



Medical Aid Fund
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PULA DENTAL TARIFFS

CODE	PROCEDURE DESCRIPTION	DENTAL Tariffs 2017/18	Lab Fees 2017/18	DENTAL FEES (incl Lab) - 2017/18	DENTAL Tariffs 2017/18	Lab Fees 2017/18	DENTAL FEES (incl Lab) - 2017/18
DIAGNOSTIC PROCEDURES							
8101	Consultation	185.70		185.70	191.30		191.30
8102	Comprehensive consultation	0.00			0.00		
8104	Consultation for specific problem	95.00		95.00	97.90		97.90
8105	Appointment not kept (30 min)	0.00			0.00		
8106	Written treatment plan where prior authorisation is required (covered under 8102)	0.00			0.00		
8107	Intra oral radiograph	92.80		92.80	95.60		95.60
8108	Maximum for 8107	718.00		718.00	739.50		739.50
8113	Occlusal radiograph	158.80		158.80	163.60		163.60
8114	Handwrist radiograph	371.50		371.50	382.60		382.60
8115	Panoramic or cephalometric radiograph	371.50		371.50	382.60		382.60
8117	Two study models	101.10	63.70	164.80	104.10	65.60	169.70
8119	Study models mounted on adjustable articulator	252.00	265.50	517.50	259.60	273.50	533.10
8121	Diagnostic photographs	0.00			0.00		

8122	Bacteriological studies for determination of pathologic agents	0.00			0.00		
8123	Caries susceptibility test	0.00			0.00		
8811	Tracing and analysis of cephalometric radiograph	43.40		43.40	44.70		44.70
	EMERGENCY PROCEDURES	0.00			0.00		
8131	Emergency treatment for relief of pain	140.20		140.20	144.40		144.40
8132	Gross pulpal debridement	229.40		229.40	236.30		236.30
8133	Recementing (per crown or abutment unit)	140.20		140.20	144.40		144.40
8135	Removal of crown, inlay, bridge	280.80		280.80	289.20		289.20
8136	Access through prosthetic crown for RCT	123.70		123.70	127.40		127.40
8137	Temporary crown if perm. crown is not to be made	481.10		481.10	495.50		495.50
		0.00			0.00		
	MISCELLANEOUS PROCEDURES	0.00			0.00		
8109	Cross-infection control (i.e. use of rubber gloves, masks, etc. per dentist, per assistant, per visit)	20.80	9.10	29.90	21.40	9.40	30.80
8110	Provision of sterilised & wrapped instruments	55.80		55.80	57.50		57.50
		0.00			0.00		
8141	Inhalational sedation, first quarter hour	103.40		103.40	106.50		106.50
8143	Inhalational sedation, each add. quarter hour	55.80		55.80	57.50		57.50
8144	IV sedation	62.00		62.00	63.90		63.90
8145	Local anaesthetic, per visit	26.90		26.90	27.70		27.70
8147	Use of monitoring equipment under I.V. sedation	221.00		221.00	227.60		227.60
8155	Polish only	140.20		140.20	144.40		144.40
8157	Re-burnishing	140.20		140.20	144.40		144.40
8159	Scale and polish	276.50		276.50	284.80		284.80
8161	Topical fluoride	140.20		140.20	144.40		144.40
8163	Fissure sealant, per tooth	92.80		92.80	95.60		95.60

8167	Treatment o. hypersens. dentine	107.30		107.30	110.50		110.50
8169	Bite plate or occlusal guards	540.80	515.30	1056.10	557.00	530.80	1087.80
8170	Minor occlusal adjustment	307.70		307.70	316.90		316.90
8171	Mouth protector	0.00	309.60	309.60	0.00	318.90	318.90
8173	Fixed spacemaintainer	259.90	481.10	741.00	267.70	495.50	763.20
8175	Removable spacemaintainer	334.60	485.10	819.70	344.60	499.70	844.30
8176	Periodontal screening	169.20		169.20	174.30		174.30
8177	Oral hygiene instructions for the periodontally compromised patient	212.40		212.40	218.80		218.80
8178	Oral hygiene evaluation for period. comp. patient	113.40		113.40	116.80		116.80
8179	Plaque removal for period. comp. patient	158.80		158.80	163.60		163.60
8180	Scaling and polishing for the period. comp. patient	299.50		299.50	308.50		308.50
8182	Root planing, per quadrant	561.80		561.80	578.70		578.70
8184	Root planing, per sextant	448.10		448.10	461.50		461.50
8185	Gingivectomy-gingivoplasty, per quadrant	734.90		734.90	756.90		756.90
8186	Gingivectomy-gingivoplasty, per sextant	586.30		586.30	603.90		603.90
8188	Biopsy	357.10		357.10	367.80		367.80
8192	Appositioning of soft tissue injuries	693.60		693.60	714.40		714.40
8194	Placement of a single osseo-integrated implant per jaw	1302.40		1302.40	1341.50		1341.50
8195	second o.-i. Implant, per jaw	974.50		974.50	1003.70		1003.70
8196	subsequent o.-i. Implant, per jaw	652.40		652.40	672.00		672.00
8198	Exp./transmuc. o.-i. Implant, per jaw	482.90		482.90	497.40		497.40
8199	second Exp./transmuc. o.-i. Implant	363.40		363.40	374.30		374.30
8200	subsequ. Exp./transmuc. o.-i. Implant	243.60		243.60	250.90		250.90
8201	Simple extraction	140.20		140.20	144.40		144.40
8202	Add. Tooth same quadrant	55.80		55.80	57.50		57.50

8209	Surgical removal of tooth	607.00		607.00	625.20		625.20
8210	Impacted tooth, first tooth	1007.20		1007.20	1037.40		1037.40
8211	Impacted tooth, second tooth	540.80		540.80	557.00		557.00
8212	Impacted tooth, each additional	305.50		305.50	314.70		314.70
8213	Surgical removal of residual roots (cutting procedure)	607.00		607.00	625.20		625.20
8214	Surgical removal of residual roots - each subsequent tooth	468.40		468.40	482.50		482.50
8215	Surgical exposure for orthodontic reasons	1040.10		1040.10	1071.30		1071.30
8220	Suture material provided by practitioner	37.20		37.20	38.30		38.30
8221	Post-extr. Haemorrhage, first visit	103.40		103.40	106.50		106.50
8225	Septic socket, initial visit	103.40		103.40	106.50		106.50
8227	Septic socket, each additional visit	66.00		66.00	68.00		68.00
8229	Apicectomy, incisors and canines	693.60		693.60	714.40		714.40
8231	Full upper and lower dentures	2266.50	1205.50	3472.00	2334.50	1241.70	3576.20
8232	Full upper or lower denture	1393.20	942.20	2335.40	1435.00	970.50	2405.50
8233	1 tooth	650.10	400.50	1050.60	669.60	412.50	1082.10
8234	2 teeth	650.10	429.30	1079.40	669.60	442.20	1111.80
8235	3 teeth	972.50	450.00	1422.50	1001.70	463.50	1465.20
8236	4 teeth	972.50	450.00	1422.50	1001.70	463.50	1465.20
8237	5 teeth	972.50	450.00	1422.50	1001.70	463.50	1465.20
8238	6 teeth	1288.20	549.00	1837.20	1326.80	565.50	1892.30
8239	7 teeth	1288.20	648.00	1936.20	1326.80	667.40	1994.20
8240	8 teeth	1288.20	734.90	2023.10	1326.80	756.90	2083.70
8241	9 teeth or more	1288.20	755.70	2043.90	1326.80	778.40	2105.20
8251	Cast gold clasp per rest or clasp	130.30	97.20	227.50	134.20	100.10	234.30
8253	Wrought gold clasp or rest per rest or clasps	130.30	90.50	220.80	134.20	93.20	227.40

8255	Stainless steel clasp or rest	136.50	90.50	227.00	140.60	93.20	233.80
8257	Lingual or palatal bar	158.80	144.60	303.40	163.60	148.90	312.50
8259	Rebase, heat cure	530.60	499.70	1030.30	546.50	514.70	1061.20
8261	Remodel	848.40	652.40	1500.80	873.90	672.00	1545.90
8263	Reline, cold cure, direct	334.60		334.60	344.60		344.60
8265	Tiss. Cond. + soft self cure interim re-line	221.00		221.00	227.60		227.60
8267	Soft-base reline, heat cured	771.90	629.70	1401.60	795.10	648.60	1443.70
8269	Repair of denture or intra-oral appliance	179.60	204.50	384.10	185.00	210.60	395.60
8270	Add clasp to existing partial denture	130.30	62.00	192.30	134.20	63.90	198.10
8271	Add tooth to existing denture	130.30	62.00	192.30	134.20	63.90	198.10
8273	Additional fee when impression required	103.40	70.20	173.60	106.50	72.30	178.80
8275	Adjustment of denture	103.40		103.40	106.50		106.50
8277	Gold inlay in denture	0.00			0.00		
8279	Metal base to full denture	0.00			0.00		
8281	Chrome cobalt partial base	1514.90	1139.40	2654.30	1560.30	1173.60	2733.90
8303	Indirect pulp capping	185.70		185.70	191.30		191.30
8304	Rubber Dam, per arch	109.40		109.40	112.70		112.70
8305	Apexification of root canal, per visit	185.70		185.70	191.30		191.30
8306	Cost of Mineral Trioxide Aggregate	0.00			0.00		
8307	Pulpotomy	183.60		183.60	189.10		189.10
8308	Bleaching, vital, per arch	0.00			0.00		
8309	Supply of and instruction for home bleaching	0.00			0.00		
8310	Supply of bleaching materials	0.00			0.00		
8311	Follow-up visit for home bleaching	0.00			0.00		
8325	Bleaching, non vital, per tooth	332.60		332.60	342.60		342.60
8327	Each additional visit for non-vital bleaching	150.60		150.60	155.10		155.10

8330	Removal/bypassing of fractured post/ instrument	183.60		183.60	189.10		189.10
	Preparatory visits, obturation done at separate visit	0.00			0.00		
8332	Single canal tooth, per visit (max. 2 visits)	140.20		140.20	144.40		144.40
8333	Multi canal tooth, per visit (max. 2 visits)	196.10		196.10	202.00		202.00
8334	Re-preparation of previously obturated canal	208.50		208.50	214.80		214.80
	Obturation visit	0.00			0.00		
8335	First canal, anteriors and premolars	635.80		635.80	654.90		654.90
8328	Each additional canal, anteriors and premolars	259.90		259.90	267.70		267.70
8336	First canal, molars	877.10		877.10	903.40		903.40
8337	Each additional canal, molars	259.90		259.90	267.70		267.70
8338	First canal, anteriors and premolars	974.50		974.50	1003.70		1003.70
8329	Each additional canal, anteriors and premolars	324.10		324.10	333.80		333.80
8339	First canal, molars	1341.70		1341.70	1382.00		1382.00
8340	Each additional canal, molars	324.10		324.10	333.80		333.80
8341	One surface	253.70		253.70	261.30		261.30
8342	Two surfaces	315.80		315.80	325.30		325.30
8343	Three surfaces	379.90		379.90	391.30		391.30
8344	More than three surfaces	425.40		425.40	438.20		438.20
8345	Pre-formed post retention	276.50		276.50	284.80		284.80
8347	Pin retention, first pin	138.70		138.70	142.90		142.90
8348	Pin retention, each additional pin	130.30		130.30	134.20		134.20
8349	Carving or contouring plastic restoration to accommodate existing prosthesis	57.70		57.70	59.40		59.40
8366	Pin retention as part of cast restoration	208.50		208.50	214.80		214.80
8376	Prefabricated post and core in addition to crown	765.70		765.70	788.70		788.70
8379	Cost of posts	130.30		130.30	134.20		134.20

8351	One surface, anterior	280.80		280.80	289.20		289.20
8352	Two surfaces, anterior	351.10		351.10	361.60		361.60
8353	Three surfaces, anterior	421.00		421.00	433.60		433.60
8354	More than three surfaces, ant.	468.40		468.40	482.50		482.50
8355	Composite Veneers (Direct)	485.10		485.10	499.70		499.70
8367	One surface, posterior	301.20		301.20	310.20		310.20
8368	Two surfaces, posterior	373.70		373.70	384.90		384.90
8369	Three surfaces, posterior	450.00		450.00	463.50		463.50
8370	More than three surfaces, pos.	485.10		485.10	499.70		499.70
8361	One surface inlay	427.50	538.80	966.30	440.30	555.00	995.30
8362	Two surface inlay	623.40	784.20	1407.60	642.10	807.70	1449.80
8363	Threesurfaces inlay	1042.40	817.30	1859.70	1073.70	841.80	1915.50
8364	Four or more surfaces inlay	1259.30	817.30	2076.60	1297.10	841.80	2138.90
8371	One surface inlay	514.10	1069.20	1583.30	529.50	1101.30	1630.80
8372	Two surfaces inlay	759.60	1069.20	1828.80	782.40	1101.30	1883.70
8373	Three surfaces inlay	1251.00	1069.20	2320.20	1288.50	1101.30	2389.80
8374	More than three surfaces inlay	1514.90	910.30	2425.20	1560.30	937.60	2497.90
8193	Crown on implant	2082.90	1042.40	3125.30	2145.40	1073.70	3219.10
8356	Bridge per abutment - only applicable to Maryland type	623.40		623.40	642.10		642.10
8357	Pre-formed metal crown	286.60		286.60	295.20		295.20
8391	Cast post & core - single	322.00	381.80	703.80	331.70	393.30	725.00
8393	Cast post & core - double	514.10	547.10	1061.20	529.50	563.50	1093.00
8395	Cast post & core - triple	743.20	547.10	1290.30	765.50	563.50	1329.00
8396	Cast coping	208.50	375.70	584.20	214.80	387.00	601.80
8397	Cast core with pins	514.10	547.10	1061.20	529.50	563.50	1093.00

8398	Core build-up including any pins	623.40		623.40	642.10		642.10
8401	Cast metal full crown	1603.90	957.90	2561.80	1652.00	986.60	2638.60
8403	Cast three-quarter crown	1603.90	652.40	2256.30	1652.00	672.00	2324.00
8405	Acrylic jacket crown	1603.90		1603.90	1652.00		1652.00
8407	Acrylic veneered crown	1603.90	637.90	2241.80	1652.00	657.00	2309.00
8409	Porcelain jacket crown	1603.90	982.60	2586.50	1652.00	1012.10	2664.10
8411	Porcelain veneered crown	1603.90	996.80	2600.70	1652.00	1026.70	2678.70
8413	Facing replacement	313.80	421.00	734.80	323.20	433.60	756.80
8414	Additional fee for provision of crown within an existing clasp	92.80	193.10	285.90	95.60	198.90	294.50
8420	Sanitary pontic	780.10		780.10	803.50		803.50
8422	Posterior pontic	1042.40		1042.40	1073.70		1073.70
8424	Anterior pontic including premolars	1310.70		1310.70	1350.00		1350.00
8560	Cost of ceramic block						