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

CPT [1]/ HCPCS [2]	MOD	Status	Description	Physician work RVUs [3]	Practice expense RVUs [4]	Malpractice RVUs	Total	Global period	Update
D3310	.....	N	Anterior	0.00	0.00	0.00	0.00	XXX	0
D3320	.....	N	Root canal therapy 2 canals	0.00	0.00	0.00	0.00	XXX	0
D3330	.....	N	Root canal therapy 3 canals	0.00	0.00	0.00	0.00	XXX	0
D3346	.....	N	Retreat root canal anterior	0.00	0.00	0.00	0.00	XXX	0
D3347	.....	N	Retreat root canal bicuspid	0.00	0.00	0.00	0.00	XXX	0
D3348	.....	N	Retreat root canal molar	0.00	0.00	0.00	0.00	XXX	0
D3351	.....	N	Apexification/recalc initial	0.00	0.00	0.00	0.00	XXX	0
D3352	.....	N	Apexification/recalc interim	0.00	0.00	0.00	0.00	XXX	0
D3353	.....	N	Apexification/recalc final	0.00	0.00	0.00	0.00	XXX	0
D3410	.....	N	Apicoect/perirad surg anter	0.00	0.00	0.00	0.00	XXX	0
D3421	.....	N	Root surgery bicuspid	0.00	0.00	0.00	0.00	XXX	0
D3425	.....	N	Root surgery molar	0.00	0.00	0.00	0.00	XXX	0
D3426	.....	N	Root surgery ea add root	0.00	0.00	0.00	0.00	XXX	0
D3430	.....	N	Retrograde filling	0.00	0.00	0.00	0.00	XXX	0
D3450	.....	N	Root amputation	0.00	0.00	0.00	0.00	XXX	0
D3460	.....	R	Endodontic endosseous implan	0.00	0.00	0.00	0.00	YYY	N
D3470	.....	N	Intentional replantation	0.00	0.00	0.00	0.00	XXX	0
D3910	.....	N	Isolation- tooth w rubb dam	0.00	0.00	0.00	0.00	XXX	0
D3920	.....	N	Tooth splitting	0.00	0.00	0.00	0.00	XXX	0
D3950	.....	N	Canal prep/fitting of dowel	0.00	0.00	0.00	0.00	XXX	0
D3960	.....	N	Bleaching of discolored toot	0.00	0.00	0.00	0.00	XXX	0
D3999	.....	R	Endodontic procedure	0.00	0.00	0.00	0.00	YYY	N
D4210	.....	G	Gingivectomy/plasty per quad	0.00	0.00	0.00	0.00	XXX	0
D4211	.....	G	Gingivectomy/plasty per toot	0.00	0.00	0.00	0.00	XXX	0
D4220	.....	N	Gingival curettage per quadr	0.00	0.00	0.00	0.00	XXX	0
D4240	.....	N	Gingival flap proc w/ planin	0.00	0.00	0.00	0.00	XXX	0
D4249	.....	N	Crown lengthen hard tissue	0.00	0.00	0.00	0.00	XXX	0
D4250	.....	R	Mucogingival surg per quadra	0.00	0.00	0.00	0.00	YYY	N
D4260	.....	R	Osseous surgery per quadrant	0.00	0.00	0.00	0.00	YYY	S
D4261	.....	D	Bone replace graft single si	0.00	0.00	0.00	0.00	YYY	S
D4262	.....	D	Bone replace graft mult site	0.00	0.00	0.00	0.00	YYY	N
D4263	.....	R	Bone replce graft first site	0.00	0.00	0.00	0.00	YYY	N
D4264	.....	R	Bone replce graft each add	0.00	0.00	0.00	0.00	YYY	N
D4266	.....	N	Guided tiss regen resorble	0.00	0.00	0.00	0.00	XXX	0
D4267	.....	N	Guided tiss regen nonresorb	0.00	0.00	0.00	0.00	XXX	0
D4268	.....	D	Guided tissue regeneration	0.00	0.00	0.00	0.00	YYY	N
D4270	.....	R	Pedicle soft tissue graft pr	0.00	0.00	0.00	0.00	YYY	S
D4271	.....	R	Free soft tissue graft proc	0.00	0.00	0.00	0.00	YYY	S
D4273	.....	R	Subepithelial tissue graft	0.00	0.00	0.00	0.00	YYY	N
D4274	.....	N	Distal/proximal wedge proc	0.00	0.00	0.00	0.00	XXX	0
D4320	.....	N	Provision splnt intracoronal	0.00	0.00	0.00	0.00	XXX	0
D4321	.....	N	Provisional splint extracoro	0.00	0.00	0.00	0.00	XXX	0
D4341	.....	N	Periodontal scaling & root	0.00	0.00	0.00	0.00	XXX	0
D4345	.....	D	Periodontal scaling w/inflam	0.00	0.00	0.00	0.00	YYY	N
D4355	.....	R	Full mouth debridement	0.00	0.00	0.00	0.00	YYY	N
D4381	.....	R	Localized chemo delivery	0.00	0.00	0.00	0.00	YYY	N
D4910	.....	N	Periodontal maint procedures	0.00	0.00	0.00	0.00	XXX	0
D4920	.....	N	Unscheduled dressing change	0.00	0.00	0.00	0.00	XXX	0
D4999	.....	N	Unspecified periodontal proc	0.00	0.00	0.00	0.00	XXX	0
D5110	.....	N	Dentures complete maxillary	0.00	0.00	0.00	0.00	XXX	0
D5120	.....	N	Dentures complete mandible	0.00	0.00	0.00	0.00	XXX	0
D5130	.....	N	Dentures immediat maxillary	0.00	0.00	0.00	0.00	XXX	0
D5140	.....	N	Dentures immediat mandible	0.00	0.00	0.00	0.00	XXX	0
D5211	.....	N	Dentures maxill part resin	0.00	0.00	0.00	0.00	XXX	0
D5212	.....	N	Dentures mand part resin	0.00	0.00	0.00	0.00	XXX	0
D5213	.....	N	Dentures maxill part metal	0.00	0.00	0.00	0.00	XXX	0
D5214	.....	N	Dentures mandibl part metal	0.00	0.00	0.00	0.00	XXX	0
D5281	.....	N	Removable partial denture	0.00	0.00	0.00	0.00	XXX	0
D5410	.....	N	Dentures adjust cmplt maxil	0.00	0.00	0.00	0.00	XXX	0
D5411	.....	N	Dentures adjust cmplt mand	0.00	0.00	0.00	0.00	XXX	0
D5421	.....	N	Dentures adjust part maxill	0.00	0.00	0.00	0.00	XXX	0
D5422	.....	N	Dentures adjust part mandbl	0.00	0.00	0.00	0.00	XXX	0
D5510	.....	N	Dentur repr broken compl bas	0.00	0.00	0.00	0.00	XXX	0
D5520	.....	N	Replace denture teeth complt	0.00	0.00	0.00	0.00	XXX	0
D5610	.....	N	Dentures repair resin base	0.00	0.00	0.00	0.00	XXX	0
D5620	.....	N	Rep part denture cast frame	0.00	0.00	0.00	0.00	XXX	0

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[2] Copyright 1994 American Dental Association. All rights reserved (D0110–D9999).
[3] # Indicates RVUs are not used for Medicare payment.
[4] * Indicates reduction of Practice Expense RVUs as a result of OBRA 1993.