchorage Device	304.50	304.50	304.50	304.50	304.50	306.53	306.53	304.50
D691	Second Stage Surgery of Two Stage Endosseous Implant - Per Implant	558.25	558.25	507.50	507.50	314.65	507.50	314.65	558.25
D711	Complete Maxillary Denture	1218.00	1218.00	1319.50	1268.75	974.40	1218.00	1015.00	1218.00
D712	Complete Mandibular Denture	1218.00	1218.00	1319.50	1268.75	974.40	1218.00	1015.00	1218.00
D713	Provisional Complete Maxillary Denture	487.20	487.20	527.80	507.50	395.85	487.20	400.93	487.20
D714	Provisional Complete Mandibular Denture	487.20	487.20	527.80	507.50	395.85	487.20	400.93	487.20
D715	Provisional Complete Maxillary and Mandibular Dentures	974.40	974.40	1055.60	1015.00	766.33	974.40	795.76	974.40
D716	Metal Palate or Plate	345.10	345.10	345.10	345.10	334.95	345.10	345.10	345.10
D719	Complete Maxillary And Mandibular Denture	2436.00	2436.00	2639.00	2537.50	1948.80	2436.00	2030.00	2436.00
D721	Partial Maxillary Denture - Resin Base	710.50	710.50	710.50	710.50	517.65	710.50	527.80	710.50
D722	Partial Mandibular Denture - Resin Base	710.50	710.50	710.50	710.50	517.65	710.50	527.80	710.50
D723	Provisional Partial Maxillary Denture	284.20	286.23	284.20	284.20	207.06	284.20	211.12	284.20
D724	Provisional Partial Mandibular Denture	284.20	286.23	284.20	284.20	207.06	284.20	211.12	284.20
D727	Partial Maxillary Denture - Cast Metal Framework	1324.58	1319.50	1370.25	1319.50	1157.10	1370.25	1187.55	1370.25
D728	Partial Mandibular Denture - Cast Metal Framework	1324.58	1319.50	1370.25	1319.50	1157.10	1370.25	1187.55	1370.25
D731	Retainer - Per Tooth	45.68	45.68	45.68	45.68	38.57	45.68	53.29	45.68
D732	Occlusal Rest - Per Rest	45.68	45.68	45.68	45.68	38.57	45.68	53.29	45.68
D733	Tooth/Teeth (Partial Denture)	45.68	45.68	45.68	45.68	44.15	45.68	48.21	45.68
D734	Overlays - Per Tooth	50.75	50.75	50.75	50.75	51.77	50.75	69.02	50.75
D735	Precision or Magnetic Denture Attachment	223.30	223.30	223.30	223.30	157.33	223.30	213.15	243.60

Item Code	Description	ACT	NSW	NT	QLD	SA	TAS	VIC	WA
D736	Immediate Tooth Replacement - Per Tooth	45.68	45.68	45.68	41.11	43.14	45.68	47.71	45.68
D737	Resilient Lining	225.33	225.33	253.75	223.30	208.08	243.60	242.59	253.75
D738	Wrought Bar	131.95	131.95	131.95	131.95	132.97	131.95	139.56	131.95
D739	Metal Backing - Per Backing	69.02	69.02	69.02	69.02	50.75	69.02	69.02	69.02
D741	Adjustment of a Denture	50.75	50.75	50.75	50.75	51.77	50.75	50.75	50.75
D743	Relining - Complete Denture - Processed	406.00	406.00	431.38	406.00	416.15	456.75	426.30	456.75
D744	Relining - Partial Denture - Processed	390.78	390.78	390.78	390.78	390.78	390.78	390.78	390.78
D745	Remodelling - Complete Denture	436.45	436.45	436.45	436.45	431.38	446.60	431.38	446.60
D746	Remodelling - Partial Denture	404.48	404.48	404.48	404.48	404.48	404.48	404.48	404.48
D751	Relining - Complete Denture - Direct	223.30	203.00	213.15	223.30	182.70	223.30	213.15	223.30
D752	Relining - Partial Denture - Direct	182.70	182.70	182.70	182.70	150.22	182.70	170.52	182.70
D753	Cleaning and Polishing of Pre-Existing Denture	45.68	45.68	45.68	45.68	65.47	45.68	59.38	45.68
D754	Denture Base Modification	154.28	154.28	182.70	154.28	367.43	154.28	368.95	182.70
D761	Reattaching Pre-Existing Clasp to Denture	147.18	147.18	152.25	147.18	123.83	137.03	123.83	152.25
D762	Replacing/Adding Clasp to Denture - Per Clasp	167.48	167.48	172.55	167.48	129.92	157.33	129.92	172.55
D763	Repairing Broken Base of a Complete Denture	152.25	152.25	152.25	152.25	131.95	152.25	131.95	152.25
D764	Repairing Broken Base of a Partial Denture	152.25	152.25	152.25	152.25	131.95	152.25	131.95	152.25
D765	Replacing/Adding New Tooth on Denture - Per Tooth	165.45	162.40	167.48	152.25	131.95	152.25	131.95	167.48
D766	Reattaching Existing Tooth on Denture - Per Tooth	147.18	147.18	152.25	147.18	121.80	147.18	121.80	152.25
D768	Adding Tooth to Partial Denture to Replace an Extracted/Decoronated Tooth - Per Tooth	167.98	167.98	167.98	167.98	167.98	167.98	174.07	167.98



Item Code	Description	ACT	NSW	NT	QLD	SA	TAS	VIC	WA
D769	Repair or Addition to Metal Casting	203.00	203.00	203.00	203.00	162.40	203.00	187.78	203.00
D771	Tissue Conditioning Preparatory to Impressions ? Per Application	101.50	101.50	101.50	91.35	78.16	91.35	98.46	91.35
D772	Splint - Resin - Indirect	274.56	274.56	274.56	274.56	255.78	274.56	274.56	274.56
D773	Splint - Metal - Indirect	304.50	304.50	304.50	304.50	294.35	304.50	294.35	304.50
D774	Obturator	91.35	91.35	172.55	111.65	137.03	203.00	129.92	111.65
D775	Characterisation of Denture Base	52.78	52.78	52.78	52.78	51.77	52.78	52.27	52.78
D776	Impression - Denture Repair/Modification	58.36	51.77	57.86	51.77	60.39	55.83	60.39	70.54
D777	Identification	42.63	42.63	42.63	42.63	42.63	42.63	42.63	42.63
D778	Inlay for Denture Tooth	162.40	162.40	152.25	152.25	157.33	154.28	152.25	157.33
D779	Surgical Guide for an Immediate Denture	203.00	203.00	203.00	203.00	152.25	203.00	152.25	203.00
D811	Passive Removable Appliance - Per Arch	253.75	253.75	253.75	243.60	246.65	243.60	247.66	274.05
D821	Active Removable Appliance - Per Arch	964.25	964.25	964.25	964.25	695.28	913.50	695.28	964.25
D823	Functional Orthopaedic Appliance - Custom Fabrication	1730.58	1730.58	1730.58	1730.58	1471.75	1730.58	1730.58	1730.58
D824	Functional Orthopaedic Appliance - Prefabricated	406.00	406.00	406.00	406.00	406.00	406.00	406.00	406.00
D825	Sequential Plastic Aligners - Per Arch	925.68	925.68	925.68	925.68	925.68	925.68	925.68	925.68
D829	Partial Banding ? Per Arch	661.27	661.27	661.27	661.27	661.27	661.27	661.27	661.27
D831	Full Arch Banding - Per Arch	1583.40	1583.40	1583.40	1583.40	1583.40	1583.40	1583.40	1583.40
D833	Removal of Banding - Per Arch	76.13	66.99	61.92	66.99	57.86	60.90	60.90	70.54
D841	Fixed Palatal or Lingual Arch Appliance	436.45	436.45	436.45	436.45	436.45	436.45	436.45	436.45
D842	Partial Banding for Inter-Maxillary Elastics (Vertical and/or Cross Elastic)	522.73	522.73	522.73	522.73	522.73	522.73	522.73	522.73

Item Code	Description	ACT	NSW	NT	QLD	SA	TAS	VIC	WA
D843	Expansion Appliance Fixed - Per Arch	1319.50	1319.50	1319.50	1319.50	781.55	1319.50	781.55	1522.50
D845	Passive Appliance ? Fixed	385.70	385.70	385.70	385.70	355.25	385.70	355.25	385.70
D846	Minor Tooth Guidance - Fixed	253.75	258.83	253.75	258.83	233.45	253.75	233.45	253.75
D851	Extraoral Appliance	812.00	812.00	862.75	812.00	558.25	862.75	558.25	862.75
D862	Bonding of Attachment for Appliance of Orthodontic Force	121.80	121.80	121.80	121.80	183.72	121.80	187.27	121.80
D871	Orthodontic Adjustment	152.25	152.25	152.25	152.25	152.25	152.25	152.25	152.25
D872	Re-Attachment of Passive Appliance - Fixed	107.08	107.08	107.08	107.08	107.08	107.08	107.08	107.08
D873	Repair of Passive Appliance - Fixed	152.25	152.25	152.25	152.25	138.04	152.25	142.10	152.25
D874	Removal of Passive Appliance - Fixed	52.78	52.78	52.78	52.78	52.78	52.78	52.78	52.78
D875	Repair of Removable Appliance - Resin Base	152.25	152.25	152.25	152.25	138.04	152.25	142.10	152.25
D876	Repair of Removable Appliance - Clasp, Spring or Tooth	152.25	152.25	152.25	152.25	157.33	152.25	158.34	152.25
D877	Addition to Removable Appliance - Clasp, Spring or Tooth	157.33	157.33	157.33	157.33	157.33	157.33	157.33	157.33
D878	Relining - Removable Appliance - Processed	203.00	203.00	203.00	203.00	203.00	203.00	203.00	203.00
D911	Palliative Care	90.34	80.69	90.34	72.57	55.83	87.29	57.86	73.08
D915	After Hours Callout	111.14	97.44	114.70	103.02	93.38	106.58	91.35	106.07
D916	Travel to Provide Services	72.57	63.95	76.13	68.51	60.90	71.05	60.90	70.54
D926	Individually Made Tray - Medicament(s)	118.76	108.61	152.25	106.58	103.53	116.73	106.58	106.58
D927	Provision of Medication/Medicament	48.72	48.72	48.72	48.72	48.72	48.72	48.72	48.72
D928	Intravenous Cannulation and Establishment of Infusion	111.65	101.50	114.70	105.05	92.37	108.61	98.46	108.10
D941	Local Anaesthesia	42.63	42.63	42.63	42.63	42.63	42.63	42.63	42.63

Item Code	Description	ACT	NSW	NT	QLD	SA	TAS	VIC	WA
D942	Sedation - Intravenous - Per 30min or Part Thereof	104.55	101.50	81.71	101.50	73.08	103.02	93.38	104.55
D943	Sedation - Inhalation - Per 30min or Part Thereof	64.45	56.33	65.98	56.33	56.84	56.33	56.33	56.84
D944	Relaxation Therapy	161.39	161.39	161.39	161.39	161.39	161.39	161.39	161.39
D945	Low Level Laser Therapy - Per Appointment	50.75	50.75	50.75	50.75	50.75	50.75	50.75	50.75
D949	Treatment Under General Anaesthesia/Sedation	144.13	126.88	140.07	93.38	125.86	106.58	127.89	105.05
D961	Minor Occlusal Adjustment - Per Appointment	40.60	31.47	36.54	33.50	30.45	34.51	32.48	34.51
D963	Clinical Occlusal Analysis, including Muscle and Joint Palpation	102.01	88.81	101.50	76.13	60.90	101.50	60.90	69.02
D964	Registration and Mounting of Models for Occlusal Analysis	97.44	87.29	103.53	90.34	83.23	95.41	83.23	95.41
D965	Occlusal Splint	761.25	670.92	618.14	562.31	451.68	678.02	477.05	562.31
D966	Adjustment of Pre-Existing Occlusal Splint ? Per Appointment	106.58	91.35	96.93	86.28	71.05	99.47	86.28	102.01
D967	Pantographic Tracing	228.38	201.48	184.22	137.03	147.18	161.89	147.18	174.07
D968	Occlusal Adjustment following Occlusal Analysis ? Per Appointment	180.67	158.85	119.26	121.80	124.34	116.73	113.68	131.44
D971	Adjunctive Physical Therapy for Temporomandibular Joint and Associated Structures	40.60	40.60	45.68	40.60	38.57	40.60	38.57	40.60
D972	Repair/Addition - Occlusal Splint	192.85	169.51	192.85	169.51	152.25	169.51	155.30	174.07
D981	Splinting and Stabilisation - Direct - Per Tooth	119.77	106.58	119.77	106.58	64.96	106.58	69.02	77.14



Item Code	Description	ACT	NSW	NT	QLD	SA	TAS	VIC	WA
D982	Enamel Stripping ? Per Appointment	74.10	65.98	58.87	106.58	45.68	40.60	45.68	48.72
D983	Single Arch Oral appliance for Diagnosed Snoring and Obstructive Snoring and Sleep Apnoea	893.20	893.20	893.20	893.20	791.70	893.20	791.70	893.20
D984	Bi-maxillary Oral appliance for Diagnosed Snoring and Obstructive Snoring and Sleep Apnoea	1471.75	1471.75	1471.75	1319.50	1294.13	1319.50	1294.13	1319.50
D985	Repair/Addition - Snoring or Sleep Apnoea Device	192.85	169.51	192.85	169.51	137.03	169.51	155.30	174.07
D986	Post-Operative Care where not otherwise included	51.77	47.71	52.78	47.71	45.68	49.74	45.68	50.75
D987	Recontour Tissue - Per Appointment	74.10	65.47	61.92	65.47	55.83	60.90	60.90	70.54
D990	Treatment no otherwise included (specify)	32.48	35.53	32.48	31.47	51.77	34.51	35.53	31.47

Dental Schedule of Fees will be periodically reviewed and may be updated from time to time.

To apply to join the Bupa ADF Provider Network please contact our Customer Service Team at [adfscproviders@bupa.com.au](mailto:adfscproviders@bupa.com.au) to request an Expression of Interest Form.