

Benefit Name	Standard Services to be used			Services deviated from standard (for some policies only)		
	Case	Code	Service Name	Case	Code	Service Name
Physiotherapy	Normal physiotherapy session	97001CPT	physical therapy eval			
				Physiotherapy session in case of accidents	97002CPT	physical therapy re-eval (Post-accidents)
Dental	Dental consultation	D0110CPT	Initial oral examination			
	Root Canal Treatment	D3330CPT	RCT - Molar (excluding final restoration)			
	X-Rays	D0240CPT	Intraoral - occlusal film			
	Filling	D2330CPT	Resin - 1 surface anterior			
		D2160CPT	Amalgam - 3 surfaces permanent			
	Surgical Procedure	D3220CPT	Therapeutic pulpotomy (excluding final restoration)			
		D7511CPT	Excision of Pericornal Tissue (Operculectomy)			
	Medications	D9998CPT	Treatment (Antibiotics, Analgesics)			
	Tooth Extraction	D7110CPT	Single tooth extraction			
				Gum Treatment (Cleaning)	D1110CPT	Prophylaxis (Cleaning) - adult (including OHI)
				Gum Treatment (Scaling)	D4341CPT	Periodontal scaling/root planing per quadrant
				Bridges	D9999999	Bridges
				Crown	D2740CPT	Crown - porcelain/ceramic substrate
Optical	Vision Test	92283CPT	vision exam, extended			
	Lenses for Spectacles	65223CPT	Lenses for Spectacles			
				Frames	68851CPT	Frames
			Contact Lenses	92325CPT	modification, contact lens (sep proc), w/ medical supervision, adaptation	