



REQUEST FOR BOARD ACTION

ITEM NO. 10.

DATE OF MEETING: June 21, 2010

REQUESTED BY: Rick Benton, County Manager

SHORT TITLE: Resolution Adopting the FY 10/11 Budget Ordinance for the Fiscal Year Beginning July 1, 2010.

BACKGROUND: The proposed FY 10/11 budget ordinance is attached. The budget preparation process began in February. The Board has held three budget work sessions (May 3, May 17, and June 7), and the required public hearing was held May 17, 2010. The proposed budget maintains the current tax rate of \$.65. The overall budget ordinance as presented today provides for a total budget of \$74,209,798 and a general fund budget of \$47,949,148.

This has been particularly difficult budget year due to the economic downturn, resulting revenue reductions, and impacts from the State budget. Nevertheless, the proposed budget funds priorities of the Board including those related to Economic Opportunity, Water and Sewer Infrastructure, Growth Management, Quality of Life and Education.

SPECIFIC ACTION REQUESTED: To adopt a resolution authorizing the FY 10/11 Budget Ordinance as presented (or as amended at the meeting).

COUNTY MANAGER'S RECOMMENDATION

Respectfully recommend approval.

RB
Initial

RESOLUTION

NOW, THEREFORE BE IT RESOLVED by the Pender County Board of Commissioners that:

the FY 10/11 Budget Ordinance is hereby approved (as presented or as amended at the meeting). The County Manager/Chairman/Finance Officer are authorized to execute any documents necessary to implement this resolution.

AMENDMENTS:

MOVED _____ SECONDED _____

APPROVED _____ DENIED _____ UNANIMOUS

YEA VOTES: Tate ___ Blanchard ___ Brown ___ Rivenbark ___ Williams ___

Jimmy T. Tate, Chairman 6/21/10
Date

ATTEST 6/21/10
Date

**BOARD OF COMMISSIONERS
PENDER COUNTY**

INTRODUCED BY: Rick Benton, County Manager/Budget Officer

BUDGET ORDINANCE FOR THE FISCAL YEAR BEGINNING JULY 1, 2010

BE IT ORDAINED by the Board of Commissioners of Pender County, North Carolina:

Section 1A. The following amounts are hereby appropriated in the General Fund (Fund #10) for the operation of the County Government and its activities for the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County:

Board of Commissioners	\$ 159,098
County Manager	242,819
Human Resources	160,983
County Attorney	76,400
Finance	303,547
Information Technology	703,012
Board of Elections	252,393
Register of Deeds	234,145
Tax Assessor	663,225
Tax Collector	423,669
Planning/Parks & Recreation	1,313,597
Library	736,934
Public Works	1,321,584
Vehicle Maintenance	323,134
Emergency Management	240,182
Sheriff/Jail	5,532,324
Tourism	132,600
Veterans Service Office	81,831
Hurricane Recovery	5,000
Health Department	4,726,667
Public Assistance	8,778,529
Pender County Schools	12,921,614
Clerk of Superior Court	16,500
Division of Forest Resources	220,000
NC Cooperative Extension Services	130,042
Outside Agencies	635,263
Process Funds	654,929

Medical Examiner	75,000
Contingency	50,000
Debt Service	603,350
Non-Departmental	737,318
Federal & State Seizures	45,000
Capital Improvement Program (CIP)	1,578,105
Public School	2,692,735
Revaluation	125,000
Workers' Comp	225,367
Domestic Grant	15,000
Vehicle Replacement	812,252
TOTAL GENERAL FUND	\$ 47,949,148

Section 1B. It is estimated that the following revenues will be available in the General Fund (Fund #10) for the fiscal year beginning July 1, 2010 and ending June 30, 2011:

Property Taxes	\$30,181,488
Sales Tax	4,025,541
Sales, Services, and Other Revenues	4,174,976
Intergovernmental Revenues	7,594,891
General Fund Appropriated Fund Balance	1,972,252
Total Revenues	\$47,949,148

Section 1C. There is hereby levied a tax at the rate of sixty-five cents (\$.65) per one hundred dollars (\$100) valuation of property listed as of January 1, 2010, for the purpose of raising revenue included in "Property Taxes" in the General Fund in Section 1B of this ordinance. This rate of tax is based on an estimated total valuation of property for the purpose of taxation of \$4,736,435,222 estimated collection rate of 95%.

Section 2A. The following amounts are hereby appropriated in the Capital Improvements Program Fund (Fund #60) for the capital projects for the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County:

Capital Improvement Projects	
Industrial Development Fund	\$50,000
Industrial Shell Building-CDBG	13,105
Property Acquisition	250,000
Emergency Operations Center	350,000
Data Center Generator & Portable Generator	160,000
Facilities Improvements	100,000
Parks Capital Fund	250,000
Miller's Pond Park	10,000
Pender Memorial Park	10,000
Hampstead Kiwanis Park	10,000
Drainage Management Fund	150,000

Beach Nourishment Annual Appropriation	225,000
Total Expenditures	\$1,578,105

Section 2B. It is estimated that the following revenues will be available to the Capital Improvements Program Fund (Fund #60) for the fiscal year beginning July 1, 2010 and ending June 30, 2011:

Transfer From General Fund	\$1,160,000
Other Than One-time Fund Balance Transfers	418,105
Total Revenues	\$1,578,105

Section 3A. The following amounts are hereby appropriated in the Public School Capital Special Revenue Fund (Fund #28) for the expenditures associated with the debt service and other school capital projects funded by the County for the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County:

Debt Service Expenditures – 2008	\$ 438,240
Debt Service Expenditures – 2007	1,739,250
Debt Service Expenditures – 2005	2,355,625
Debt Service Expenditures – 2004 Debt	797,825
Debt Service Expenditures - 2001 Debt	753,500
Programmed Capital Outlay	1,110,000
Option Four Redistribution	123,429
Total Expenditures	\$ 7,317,869

Section 3B. It is estimated that the following revenues will be available to the Public School Capital Fund (Fund #28) for the fiscal year beginning July 1, 2010 and ending June 30, 2011:

Transfer from General Fund - 6¢ Tax Increase	\$2,692,735
Sales Tax	2,279,988
Lottery Funds	700,000
Fund Balance Appropriated	1,645,146
Total Revenues	\$7,317,869

Section 4A. The following amounts are hereby appropriated in the E911 Fund (Fund #25) for the emergency telephone system during the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County:

Capital Outlay	\$15,000
E911 Salaries/Benefits	101,286
E911 Operating	275,500
Total Expenditures	\$391,786

Section 4B. It is estimated that the following revenues will be available to the E911 Fund (Fund #25) for the fiscal year beginning July 1, 2010 and ending June 30, 2011:

911 Fees	\$391,786
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Section 5A. The following amounts are hereby appropriated in the Employee Health Insurance Fund (Fund #50) during the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County:

Life Insurance Premiums	\$13,000
Claims Paid	\$2,048,540
Administrative Costs	419,014
Total Expenditures	\$2,480,554

Section 5B. It is estimated that the following revenues will be available to the Employee Health Insurance Fund (Fund #50) for the fiscal year beginning July 1, 2010 and ending June 30, 2011:

Life Insurance Premiums	\$13,000
Health Insurance Deductions	2,399,366
Appropriated Fund Balance	68,188
Total Revenues	\$2,480,554

Section 6A. The following amounts are hereby appropriated in the Workers Compensation Insurance Fund (Fund #52) during the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County:

Administration/Stop-Loss Premium	\$105,000
Compensation Claims	120,367
Total Expenditures	\$225,367

Section 6B. It is estimated that the following revenues will be available to the Workers Compensation Insurance Fund (Fund #52) for the fiscal year beginning July 1, 2010 and ending June 30, 2011:

General Fund Contribution	\$225,367
Total Revenues	\$225,367

Section 7A. The following amounts are hereby appropriated in the Fire District Fund (Fund #26) for the operation of volunteer fire departments for the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County:

Fire Districts	\$2,050,406
Audit	8,722
Total Expenditures	\$2,059,128

Section 7B. It is estimated that the following revenues will be available to the Fire District Fund (Fund #26) for the fiscal year beginning July 1, 2010 and ending June 30, 2011:

Fire District Taxes	\$2,036,753
Fund Balance Appropriated	22,375
Total Revenues	\$2,059,128

Section 7B1. There is hereby levied a tax at the rate of **five cents (\$0.05)** per hundred dollars (\$100.00) valuation of property listed for taxes as of January 1, 2010, located within the Hampstead Fire Tax District for the purpose of supplementing the revenues of the Hampstead Volunteer Fire Department.

Section 7B2. There is hereby levied a tax at the rate of **five cents (\$0.05)** per hundred dollars (\$100.00) valuation of property listed for taxes as of January 1, 2010, located within the Scotts Hill Fire Tax District for the purpose of equally supplementing the revenues of the Hampstead Volunteer Fire Department and New Hanover County Fire Services.

Section 7B3. There is hereby levied a tax at the rate of **six cents (\$0.06)** per hundred dollars (\$100.00) valuation of property listed for taxes as of January 1, 2010, located within the Sloop Point Fire Tax District for the purpose of supplementing the revenues of the Sloop Point Volunteer Fire Department.

Section 7B4. There is hereby levied a tax at the rate of **seven cents (\$0.07)** per hundred dollars (\$100.00) valuation of property listed for taxes as of January 1, 2010, located within the Pender Central Fire Tax District for the purpose of supplementing the revenues of the Burgaw Fire Department.

Section 7B5. There is hereby levied a tax at the rate of **seven cents (\$0.07)** per hundred dollars (\$100.00) valuation of property listed for taxes as of January 1, 2010, located within the Maple Hill Fire Tax District for the purpose of supplementing the revenues of the Maple Hill Volunteer Fire Department.

Section 7B6. There is hereby levied a tax at the rate of **seven cents (\$0.07)** per hundred dollars (\$100.00) valuation of property listed for taxes as of January 1, 2010, located within the Rocky Point Fire Tax District for the purpose of supplementing the revenues of the Rocky Point Volunteer Fire Department.

Section 7B7. There is hereby levied a tax at the rate of **seven cents (\$0.07)** per hundred dollars (\$100.00) valuation of property listed for taxes as of January 1, 2010, located within the Atkinson Fire Tax District for the purpose of supplementing the revenues of the Atkinson Volunteer Fire Department.

Section 7B8. There is hereby levied a tax at the rate of **seven cents (\$0.07)** per hundred dollars (\$100.00) valuation of property listed for taxes as of January 1, 2010, located within the Northeast Pender Fire Tax District for the purpose of supplementing the revenues of the Surf City Volunteer Fire Department.

Section 7B9. There is hereby levied a tax at the rate of **seven cents (\$0.07)** per hundred dollars (\$100.00) valuation of property listed for taxes as of January 1, 2010, located within the Long Creek Fire Tax District for the purpose of supplementing the revenues of the Long Creek Volunteer Fire Department.

Section 7B10. There is hereby levied a tax at the rate of **seven cents (\$0.07)** per hundred dollars (\$100.00) valuation of property listed for taxes as of January 1, 2010, located within the Penderlea Fire Tax District for the purpose of supplementing the revenues of the Penderlea Volunteer Fire Department.

Section 7B11. There is hereby levied a tax at the rate of **eight cents (\$0.08)** per hundred dollars (\$100.00) valuation of property listed for taxes as of January 1, 2010, located within the Shiloh Fire Tax District for the purpose of supplementing the revenues of the Shiloh Volunteer Fire Department.

Section 7B12. There is hereby levied a tax at the rate of **six and one-half cents (\$.065)** per hundred dollars (\$100) valuation of property listed for taxes as of January 1, 2010, located within the Duplin-Pender Fire District for the purpose of supplementing the revenues of the Wallace Fire Department.

Section 8.A. The following amounts are hereby appropriated in the Emergency Medical Service Fund (Fund #27) for the operation of rescue services for the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County:

Operating	\$3,141,524
Capital	150,509
Total Expenditures	\$3,292,033

Section 8B. It is estimated that the following revenues will be available to the Emergency Medical Service Fund (Fund #27) for the fiscal year beginning July 1, 2010 and ending June 30, 2011:

EMS Tax	\$3,141,524
Fund Balance Appropriated	150,509
Total Revenues	\$3,292,033

Section 8C. There is hereby levied a tax at the rate of **seven cents (\$0.07)** per hundred dollars (\$100.00) valuation of property listed for taxes as of January 1, 2010, located within the County for the purpose of funding Emergency Medical Services in the County.

Section 9A. The following amounts are hereby appropriated in the Revaluation Fund (Fund #29) for the revaluation of property in Pender County for the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County:

Operating	\$21,530
Reserves	103,470
Total Expenditures	\$125,000

Section 9B. It is estimated that the following revenues will be available to the Revaluation Fund (Fund #29) for the fiscal year beginning July 1, 2010 and ending June 30, 2011:

Transfer from General Fund	\$125,000
Total Revenues	\$125,000

Section 10A. The following amounts are hereby appropriated in the Solid Waste Management Fund (Fund #75) for the operation of the collection and disposal of solid waste for the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County:

Solid Waste Collection and Disposal	\$3,548,351
Total Expenditures	\$3,548,351

Section 10B. It is estimated that the following revenues, including user fees at \$149, availability fees at \$74 and tipping fees at \$70 per ton, will be available to the Solid Waste Management Fund (Fund #75) for the fiscal year beginning July 1, 2010 and ending June 30, 2011:

Solid Waste User Fees	\$ 2,413,351
Landfill Fees	1,100,000
Recycling and Other Revenues	35,000
Total Revenues	\$ 3,548,351

Section 11A. The following amounts are hereby appropriated in the Vehicle Replacement Fund (Fund #65) for the purchase of replacement vehicles for the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County:

Vehicles	\$750,000
Title/Tags	44,252
Local Match	18,000
Total Expenditures	\$ 812,252

Section 11B. It is estimated that the following revenues will be available to the Vehicle Replacement Fund (Fund #65) for the fiscal year beginning July 1, 2010 and ending June 30, 2011:

Transfer From General Fund	\$812,252
Total Revenues	\$812,252

Section 12A. The following amounts are hereby appropriated in the Maple Hill Water District Enterprise Fund (Fund #71) for the operation of the Maple Hill water distribution system for the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County:

Maple Hill Water District	\$ 133,676
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Section 12B. It is estimated that the following revenues will be available to the Maple Hill Water District Enterprise Fund (Fund #71) for the fiscal year beginning July 1, 2010 and ending June 30, 2011:

Water Fees	\$130,500
Other Revenue	3,176
Total Revenues	\$133,676

Section 13A. The following amounts are hereby appropriated in the Rocky Point/Topsail Water & Sewer District Enterprise Fund (Fund #72) for the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County:

Rocky Point/Topsail Water & Sewer District Fund	\$ 2,800,491
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Section 13B. The following rates will be charged for residential customers of the Rocky Point/Topsail Water and Sewer District: \$25 per month base fee plus \$3.00 per thousand gallons of water used. Commercial accounts will pay \$27 per month base fee plus \$3.50 per thousand gallons of water used. It is estimated that the following revenues will be available to the Rocky Point/Topsail Water & Sewer District Fund (Fund #72) for the fiscal year beginning July 1, 2010 and ending June 30, 2011:

Water and Sewer Fees	\$ 2,244,713
Other Revenue	129,528
Due from Wastewater Treatment Fund	426,250
Total Revenues	\$ 2,800,491

Section 14A. The following amounts are hereby appropriated in the Housing Enterprise Fund (Fund #73 & 74) for the operation of the Pender County Housing Section 8 Program and the Country Court Apartments for the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County:

Section 8 Expenditures	\$ 1,175,038
Country Court Expenditures	\$45,200

Section 14B. It is estimated that the following revenues will be available to the Housing Enterprise Fund (Fund #73 & 74) for the operation of the Pender County Housing Section 8 Program and the Country Court Apartments for the fiscal year beginning July 1, 2010 and ending June 30, 2011:

Section 8 Revenues	\$ 1,175,038
Country Court Revenues	\$45,200

Section 15A. The following amounts are hereby appropriated in the Automation Enhancement & Preservation Fund (Fund #49) for the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County.

Reserves	\$58,200
Total Expenditures	\$58,200

Section 15B. It is estimated that the following revenues will be available to the Automation Enhancement & Preservation Fund (Fund #49) for the fiscal year beginning July 1, 2010 and ending June 30, 2011.

Fees Collected	\$58,200
Total Revenues	\$58,200

Section 16A. The following amounts are hereby appropriated in the Water/Wastewater Capacity Fees Fund (Fund #59) for the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County:

Reserves	\$157,600
Total Expenditures	\$157,600

Section 16B. It is estimated that the following revenues will be available to the Water/Wastewater Capacity Fees Fund (Fund #59) for the fiscal year beginning July 1, 2010 and ending June 30, 2011:

Water Capacity Fees	\$57,600
Wastewater Capacity Fees	100,000
Total Revenues	\$157,600

Section 17A. The following amounts are hereby appropriated in the Domestic Violence Grant Fund (Fund #16) for the fiscal year beginning July 1, 2010 and ending June 30, 2011, in accordance with the chart of accounts heretofore established for this County:

Domestic Violence Grant Fund	\$60,000
Total Expenditures	\$60,000

Section 17B. It is estimated that the following revenues will be available to the Domestic Violence Grant Fund (Fund #16) for the fiscal year beginning July 1, 2010 and ending June 30, 2011:

Salary/Benefits	54,997
Operating	5,003
Total Revenues	\$60,000

Section 18. The Budget Officer is hereby authorized to transfer appropriations as contained herein under the following conditions:

- a. They may transfer amounts between line item expenditures within a department without limitation and without a report being required.
- b. They may transfer amounts up to \$5,000 between departments, including contingency appropriations, within the same fund. They must make an official report on such transfers at the next regular meeting of the Board of Commissioners.
- c. They may not transfer any amounts between funds, except as approved by the Board of Commissioners in the Budget Ordinance as amended.



ATTACHMENT A

**PENDER COUNTY FEE SCHEDULE – FY 2010-2011
EFFECTIVE JULY 1, 2010**

FIRE PREVENTION

Compliance Inspection - Re-inspection Fee	\$50.00
Repeat Licensure Inspection	\$75.00

LIBRARY

Overdue Fine Schedule:	Overdue Charge per Day:	Maximum Charge per Item:	Lending Privileges
Hardback books (2 wk loan for "new" fiction 3 wk. loan for all others)	\$0.10 day	\$4.00	All ages
Paperback books (3 wk. loan)	\$0.10 day	\$2.00	All ages
Family Theme Bags (3 wk. loan, limit 1 per family; return inside only)	\$0.10 day per item	\$3.00	All ages
Audio books (2 wk. loan)	\$0.25 day for bag	\$3.00	
Magazines (1 wk. loan, back issues at least 3 months old only; limit 5)	\$0.10 day	\$4.00	All ages
Videos (1 wk. loan; limit 4)	\$2.00	\$5.00	All ages
DVDs (4 night loan; limit 4; 1 renewal)	\$1.00 day	\$5.00	Adults 18 and over only
CD music (1 wk loan; limit 5)	\$1.00 day	\$3.00	Adults 18 and over only
Audiovisual Equipment (3 day loan)	\$0.25 day	\$6.00	All ages
	\$2.00 day		Adults 18 and over only

Fees:

First library card is free. Replacement fee: \$3.00

Library cards are free, by reciprocal agreements, for residents of: Bladen, Columbus, Onslow, Sampson, and Duplin Counties, if they are in good standing with their home library systems. Free cards are also available to non-residents if they show proof of property ownership in Pender, or have a Pender Co. employment address. All other non-residents may apply to receive a card for \$20.00/yr.

Interlibrary Loan Search: \$2.00 per delivered book title

Photocopy/Computer Printouts \$0.10 per page b/w \$0.25 color

REGISTER OF DEEDS

Deeds of Trust (Effective 10/1/08)	\$24.00	first page
All other instruments that are verified:	\$ 3.00	each additional
	\$14.00	first page
	\$ 3.00	each additional
Multiple Instruments	\$10.00	each additional instrument, In addition to regular recording fee
Satisfactions of Deeds of Trust	No Fee	
Nonstandard Document Fee	\$25.00	plus
Certified Copies	\$ 5.00	first page
	\$ 2.00	each additional page
Uncertified Copies	\$ 0.25	self service
Certified Copies of Vital Records	\$10.00	each copy
Uncertified Vital Records	\$ 1.00	genealogy
Map Copies	\$ 5.00	to scale
Map Recording	\$21.00	per page
Notary Oath	\$10.00	
Notary Authentication	\$ 5.00	per notary per page
DD-214 Recording	No Fee	
DD-214 Certified copy	No Fee	
UCC all Filings	\$38.00	1 to 2 pages
	\$45.00	3 to 10 pages
	\$ 2.00	each additional page over ten
Excise Tax on Deeds	\$ 2.00	per \$1000.00 (based on purchase price)

DATA AND MAP PRICE LIST

Map Prices:

Standard Maps

Sizes	Line Maps	Orthos Maps
8.5x11	\$ 1.00	\$ 4.00
8.5x14	\$ 1.00	\$ 4.00
11x17	\$ 1.00	\$ 4.00
17x22	\$ 4.00	\$10.00
25x25	\$10.00	\$20.00
42x50	\$15.00	\$30.00

Custom Maps

Price for Standard Map plus a Programming Fee of: \$25 per hour

Other Maps and Services

Digital copies of maps saved to CD	\$ 2.00
County Road map (2 sheets)	\$ 30.00

GIS Data Fee Schedule (Shape Files):

	GOV	GEN	COMM
Address	0	\$25	\$200
Structures	0	\$25	\$200
Centerline	0	\$25	\$200
Parcel (Cadastral)	0	\$25	\$200
Zoning	0	\$25	\$200
Tax Database	0	\$25	\$25
Tax Database w/Bldg Data	0	\$35	\$35

**Contact GIS office for updated list of offered shape files*

Orthophotography Fee Schedule:

1045-200 scale tiles.

1. Color TIF = 313.5 GB
 - a. CD or DVD \$ 20.00 (individual tiles)
 - b. Portable HDD \$500.00 (All tiles)
2. Color IR TIF = 313.5 GB
 - a. CD or DVD \$ 20.00 (individual tiles)
 - b. Portable HDD \$500.00 (All tiles)
3. Color SID @ 20:1 = 15.6 GB
 - a. 2 X 8.5 GB (DVD's) \$150.00
4. Color IR SID @ 20:1 = 15.6 GB
 - a. 2 X 9 GB (DVD's) \$150.00
5. Color County-Wide Mosaic @ 50:1 ~ 2.5 GB
 - a. 4.7 GB DVD \$ 50.00

Specialized Data Requests:

Data setup cost/Cost per each additional hour \$50.00/\$50.00

**setup cost includes up to one hour to process request and is not prorated*

PLANNING & COMMUNITY DEVELOPMENT

Permits and Inspections:

Man. Homes + Req. Inspection Fees	\$300 (to fund the Abandoned Mobile Homes Program)
Relocated Conventional Structure + Inspection Fees	\$150.00
Sign Structure (Cost up to \$500.00)	\$ 50.00
Sign Structure (Cost \$500.00 & over) + Inspection fees	\$ 50.00

Conventionally constructed residential, modular homes	Cost up to \$1,000 = fee \$30.00
Detached accessory structures	Cost from \$1,001 to \$3,000 = fee \$40.00
Attached accessory structures	Cost from \$3,001 to \$6,000 = fee \$50.00
Porches & decks	Cost from \$6,001 to \$10,000= fee \$75.00
	Cost from \$10,001 to \$25,000= fee \$90.00
	Cost from \$25,001 to \$50,000 = fee \$150.00
	Cost over \$50,000 fee = \$150.00 plus
	\$ 4.00 per \$1,000 of cost over \$50,000
One fee type for reinspections	\$ 50.00
Code Verification/Preparatory Inspection	\$ 35.00
Commencing work w/out a permit	\$125.00
NC Recovery Fee	\$ 10.00
Demolition Principal Structure	\$ 50.00
Demolition Accessory Structure	\$ 0
Administrative Fees	\$ 25.00
Plan Review: Residential > 2000 sq. ft. (+10.00 ea. Hour>1)	\$ 10.00 ea. Hour
Plan Review: Commercial (\$10.00 ea. hour >1)	\$ 10.00 ea. Hour
ALE Inspections	\$ 50.00
Day Care Inspections	\$ 25.00
Non-residential construction	Cost up to \$1,000 = fee \$40.00
	Cost from \$1,001 to \$3,000 = fee \$50.00
	Cost from \$3,001 to \$6,000 = fee \$60.00
	Cost from \$6,001 to \$10,000 = fee \$80.00
	Cost from \$10,001 to \$25,000 = fee \$100.00
	Cost from \$25,001 to \$50,000 = fee\$200.00
	Cost over \$50000, fee = \$200.00 plus
	\$5.00 per \$1,000 of cost over \$50,000
ELECTRICAL –New Construction	
Residential 0-200 Amps	\$80.00
Commercial 0-200 Amps	\$100.00
Residential 200-400 Amps	\$125.00
Commercial 200-400 Amps	\$145.00
Residential 400-up (+.30>400)	\$145.00
Commercial 400-up (+.30>400)	\$145.00
Mobile/Modular Home	\$55.00
SERVICE UPGRADE (New Service)	
0-200 Amps	\$55.00
200-400 Amps	\$80.00
400-Up (+.30>400)	\$80.00
WIRING w/ No Service Change:	
Up to 20 outlets	\$35.00
Over 20 outlets	\$45.00
Residential Electrical Verification of Existing Service	\$25.00
Commercial Electrical Verification of Existing Service	\$35.00
Communication Box	\$30.00
Transfer Switch for Gen	\$30.00
100 Amp Service	\$45.00
Temporary Pole	\$30.00
Swimming Pool - Single fee	\$50.00-If permit covers all work
Agricultural- Electrical and Other	
Bulk Barns (\$30.00 ea. Additional)	\$50.00
Barn, Shed, etc.	\$50.00
Residential Elevator	\$50.00
PLUMBING (Res. & Comm.)	
New construction 0-12 Fixtures (+5.00 ea. >12)	\$80.00
Add on kitchen sink & washer	\$55.00
Add on full bath only	\$55.00

Mobile/Modular	\$55.00
Relocate House	\$55.00
Relocated House w/additional fixtures	\$80.00
Water Hook Up	\$30.00
Water Serv. Only (no fixtures)	\$30.00
Building Sewer Only (no fixtures)	\$30.00
Sprinkler System	\$90.00
MECHANICAL (Res & Comm.)	
Gas, oil or electric units (+40.00 ea.>1)	\$80.00
Unit change out	\$55.00
Wiring for units (elec.)	\$30.00
Hood Canopies (over cooking area-install & replace)	\$55.00
Mobile/Modular	\$55.00
Blower Fan, Installation or replacement of any blower or fan including duct in other than residential	\$35.00
Water Cooling Towers	\$55.00
Fuel piping+5.00 over 3 appliances	\$30.00
Fuel tanks	\$35.00
Planning and Zoning:	
Rezoning Text Amendments	\$250
Vested Rights Hearing	\$250
Rezoning Map Amendment	\$500 for the first 5 acres; \$10/acre thereafter up to 1,000 acres; \$5 per acre thereafter
BOA Variance	\$250
BOA Appeals (Administrative Review)	\$250
SUP, General application	\$300 + \$10 per acre over 5 acres, Max. of \$5,000
SUP, Minor Revisions	\$100
SUP, Tower over 75 ft.	\$500
SUP, Mining Borrow Pit	\$750
Planning and Zoning-continued	
SUP, Mining Other	\$1,000 + \$5 per acre
Zoning and use determinations	\$25
Appeal to PB or to BOC- as authorized	\$250
Zoning district verifications	No charge
Flood Hazard Verification	\$25
Planned Development Master Plan	\$500 + \$10 per acre for the first 100 acres; \$5 per acre thereafter
Preliminary Subdivision Plats	\$500 + \$10 per lot/residential unit for the first 100 lots/units; \$5 per lot/unit/thereafter
Final (Major) Subdivision Plats	\$250 + \$10 per lot/residential unit for the first 100 lots/units; \$5 per lot/unit/thereafter
Staff Review: Subdivision Maps	Exempt Subdivisions: \$25 per lot Family: \$25 per lot 3 Lot Subdivisions: \$25 per lot Other Minor Subdivisions: \$25 lot Recombination/boundary line adjustment: \$25
Mobile Home Pk. Prelim. & Final (1 fee)	\$200 base fee + \$10 per lot
Travel Trailer Pk. Prelim. & Final (1 fee)	\$200 base fee + \$10 per lot
Non residential site plan review	\$250 base fee and first 5 acres + \$25 per acre thereafter
Service fee on returned checks	\$50
Comprehensive Plan (or any Plan) Amendments	\$50
All Residential Zoning Permits:	\$10 per permit
All Commercial Zoning Permits:	\$10 per permit

Other Misc. Fees and Related Policies:

Text copies	\$0.25 per page
Ordinance, Checklist or Plan copies	\$0.25 per page b/w
	\$0.50 per page color
Map Copies: Black/White line	8.5 x 11 = \$0.25; 8.5 x 14 = \$0.35;
	11 x 17 = \$.050 + \$2.00 per sheet
	for larger size copies

Map Copies: Black/White Conforms with ITS/GIS Prices

Map Copies: Orthos Conforms with ITS/GIS Prices

- Withdrawn applications: All application fees are non refundable
- 501c3 (Non Profit) organization site plans are eligible for 10% discount
- Custom map requests are now made through the ITS/GIS Department

PARKS & RECREATION

Summer Camp (South Topsail & Burgaw Elementary Schools)	\$ 85.00 per week
Summer Camp (Atkinson/Currie, Penderlea/Willard, Maple Hill Areas)	\$ 25.00 per week
British Soccer Camp (Hampstead and Burgaw Areas)	
First Kicks (ages 3-4)	\$ 65.00 per week
Mini Soccer (ages 4-6)	\$ 90.00 per week
Half Day (ages 6-16)	\$110.00 per week
Full Day (ages 8-16)	\$155.00 per week
Basketball Open Gym (Burgaw Middle School)	
Youth (15 and under)	\$ 1.00 per 2 hour session
Adult (16 and over)	\$ 2.00 per 2 hour session

*All fees are on a per participant basis

SHERIFF

Pistol Purchase Permits	\$ 5.00
Concealed Weapons	\$90.00 (new)
	\$75.00 (renewals)
Civil Process	\$15.00 per defendant to be served
Fingerprints	\$10.00 per set

UTILITIES

Rocky Point-Topsail Water & Sewer District – Water:

<u>Water Capacity Fee</u>	Based on Meter Size		
	3/4" Meter	\$	3,000
	1" Meter	\$	4,500
	1 1/2" Meter	\$	9,300
	2" Meter	\$	14,125
	3" Meter	\$	27,500
	4" Meter	\$	42,000
	6" Meter	\$	112,000
	8" Meter	\$	166,500

<u>RESIDENTIAL</u>	Residential Unit Base Fee	\$25.00 per month
	Usage Rate	\$ 3.00 per 1,000 gallons

<u>COMMERCIAL</u>	Commercial Unit Base Fee	\$27.00 per month
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	Usage Rate	\$ 3.50 per 1,000 gallons
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<u>TAP FEES</u>	3/4" Meter	\$850.00
	1" Meter	\$1,000
	1 1/2" Meter	\$2,500
	2" Meter	\$3,700 (State Permit req'd)
	6" Fire Line Only	\$1,500 (State Permit req'd)
	Larger than 2"	\$2,500 (State Permit req'd)
	(Paid for by owner and installed by Utility Contractor)	

3/4" METER ONLY FEE Effective 5/19/2008 \$135.00

INSPECTION PERMIT FEE \$ 25.00

DEPOSIT \$100.00

TRANSFER FEE – Change in Ownership \$ 25.00

RETURNED CHECK FEE \$ 25.00

<u>ACCOUNT ACTIVATION FEE</u>	\$ 25.00
<u>WATER DISCONNECT FEE</u> (Terminated for non-payment)	\$ 25.00
<u>AFTER HOURS FEE</u> (In addition to disconnect fee)	\$ 25.00
<u>BROKEN LOCK FEE</u>	\$ 25.00

Rocky Point-Topsail Water & Sewer District – Sewer:

<u>Sewer Capacity Fee</u>	Based on Meter Size (\$20.00 per gallon)	3/4" Meter	\$ 7,200
		1" Meter	\$ 10,800
		2" Meter	\$ 33,900
		3" Meter	\$ 66,000
		4" Meter	\$ 100,840
		6" Meter	\$ 268,900
		8" Meter	\$ 399,759

COMMERCIAL RATE Fixed and Usage Rate \$14.00 per 1,000 gallons

Maple Hill Water & Sewer District – Water:

RESIDENTIAL

0 – 2,000 gallons usage	\$16.00 + \$1.50/1,000 gallons
2,001 – 4,000 gallons usage	\$19.00 + \$7.00/1,000 gallons usage over 2,001
4,001 – 6,000 gallons usage	\$33.00 + \$5.70/1,000 gallons usage over 4,001
6,001 – 99,999 gallons usage	\$44.40 + \$4.38/1,000 gallons usage over 6,001

COMMERCIAL

0 – 2,000 gallons usage	\$16.00 + \$1.50/1,000 gallons
2,001 – 4,000 gallons usage	\$19.00 + \$9.70/1,000 gallons usage over 2,001
4,001 – 6,000 gallons usage	\$38.40 + \$7.70/1,000 gallons usage over 4,001
6,001 – 99,999 gallons usage	\$53.80 + \$5.65/1,000 gallons usage over 6,001

LATE FEE 10% of past due balance

TAP FEE 3/4" Meter \$585.00

DEPOSIT – Tenants Only \$100.00

ACCOUNT TRANSFER FEE – Change in Ownership \$ 25.00

RETURNED CHECK FEE \$ 25.00

METER TAMPERING FEE \$ 25.00

WATER DISCONNECT FEE (Terminated for non-payment) \$ 20.00

BROKEN LOCK FEE \$ 25.00

REPLACE DAMAGED ANGLE STOP \$ 50.00

AFTER HOURS FEE (In addition to disconnect fee) \$ 25.00

SPECIAL METER READING (Done only at customer's request) \$ 25.00

Solid Waste Management:

Transfer Station Fee	\$70 per ton
User Fee-Household waste disposal and recycling	\$149 per year
Availability Fee-Recycling only	\$74 per year
Scrap Tire Disposal Fee	\$70 per ton *

*Tires originating from site clean-ups or land clearing, tires generated from businesses without the required paperwork/tire documentation, stockpiled tires, tires generated out-of-state, and tires from the general public in excess of five per day ALL will be accepted at the Transfer Station off Highway 17 in Hampstead at a charge of \$70 per ton.

HEALTH DEPARTMENT

ANIMAL CONTROL

<i>SERVICE</i>		<i>FEE</i>
ADOPTIONS	<i>canine/feline</i>	\$20.00
Other - Small		\$3.00
RABIES VACCINATIONS		\$6.00
REDEMPTIONS	<i>canine/feline</i>	
1st time		\$20.00
2nd time		\$40.00
3rd time	<i>(animal redeemed after summons is signed)</i>	CRIMINAL COURT
REDEMPTIONS	<i>large and/or exotic</i>	
1st time	<i>mare</i>	<i>(per day)</i> \$25.00
	<i>stud</i>	<i>(per day)</i> \$50.00
2nd time	<i>mare</i>	<i>(per day)</i> \$25.00
	<i>stud</i>	<i>(per day)</i> \$50.00
3rd time	<i>(animal redeemed after summons is signed)</i>	CRIMINAL COURT
SURRENDER	<i>(owner surrender animal)</i>	\$20.00

Clinic Sliding Scale Fee

Transaction Code	Description	FEE				
		100%	80%	60%	40%	20%
CLINICAL OFFICE VISIT						
36415	Routine Venipuncture	8.00	6.40	4.80	3.20	1.60
57061	Destruction Vagina Lesions, SIMPLE	200.00	160.00	120.00	80.00	40.00
57150	Treat Vagina Infection	155.00	124.00	93.00	62.00	31.00
57452	Exam Cervix w/scope	205.00	164.00	123.00	82.00	41.00
57454	BX/Curette of Cervix w/scope	310.00	248.00	186.00	124.00	62.00
57505	Endocervical Curettage	138.00	110.40	82.80	55.20	27.60
58300	Insert Intrauterine Device	290.00	232.00	174.00	116.00	58.00
58301	Remove Intrauterine Device	312.00	249.60	187.20	124.80	62.40
76805	OB US >= 14 WKS, Single Fetus	197.00	157.60	118.20	78.80	39.40
76815	OB US, Limited, Fetus(s)	125.00	100.00	75.00	50.00	25.00
81000	Urinalysis, Nonauto w/o scope	9.00	7.20	5.40	3.60	1.80
81002	Urinalysis, Nonauto w/o scop	8.00	6.40	4.80	3.20	1.60
	Description	FEE				
		100%	80%	60%	40%	20%
CLINICAL OFFICE VISIT						
81025	Urine Pregnancy test	20.00	11.00	11.00	11.00	11.00
82105	Alpha-Fetoprotein; Serum	130.00	104.00	78.00	52.00	26.00
82270	Occult Blood, Feces	10.00	8.00	6.00	4.00	2.00
82465	Assay Bld/Serum Cholesterol	16.00	12.80	9.60	6.40	3.20
82947	Assay Glucose, Blood Quant	12.00	9.60	7.20	4.80	2.40
82950	Glucose Test	13.00	10.40	7.80	5.20	2.60
82951	Glucose Tolerance Test (GTT)	35.00	280.00	21.00	14.00	7.00
82962	Glucose Blood Test	6.00	4.80	3.60	2.40	1.20
83020	Hemoglobin Electrophoresis	0.00	0.00	0.00	0.00	0.00
83655	Assay Lead	0.00	0.00	0.00	0.00	0.00

84030	PKU, Blood	0.00	0.00	0.00	0.00	0.00
84703	Chorionic Gonadotropin Assay	33.00	26.40	19.80	13.20	6.60
85018	Hemoglobin	7.00	5.60	4.20	2.80	1.40
86580	TB Intradermal Test	20.00	10.00	10.00	10.00	10.00
86592	Blood Serology, Qualitative	0.00	0.00	0.00	0.00	0.00
86701	HIV-1	0.00	0.00	0.00	0.00	0.00
86762	Rubella Antibody	0.00	0.00	0.00	0.00	0.00
86900	Blood Typing; Abo	0.00	0.00	0.00	0.00	0.00
87070	Culture, Bacteria, Other	26.00	20.80	15.60	10.40	5.20
87081	Culture Screen Only	24.00	19.20	14.40	9.60	4.80
87210	Smear, Wet Mount, Saline/Ink	15.00	12.00	9.00	6.00	3.00
87880	Strep A Assay w/Optic	30.00	24.00	18.00	12.00	6.00
88142	Cytopathology, Cervical/Vaginal any reporting)	35.00	28.00	21.00	14.00	7.00
90375	Rabies IG, IM/SC	200.00	160.00	120.00	80.00	40.00
90384	RH IG, Full-Dose, IM	119.00	95.20	71.40	47.60	23.80
90465	Immune Admin 1 Inj, <8 yrs	0.00	0.00	0.00	0.00	0.00
90471	Immunization Administration	20.00	16.00	12.00	8.00	4.00
90472	Immunization Administration, each addition	17.00	13.60	10.20	6.80	3.40
90473	Immunization Administion oral/nasal	24.00	19.20	14.40	9.60	4.80
90474	Immunization Administion oral/nasal added	17.00	13.60	10.20	6.80	3.40
90632	Hepatitis A Vaccine, Adult IM	70.00	56.00	42.00	28.00	14.00
90633	Hepatitis A Vaccine, PED/ADOL, 2 dose	35.00	28.00	21.00	14.00	7.00
90647	HIB Vaccine, PRP-OMP, IM	0.00	0.00	0.00	0.00	0.00
90648	HIB Vaccine, PRP-T, IM	0.00	0.00	0.00	0.00	0.00
90647	HIB Vaccine, PRP-OMP, IM	0.00	0.00	0.00	0.00	0.00
90648	HIB Vaccine, PRP-T, IM	0.00	0.00	0.00	0.00	0.00
90649	HPV Vaccine, 4 Valent, IM	135.00	108.00	81.00	54.00	27.00
90657	FLU Vaccine, 3 yrs, IM	30.00	30.00	30.00	30.00	30.00
90658	FLU Vaccine, 3 yrs & >, IM	18.00	12.00	12.00	12.00	12.00
90660	FLU Vaccine, Nasal	30.00	30.00	30.00	30.00	30.00
90669	Pneumococcal Vaccine, PED <5	0.00	0.00	0.00	0.00	0.00
90675	Rabies Vaccine, IM	161.00	128.80	96.60	64.40	32.20
90680	ROTAVIRUS Vacc, 3 Dose, Oral	80.00	64.00	48.00	32.00	16.00

Clinic Sliding Scale Fee

Transaction Code	Description	FEE	80%	60%	40%	20%
90700	DTAP Vaccine, < 7 yrs, IM	0.00	100%	0.00	0.00	0.00
90702	Diphtheria & Tetanus Toxoids (DT)	0.00	0.00	0.00	0.00	0.00
90707	Measles, Mumps and Rubella virus vaccine	0.00	0.00	0.00	0.00	0.00
90707	MMR PVT PAY	57.00	45.60	34.20	22.80	11.40
90713	POLIOVIRUS, IPV, SC/IM	0.00	0.00	0.00	0.00	0.00
90715	TDAP Vaccine > 7 IM	0.00	0.00	0.00	0.00	0.00
90716	CHICKEN POX Vaccine, SC	90.00	76.00	76.00	76.00	76.00
90718	TD Vaccine > 7, IM	0.00	0.00	0.00	0.00	0.00
90732	Pneumococcal Vaccine	40.00	32.00	24.00	16.00	8.00
90734	MENINGOCOCCAL Vaccine, IM	110.00	88.00	66.00	44.00	22.00

90736	SHINGLES Vaccine	168.00	134.40	100.80	67.20	33.60
90744	HEPB Vacc PED/ADOL 3 Dose IM	28.00	28.00	28.00	28.00	28.00
90746	HEPATITIS B Vaccine, Adult, IM	35.00	28.00	21.00	14.00	7.00
90772	THER/PROPH/Diag Inj, SC/IM	10.00	10.00	10.00	10.00	10.00
92551	Pure Tone Hearing Test, AIR	18.00	14.40	10.80	7.20	3.60
93786	Ambulatory BP Recording	0.00	0.00	0.00	0.00	0.00
94640	Airway Inhalation Treatment	20.00	16.00	12.00	8.00	4.00
94760	Measure Blood Oxygen Level	5.00	4.00	3.00	2.00	1.00
96110	Developmental Test, LIM	21.00	16.80	12.60	8.40	4.20
99173	Visual Acuity Screen	18.00	14.40	10.80	7.20	3.60
99201	OFFICE/OUTPATIENT VISIT, NEW	80.00	64.00	48.00	32.00	16.00
99202	OFFICE/OUTPATIENT VISIT, NEW	136.00	108.80	81.60	54.40	27.20
99203	OFFICE/OUTPATIENT VISIT, NEW	165.00	132.00	99.00	66.00	33.00
99204	OFFICE/OUTPATIENT VISIT, NEW	231.00	184.80	138.60	92.40	46.20
99205	OFFICE/OUTPATIENT VISIT, NEW	300.00	240.00	180.00	120.00	60.00
99211	OFFICE/OUTPATIENT VISIT, EST	52.00	41.60	31.20	20.80	10.40
99212	OFFICE/OUTPATIENT VISIT, EST	78.00	62.40	46.80	31.20	15.60
99213	OFFICE/OUTPATIENT VISIT, EST	98.00	78.40	58.80	39.20	19.60
99214	OFFICE/OUTPATIENT VISIT, EST	139.00	111.20	83.40	55.60	27.80
99215	OFFICE/OUTPATIENT VISIT, EST	205.00	164.00	123.00	82.00	41.00
99381	INIT PM E/M, NEW PAT, INF	216.00	172.80	129.60	86.40	43.20
99382	INIT PM E/M, NEW PAT 1-4 yrs	229.00	183.20	137.40	91.60	45.80
99383	PREVENTIVE VISIT, NEW, AGE 5-11	233.00	186.40	139.80	93.20	46.60
99384	PREVENTIVE VISIT, NEW, AGE 12-17	362.00	289.60	217.20	144.80	72.40
99385	PREVENTIVE VISIT, NEW, AGE 18-39	354.00	283.20	212.40	141.60	70.80
99386	PREVENTIVE VISIT, NEW, AGE 40-64	305.00	244.00	183.00	122.00	61.00
99387	INIT PM E/M, NEW PAT 65+ yrs.	242.00	193.60	145.20	96.80	48.40
99391	PER PM REEVAL, EST PAT, INF	161.00	128.80	96.60	64.40	32.20
99392	PREVENTIVE VISIT, EST, AGE 1-4	178.00	142.40	106.80	71.20	35.60
99393	PREVENTIVE VISIT, EST, AGE 5-11	176.00	140.80	105.60	70.40	35.20
99394	PREVENTIVE VISIT, EST, AGE 12-17	290.00	232.00	174.00	116.00	58.00
99395	PREVENTIVE VISIT, EST, AGE 18-39	292.00	233.60	175.20	116.80	58.40
99396	PREVENTIVE VISIT, EST, AGE 40-64	246.00	196.80	147.60	98.40	49.20
99397	PER PM REEVAL, EST PAT 65+ yrs.	221.00	176.80	132.60	88.40	44.20
99501	Home Visit, Postnatal	194.00	155.20	116.40	77.60	38.80

Clinic Sliding Scale Fee

Transaction Code	Description	FEE				
		100%	80%	60%	40%	20%
99502	Home Visit, NB Care	180.00	144.00	108.00	72.00	36.00
D0145	Oral Evaluation, Pt < 3 yrs.	25.00	20.00	15.00	10.00	5.00
D1206	Topical Fluoride Varnish	25.00	20.00	15.00	10.00	5.00
J0696	Ceftriaxone Sodium Injection	17.68	14.14	10.61	7.07	3.54
J1055	Medroxyprogesterone Acetate Injection	25.00	20.00	15.00	10.00	5.00
J7300	Intrauterine Copper Contraceptive	325.00	260.00	195.00	130.00	65.00
S4993	Contraceptive Pills for BC	3.00	3.00	3.00	3.00	3.00
S9445	PT Education NOC Individual	35.00	28.00	21.00	14.00	7.00
T1002	RN Services up to 15 mins	73.00	58.40	43.80	29.20	14.60
T1016	Case Management	38.00	30.40	22.80	15.20	7.60

T1017 Targeted Case Management 48.00 38.40 28.80 19.20 9.60

DENTAL SLIDING FEE SCALE

DENTAL OFFICE VISIT

Trans-
action

Code	Description	FEE				
		100%	80%	60%	40%	20%
D0120	Periodic oral evaluation	35.00	28.00	21.00	14.00	7.00
D0140	Limited oral evaluation	55.00	44.00	33.00	22.00	11.00
D0145	Oral Evaluation, pt <3yrs	65.00	52.00	39.00	26.00	13.00
D0150	Comprehensive oral evaluation	55.00	44.00	33.00	22.00	11.00
D0160	Extensive oral eval prob focus	311.00	248.80	186.60	124.40	62.20
D0170	Re-eval, Est PT., Problem Focus	35.00	28.00	21.00	14.00	7.00
D0180	Comprehensive Periodontal Eval	50.00	40.00	30.00	20.00	10.00
D0210	Intraoral-complete series	81.00	64.80	48.60	32.40	16.20
D0220	Intraoral periapical 1st film	18.00	14.40	10.80	7.20	3.60
D0230	Intraoral periapical ea add'l film	15.00	12.00	9.00	6.00	3.00
D0240	Intraoral occlusal film	23.00	18.40	13.80	9.20	4.60
D0250	Extraoral 1st film	62.00	49.60	37.20	24.80	12.40
D0260	Extraoral ea add'l film	58.00	46.40	34.80	23.20	11.60
D0270	Dental Bitewing single film	18.00	14.40	10.80	7.20	3.60
D0272	Dental Bitewings 2 films	30.00	24.00	18.00	12.00	6.00
D0273	Bitewings - 3 films	45.00	36.00	27.00	18.00	9.00
D0274	Dental Bitewings 4 films	40.00	32.00	24.00	16.00	8.00
D0277	Vertical bitewings-7 to 8 films	10.00	8.00	6.00	4.00	2.00
D0290	Skull & facial bone survey film	35.00	28.00	21.00	14.00	7.00
D0310	Saliography	35.00	28.00	21.00	14.00	7.00
D0320	TMJ arthrogram, incl injection	70.00	56.00	42.00	28.00	14.00
D0321	Other TMJ films, by report	150.00	120.00	90.00	60.00	30.00
D0322	Tomographic survey	100.00	80.00	60.00	40.00	20.00
D0330	Panoramic film	83.00	66.40	49.80	33.20	16.60
D0340	Cephalometric film	110.00	88.00	66.00	44.00	22.00
D0350	Oral/Facial Photographic Images	10.00	8.00	6.00	4.00	2.00
D0460	Pulp vitality tests	34.00	27.20	20.40	13.60	6.80
D0470	Diagnostic casts	82.00	65.60	49.20	32.80	16.40
D0501	Histopathologic examinations	23.00	18.40	13.80	9.20	4.60
D0999	Unspecified diag procedure, B/R	28.00	22.40	16.80	11.20	5.60
D1110	Prophylaxis-adult	66.00	52.80	39.60	26.40	13.20

DENTAL OFFICE VISIT

Code	Description	FEE				
		100%	80%	60%	40%	20%
D1120	Prophylaxis-child	45.00	36.00	27.00	18.00	9.00
D1201	Prophylaxis App of Fluoride, child	65.00	52.00	39.00	26.00	13.00
D1203	Topical apply of fluoride (prophy not included)-child	26.00	20.80	15.60	10.40	5.20
D1204	Topical apply of fluoride (prophy not included)-adult	28.00	22.40	16.80	11.20	5.60
D1205	Fluoride application inc. proph adult	71.00	56.80	42.60	28.40	14.20
D1206	Topical FI- Varnish Therapeutic	42.00	33.60	25.20	16.80	8.40
D1310	Nutritional counseling	20.00	16.00	12.00	8.00	4.00
D1320	Tobacco counseling	24.00	19.20	14.40	9.60	4.80
D1330	Oral hygiene instruction	95.00	76.00	57.00	38.00	19.00
D1351	Sealant-per tooth	40.00	32.00	24.00	16.00	8.00
D1510	Space maintainer-fixed-unilateral	290.00	232.00	174.00	116.00	58.00

D1515	Space maintainer-fixed-bilateral	340.00	272.00	204.00	136.00	68.00
D1520	Space maint-remov-unilateral	284.00	227.20	170.40	113.60	56.80
D1525	Space maint-remov-bilateral	470.00	376.00	282.00	188.00	94.00
D1550	Recementation of space maint	48.00	38.40	28.80	19.20	9.60
D2110	Amalgam-1 surfaces, primary	82.00	65.60	49.20	32.80	16.40
D2120	Amalgam-2 surfaces, primary	102.00	81.60	61.20	40.80	20.40
D2130	Amalgam-3 surfaces, primary	114.00	91.20	68.40	45.60	22.80
D2131	Amalgam-4 surfaces, primary	82.00	65.60	49.20	32.80	16.40
D2140	Amalgam-one surface, primary or permanent	75.00	60.00	45.00	30.00	15.00
D2150	Amalgam-two surfaces, primary or permanent	97.00	77.60	58.20	38.80	19.40
D2160	Amalgam-three surfaces, primary or permanent	112.00	89.60	67.20	44.80	22.40
D2161	Amalgam-four or more surfaces, primary or permanent	139.00	111.20	83.40	55.60	27.80
D2210	Silicate cement-per restorat.	106.00	84.80	63.60	42.40	21.20
D2330	Resin-based composite-one surface, anterior	100.00	80.00	60.00	40.00	20.00
D2331	Resin-based composite-two surfaces, anterior	110.00	88.00	66.00	44.00	22.00
D2332	Resin-based composite-three surfaces, anterior	140.00	112.00	84.00	56.00	28.00
D2335	Resin-based composite-four + or invol incisal angle (anterior)	200.00	160.00	120.00	80.00	40.00
D2390	Composite Crown	214.00	171.20	128.40	85.60	42.80
D2391	Resin-one surface, Posterior	120.00	96.00	72.00	48.00	24.00
D2392	Resin-two surfaces, Posterior	160.00	128.00	96.00	64.00	32.00
D2393	Resin-three surfaces, Posterior	170.00	136.00	102.00	68.00	34.00
D2394	Resin-four + surfaces, Posterior	225.00	180.00	135.00	90.00	45.00
D2410	Gold foil-one surface	238.00	190.40	142.80	95.20	47.60
D2420	Gold foil-two surfaces	358.00	286.40	214.80	143.20	71.60
D2430	Gold foil-three surfaces	395.00	316.00	237.00	158.00	79.00
D2510	Inlay-metallic-one surface	454.00	363.20	272.40	181.60	90.80
D2520	Inlay-metallic-two surfaces	506.00	404.80	303.60	202.40	101.20
D2530	Inlay-metallic-three + surfaces	556.00	444.80	333.60	222.40	111.20
D2543	Onlay-metallic-three surfaces	659.00	527.20	395.40	263.60	131.80
D2544	Onlay-metallic-four + surfaces	675.00	540.00	405.00	270.00	135.00
D2610	Inlay-porcel/ceramic-1 surface	539.00	431.20	323.40	215.60	107.80
D2620	Inlay-porcel/ceramic-2 surfaces	609.00	487.20	365.40	243.60	121.80
D2630	Inlay-porcel/ceramic-3+ surfaces	651.00	520.80	390.60	260.40	130.20
D2642	Onlay-porcel/ceram-2 surface	650.00	520.00	390.00	260.00	130.00
D2643	Onlay-porcel/ceram-3 surface	720.00	576.00	432.00	288.00	144.00
D2644	Onlay-porcel/ceram-4 + surface	748.00	598.40	448.80	299.20	149.60
D2650	Inlay-resin based composite-1s	460.00	368.00	276.00	184.00	92.00
D2651	Inlay-resin based composite-2s	503.00	402.40	301.80	201.20	100.60

DENTAL SLIDING FEE SCALE

Transaction Code	DENTAL OFFICE VISIT Description	FEE				
		100%	80%	60%	40%	20%
D2652	Inlay-resin based composite-3+s	539.00	431.20	323.40	215.60	107.80
D2662	Onlay-resin based composite-2s	515.00	412.00	309.00	206.00	103.00
D2663	Onlay-resin based composite-3s	616.00	492.80	369.60	246.40	123.20
D2664	Onlay-resin based composite-4+s	623.00	498.40	373.80	249.20	124.60
D2710	Crown-resin composite(indirect)	293.00	234.40	175.80	117.20	58.60
D2720	Crown-resin w/high noble metal	653.00	522.40	391.80	261.20	130.60
D2721	Crown-resin w/most base metal	585.00	468.00	351.00	234.00	117.00
D2722	Crown-resin with noble metal	632.00	505.60	379.20	252.80	126.40
D2740	Crown-porcelain/ceramic substr	754.00	603.20	452.40	301.60	150.80
D2750	Crown-porc fuse high noble mtl	765.00	612.00	459.00	306.00	153.00
D2751	Crown-porc fused to base metal	796.00	636.80	477.60	318.40	159.20

D2752	Crown-porc fused noble metal	700.00	560.00	420.00	280.00	140.00
D2781	Crown 3/4 Predom.bae Metal	711.00	568.80	426.60	284.40	142.20
D2782	Crown 3/4 Noble Metal	693.00	554.40	415.80	277.20	138.60
D2790	Crown-full cast high noble mtl	676.00	540.80	405.60	270.40	135.20
D2791	Crown-full cast base metal	628.00	502.40	376.80	251.20	125.60
D2792	Crown-full cast noble metal	664.00	531.20	398.40	265.60	132.80
D2910	Recement inlay-only-partial	58.00	46.40	34.80	23.20	11.60
D2920	Recement Crowns	58.00	46.40	34.80	23.20	11.60
D2930	Prefabricated stainless steel crown-primary tooth	145.00	116.00	87.00	58.00	29.00
D2931	Prefabricated stainless steel crown-permanent tooth	150.00	120.00	90.00	60.00	30.00
D2932	Prefabricated resin crown	170.00	136.00	102.00	68.00	34.00
D2933	Prefab stl crown w/resin window	180.00	144.00	108.00	72.00	36.00
D2934	Prefb esth ctd stnl stl crn-prm	175.00	140.00	105.00	70.00	35.00
D2940	Sedative filling	80.00	64.00	48.00	32.00	16.00
D2950	Core buildup, including any pins	123.00	98.40	73.80	49.20	24.60
D2951	Pin retention-/tooth, (+rest)	20.00	16.00	12.00	8.00	4.00
D2952	Cast post & core in add to crown	130.00	104.00	78.00	52.00	26.00
D2954	Prefab post & core in add to crn	189.00	151.20	113.40	75.60	37.80
D2955	Post removal (not with endo)	142.00	113.60	85.20	56.80	28.40
D2960	Labial veneer (laminate)-chairsd	317.00	253.60	190.20	126.80	63.40
D2961	Labial veneer (resin lamin)-lab	538.00	430.40	322.80	215.20	107.60
D2962	Labial veneer (porceln lam)-lab	635.00	508.00	381.00	254.00	127.00
D2970	Temporary crown (fractured th)	146.00	116.80	87.60	58.40	29.20
D2980	Crown repair, by report	138.00	110.40	82.80	55.20	27.60
D3110	Pulp cap-direct excluding final	45.00	36.00	27.00	18.00	9.00
D3220	Therapeutic pulpotomy (excl final restoration)	130.00	104.00	78.00	52.00	26.00
D3221	Pulpal debridemnt-prim/perm th	69.00	55.20	41.40	27.60	13.80
D3230	Pulpal therapy-anterior, primary	135.00	108.00	81.00	54.00	27.00
D3240	Pulpal therapy-posterior, prim	250.00	200.00	150.00	100.00	50.00
D3310	Root canal therapy-ant (excl final restoration)	650.00	520.00	390.00	260.00	130.00
D3320	Root canal therapy-bicuspid	745.00	596.00	447.00	298.00	149.00
D3330	Root canal therapy-molar (excl final restoration)	1,000.00	800.00	600.00	400.00	200.00
D3346	Retreat, prev RCT - anterior	556.00	444.80	333.60	222.40	111.20
D3347	Retreat, prev RCT - bicuspid	628.00	502.40	376.80	251.20	125.60
D3348	Retreat, prev RCT - molar	832.00	665.60	499.20	332.80	166.40
D3351	Apexification/recalcif, initial	104.00	83.20	62.40	41.60	20.80
D3352	Apexification/recalcif, interim	80.00	64.00	48.00	32.00	16.00
D3353	Apexification/recalcif, final	160.00	128.00	96.00	64.00	32.00
D3410	Apicoectomy/Periradic surg-ant	235.00	188.00	141.00	94.00	47.00

**Trans
action**

Code	Description	FEE f				
		100%	80%	60%	40%	20%
D3421	Apicoect/Perirad-bicus/1st root	498.00	398.40	298.80	199.20	99.60
D3425	Apicoect/Perirad-molar/1st root	538.00	430.40	322.80	215.20	107.60
D3426	Apicoect/Perirad (each + root)	216.00	172.80	129.60	86.40	43.20
D3430	Retrograde filling-per root	138.00	110.40	82.80	55.20	27.60
D3450	Root amputation-per root	318.00	254.40	190.80	127.20	63.60
D3470	Intentional replant, inc splint	470.00	376.00	282.00	188.00	94.00
D3910	Surg isolation of th w/rub dam	135.00	108.00	81.00	54.00	27.00
D3920	Hemisection, no root can ther	260.00	208.00	156.00	104.00	52.00
D3950	Canal prep/fit of dowel/post	113.00	90.40	67.80	45.20	22.60
D3960	Bleaching of discolored tooth	184.00	147.20	110.40	73.60	36.80
D4210	Gingivectomy-4+ per quadrant	540.00	432.00	324.00	216.00	108.00

D4211	Gingivectomy-1-3 contig th/quad	195.00	156.00	117.00	78.00	39.00
D4220	Gingiv curettage, surgical /quad	130.00	104.00	78.00	52.00	26.00
D4240	Ging flap, root pln, 4+ per quad	583.00	466.40	349.80	233.20	116.60
D4241	Ging flap rt pln 1-3 cntg th/qu	517.00	413.60	310.20	206.80	103.40
D4249	Clinic crown lengthen-hard tiss	552.00	441.60	331.20	220.80	110.40
D4260	Osseous surgery-4+ per quad	742.00	593.60	445.20	296.80	148.40
D4263	Bone replace graft-1st site/qu	191.00	152.80	114.60	76.40	38.20
D4320	Provisional splinting-intracor	208.00	166.40	124.80	83.20	41.60
D4321	Provisional splinting-extracor	155.00	124.00	93.00	62.00	31.00
D4341	Periodontal scal/root planing-4+ contiguous teeth per quad	200.00	160.00	120.00	80.00	40.00
D4342	Periodontal scal/root planing-one to three teeth per quad	40.00	32.00	24.00	16.00	8.00
D4355	Full mouth debridement to enable compreh eval/diag	135.00	108.00	81.00	54.00	27.00
D4381	Local deliv antimicrb ag-th B/R	80.00	64.00	48.00	32.00	16.00
D4910	Periodontal maintenance	41.00	32.80	24.60	16.40	8.20
D5110	Complete denture-maxillary	964.00	771.20	578.40	385.60	192.80
D5120	Complete denture-mandibular	964.00	771.20	578.40	385.60	192.80
D5130	Immediate denture - maxillary	994.00	795.20	596.40	397.60	198.80
D5140	Immediate denture - mandibular	994.00	795.20	596.40	397.60	198.80
D5211	Maxillary partial denture-resin base	694.00	555.20	416.40	277.60	138.80
D5212	Mandibular partial denture-resin base	694.00	555.20	416.40	277.60	138.80
D5213	Maxillary partial denture-cast metal frame w/resin dent bases	1,234.00	987.20	740.40	493.60	246.80
D5214	Mandibular partial denture-resin base	1,082.00	865.60	649.20	432.80	216.40
D5281	Removable unilat part denture	449.00	359.20	269.40	179.60	89.80
D5410	Adjust complete denture-maxillary	60.00	48.00	36.00	24.00	12.00
D5411	Adjust complete denture-mandibular	53.00	42.40	31.80	21.20	10.60
D5421	Adjust partial denture-maxillary	101.00	80.80	60.60	40.40	20.20
D5422	Adjust partial denture-mandibular	101.00	80.80	60.60	40.40	20.20
D5510	Repair broken complete denture base	145.00	116.00	87.00	58.00	29.00
D5520	Replace teeth-comp dent (ea th)	118.00	94.40	70.80	47.20	23.60
D5610	Repair Acrylic Saddle or Base	98.00	78.40	58.80	39.20	19.60
D5620	Repair cast framework	118.00	94.40	70.80	47.20	23.60
D5630	Repair or replace broken clasp	113.00	90.40	67.80	45.20	22.60
D5640	Replace broken teeth-per tooth	145.00	116.00	87.00	58.00	29.00
D5650	Add tooth to existing partial denture	116.00	92.80	69.60	46.40	23.20
D5660	Add Clasp To Existing Partial D	154.00	123.20	92.40	61.60	30.80
D5710	Rebase complete maxil denture	340.00	272.00	204.00	136.00	68.00
D5711	Rebase complete mand denture	340.00	272.00	204.00	136.00	68.00
D5720	Rebase maxil partial denture	304.00	243.20	182.40	121.60	60.80
D5721	Rebase mand partial denture	304.00	243.20	182.40	121.60	60.80

Code	Description	FEE				
		100%	80%	60%	40%	20%
D5730	Reline complete maxil-chairside	190.00	152.00	114.00	76.00	38.00
D5731	Reline complete mand-shairside	190.00	152.00	114.00	76.00	38.00
D5740	Reline maxil partial-chairside	156.00	124.80	93.60	62.40	31.20
D5741	Reline mand partial-chairside	156.00	124.80	93.60	62.40	31.20
D5750	Reline complete maxillary (lab)	284.00	227.20	170.40	113.60	56.80
D5751	Reline complete mand (lab)	284.00	227.20	170.40	113.60	56.80
D5760	Reline maxillary partial (lab)	246.00	196.80	147.60	98.40	49.20
D5761	Reline mandibular partial (lab)	248.00	198.40	148.80	99.20	49.60
D5810	Interim comp denture (maxil)	450.00	360.00	270.00	180.00	90.00
D5811	Interim comp denture (mand)	450.00	360.00	270.00	180.00	90.00
D5820	Interim partial denture (maxil)	339.00	271.20	203.40	135.60	67.80

D5821	Interim partial denture (mand)	342.00	273.60	205.20	136.80	68.40
D5850	Tissue condition, maxillary	94.00	75.20	56.40	37.60	18.80
D5851	Tissue condition, mandibular	94.00	75.20	56.40	37.60	18.80
D5860	Overdenture-complete, B/R	1,271.00	1,016.80	762.60	508.40	254.20
D5861	Overdenture-partial, by report	1,120.00	896.00	672.00	448.00	224.00
D5862	Precision attachment, B/R	302.00	241.60	181.20	120.80	60.40
D6010	Surg place implant: endosteal	1,418.00	1,134.40	850.80	567.20	283.60
D6020	Abut place/subst:endost implant	470.00	376.00	282.00	188.00	94.00
D6040	Surgic place: eposteal implant	3,185.00	2,548.00	1,911.00	1,274.00	637.00
D6050	Surg place: transosteal implant	3,892.00	3,113.60	2,335.20	1,556.80	778.40
D6055	Dent implant sup connecting bar	656.00	524.80	393.60	262.40	131.20
D6062	Abutmt sup cast metal crown	842.00	673.60	505.20	336.80	168.40
D6080	Implant maintenance procedures	60.00	48.00	36.00	24.00	12.00
D6090	Repair implant sup prosth, B/R	172.00	137.60	103.20	68.80	34.40
D6095	Repair implant abutment, B/R	172.00	137.60	103.20	68.80	34.40
D6100	Implant removal, by report	227.00	181.60	136.20	90.80	45.40
D6210	Pontic-cast high noble metal	676.00	540.80	405.60	270.40	135.20
D6211	Pontic-cast predominantly base	609.00	487.20	365.40	243.60	121.80
D6212	Pontic-cast noble metal	629.00	503.20	377.40	251.60	125.80
D6240	Pontic-porcelain fused to hnob	712.00	569.60	427.20	284.80	142.40
D6241	Pontic-porcelain fused to base	664.00	531.20	398.40	265.60	132.80
D6242	Pontic-porcelain fused to nobl	694.00	555.20	416.40	277.60	138.80
D6250	Pontic-resin w/ high noble met	644.00	515.20	386.40	257.60	128.80
D6251	Pontic-resin w/ predomnt base	574.00	459.20	344.40	229.60	114.80
D6252	Pontic-resin with noble metal	590.00	472.00	354.00	236.00	118.00
D6520	Inlay-metallic-two surfaces	506.00	404.80	303.60	202.40	101.20
D6530	Inlay-metallic-three+ surfaces	556.00	444.80	333.60	222.40	111.20
D6543	Onlay-metallic-three surfaces	656.00	524.80	393.60	262.40	131.20
D6544	Onlay-metallic-four + surfaces	674.00	539.20	404.40	269.60	134.80
D6545	Retainer-cast for resin bonded	284.00	227.20	170.40	113.60	56.80
D6720	Retainer crn-res w/ hi nob met	653.00	522.40	391.80	261.20	130.60
D6721	Retainer crn-resin w/ base met	585.00	468.00	351.00	234.00	117.00
S6722	Retainer crn-resin w/ nob met	632.00	505.60	379.20	252.80	126.40
D6750	Retainer crn-porc fused-hi nob	719.00	575.20	431.40	287.60	143.80
D6751	Retainer crn-porc fuse-base met	672.00	537.60	403.20	268.80	134.40
D6752	Retainer crn-porc fused-nob met	700.00	560.00	420.00	280.00	140.00
D6780	Retainer crn-3/4 cast h nob met	710.00	568.00	426.00	284.00	142.00
D6790	Retainer crn-full cast hi nob	674.00	539.20	404.40	269.60	134.80
D6791	Retainer crn-full cast base	605.00	484.00	363.00	242.00	121.00

DENTAL OFFICE VISIT

Description	FEE					
	100%	80%	60%	40%	20%	
D6792	Retainer crn-full cast nob met	634.00	507.20	380.40	253.60	126.80
D6920	Connector bar	562.00	449.60	337.20	224.80	112.40
D6930	Recement fixed partial denture	83.00	66.40	49.80	33.20	16.60
D6940	Stress breaker	190.00	152.00	114.00	76.00	38.00
D6950	Precision attachment	302.00	241.60	181.20	120.80	60.40
D6970	Cast post/core, + brdg retainer	264.00	211.20	158.40	105.60	52.80
D6971	Cast post/part of brdg retainer	264.00	211.20	158.40	105.60	52.80
D6972	Prefab post/core+ brdg retainer	190.00	152.00	114.00	76.00	38.00
D6973	Core buildup for retain, inc pin	134.00	107.20	80.40	53.60	26.80
D6975	Coping-metal	292.00	233.60	175.20	116.80	58.40
D6980	Fixed partial dent. Repair, B/R	116.00	92.80	69.60	46.40	23.20
D6999	Unspec fixed prosth proced, B/R	750.00	600.00	450.00	300.00	150.00

D7110	Extraction Single Tooth	86.00	68.80	51.60	34.40	17.20
D7120	Tooth Extraction Each Additional	74.00	59.20	44.40	29.60	14.80
D7130	Root Removal - exposed roots	93.00	74.40	55.80	37.20	18.60
D7140	Extraction, erupted tooth or exposed root	95.00	76.00	57.00	38.00	19.00
D7210	Extraction-surgical/erupt tooth	152.00	121.60	91.20	60.80	30.40
D7220	Extraction-impacted/soft tis	188.00	150.40	112.80	75.20	37.60
D7230	Extraction-impacted/part bony	239.00	191.20	143.40	95.60	47.80
D7240	Extraction-impacted/compl bony	293.00	234.40	175.80	117.20	58.60
D7241	Remov impact-comp bony w/comp	335.00	268.00	201.00	134.00	67.00
D7250	Surgic removl resid tooth root	159.00	127.20	95.40	63.60	31.80
D7260	Oral antral fistula closure	562.00	449.60	337.20	224.80	112.40
D7270	Reimplantation/stabilization	264.00	211.20	158.40	105.60	52.80
D7272	Tooth transplantation	292.00	233.60	175.20	116.80	58.40
D7280	Surgical access unreupted tooth	339.00	271.20	203.40	135.60	67.80
D7281	Expos impact/unerupt-aid erupt	284.00	227.20	170.40	113.60	56.80
D7290	Surgical reposition of teeth	284.00	227.20	170.40	113.60	56.80
D7291	T/SC Fiberotomy, B/R	78.00	62.40	46.80	31.20	15.60
D7310	Alveoloplasty w/ extract- /quad	136.00	108.80	81.60	54.40	27.20
D7320	Alveoloplasty w/o extract /quad	209.00	167.20	125.40	83.60	41.80
D7340	Vestibuloplasty-ridge ext -2nd	785.00	628.00	471.00	314.00	157.00
D7350	Vestiplasty-ridge ext (inc)	2,278.00	1,822.40	1,366.80	911.20	455.60
D7415	Excision malig lesion, complic	1,500.00	1,200.00	900.00	600.00	300.00
D7450	Rem benign odont-diam<=1.25cm	266.00	212.80	159.60	106.40	53.20
D7451	Rem benign odont-diam<1.25cm	656.00	524.80	393.60	262.40	131.20
D7510	Incis&drain abscess-intra soft	116.00	92.80	69.60	46.40	23.20
D7520	Incis&drain abscess-extra soft	173.00	138.40	103.80	69.20	34.60
D7880	Occlusal orthotic device	498.00	398.40	298.80	199.20	99.60
D7960	Frenulectomy-separate procedur	227.00	181.60	136.20	90.80	45.40
D7970	Excision, hyperplast tiss-arch	244.00	195.20	146.40	97.60	48.80
D7971	Excision, pericoronal ging /arch	118.00	94.40	70.80	47.20	23.60
D9110	Palliative (emerg) tx of dental pain-minor procedure	62.00	49.60	37.20	24.80	12.40
D9612	Therap parenteral drugs, 2+	35.00	28.00	21.00	14.00	7.00
D9630	Other drugs/medicaments, B/R	10.00	8.00	6.00	4.00	2.00
D9910	Application of desensitize med	25.00	20.00	15.00	10.00	5.00
D9911	Apply desensitiz' resin, per th	25.00	20.00	15.00	10.00	5.00
D9930	Treat complications-postsurgic	60.00	48.00	36.00	24.00	12.00
D9940	Occlusal guards, by report	376.00	300.80	225.60	150.40	75.20
D9941	Fabricate athletic mouthguards	110.00	88.00	66.00	44.00	22.00
D9972	External bleaching per arch	150.00	120.00	90.00	60.00	30.00