

GOVERNMENT GAZETTE

OF THE

REPUBLIC OF NAMIBIA

R2,00 WINDHOEK — 28 July 1993 No. 671

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GOVERNMENT NOTICE

No. 67 Workmen's Compensation Act, 1941: Tariff of fees for dental services

Government Notice

MINISTRY OF LABOUR AND MANPOWER DEVELOPMENT

No. 67

WORKMEN'S COMPENSATION ACT, 1941: TARIFF OF FEES FOR DENTAL SERVICES

Under section 79 of the Workmen's Compensation Act, 1941 (Act 30 of 1941) I hereby with effect from 28 July 1993 -

- (a) prescribe the Tariff of Fees for Dental Services and the general rules and general modifiers applicable thereto, as set out in the Schedule; and
- (b) repeal Government Notice 27 of 1991.

The fees as set out in the Schedule are applicable in respect of payments authorized irrespective of the date of the accident in respect of which payments are made.

W.F. GROBLER WORKMEN'S COMPENSATION COMMISSIONER

Windhoek, 16 July 1993

SCHEDIII E

TARIFF OF FEES FOR DENTAL SERVICES GENERAL RULES GOVERNING THE TARIFF OF FEES

- A consultation shall include an examination and charting. No further consultation fee shall be chargeable until the treatment plan resulting from this initial consultation has been discharged. This rule applies only to tariff items 8101 and 8103.
- 002 Except in those cases where the fee is determined "by arrangement" the fee for the rendering of a service which is not listed in this tariff of fees shall be based on the fee in respect of a comparable service that is listed herein.
- In the case of a prolonged or costly dental service or procedure, the dental practitioner shall ascertain beforehand from the Commissioner whether he or she will accept financial responsibility in respect of such treatment.
- In exceptional cases where the fee is disproportionately low in relation to the actual services rendered by a dental practitioner, such higher fee as may be agreed upon between the dental practitioner and the Commissioner, may be charged.

Conversely, if the fee is disproportionately high in relation to the actual services rendered, a lower fee than that in the tariff of fees should be charged.

- Save in exceptional cases the services of a specialist shall be available only on the recommendation of the attending dental or medical practitioner. Referring practitioners shall indicate to the specialist that the patient is being treated under the Workmen's Compensation Act, 1941 (Act 30 of 1941).
- "Normal consulting hours" are between 08:00 and 17:00 on weekdays, and between 08:00 and 13:00 on Saturdays.
- A dental practitioner shall submit his or her account for treatment under the said Act to the employer of the workman concerned.

- A general dental practitioner shall only be entitled to charge twothirds of the fees of a specialist for treatment that is not listed in the tariff of fees for general dental practitioners. Any specialist performing any treatment not listed in the tariff of fees for his or her speciality shall charge the same fee as that for a general dental practitioner or, if such treatment does not appear in the tariff of fees for general dental practitioners either, then two-thirds of the fee listed in the appropriate specialist tariff of fees. Such treatment shall be indicated on the account against the code 8004.
- Fees charged by dental technicians for their services (+L) shall be shown on the dentist's account against the code 8099. Such dentist's account shall be accompanied by the actual account of the dental technician (or a copy thereof) and the account of the dental technician shall bear the signature of the dentist (or the person authorised by him or her) as proof that it has been compiled correctly. "L" comprises the fee charged by the dental technician for his or her services as well as the cost of teeth. For example, tariff item 8231 is specified as follows:

For the adjustment of specific tariff items to certain circumstances, it is necessary to show the following modifiers on the account:

8002 The appropriate scheduled fee plus 50%.

8003 The appropriate scheduled fee plus 10%.

8004 Two-thirds of appropriate scheduled fee.

8005 The appropriate scheduled fee to a maximum of R96,60.

8006 50% of the appropriate scheduled fee.

8007 15% of the appropriate scheduled fee.

8008 The appropriate scheduled fee plus 25%.

8009 75% of the appropriate scheduled fee.

8010 25% of the appropriate scheduled fee.

8011 10% of the appropriate scheduled fee.

8012 5% of the appropriate scheduled fee.

- In any case where treatment is not listed in the dental tariff of fees for general dental practitioners or specialists then the appropriate fee listed in the tariff of fees for medical aid as published in Government Notice 66 of 1993 shall apply and shall be charged.
- Payment of a fee in respect of treatment not listed in the tariff of fees but for which the Commissioner has agreed to accept liability, and of any fee reflected in respect of a service listed in the tariff of fees, shall be in full and final settlement for the treatment or procedure given to the workman as is contemplated under section 79 of the above-mentioned Act in respect of medical practitioners.

- Ol4 Payment shall only be made for services required as a direct result of the accident. No liability would e.g. be accepted for gold fillings in broken dentures for cosmetic purposes only.
- Where a general anaesthetic is administered by a dental practitioner, the fee charged shall be as set out in item 8499.
- O16 Items 8279 and 8281: Metal base to full and partial dentures. The fees for these items refer to the metal base only. An additional fee is then charged for the partial or full denture which is fitted to the base.

	GENERAL DENTAL PRACTITIONERS		
Item	Procedure	R	
	Consultations		
8101	Consultation at surgery	27,80	
8013 8105	Consultation at home or hospital	38,80	
	Diagnostic procedures		
8107	Intra-oral radiographs, per film	17,80	
8108	Maximum	143,60	
8113	Occlusal radiographs	27,80	
8115	Panoramic radiographs	86,70	
	Treatment procedures		
8129	Additional fee for emergency treatment rendered outside normal working hours including emergency treatment carried out at hospital	67,30	
8131	Emergency treatment for relief of pain where no other tariff item is applicable	27,80	
8132	Emergency root-canal treatment	44,90	
8133	Re-cementing of inlays, crowns or bridges — per abutment	27,80	
8135	Removal of inlays and crowns (per unit) and bridges (per abutment) as an emergency procedure	54,60	
8137	Emergency crown (not applicable to temporary crowns placed during routine crown and bridge preparations)	93,40	

Item	Procedure	R
8138	Pre-formed metal crown emergency procedure	56,90
8139	Additional fee for treatment under general anaesthetic or domiciliary or hospital treatment, per case	44,90
	Note: This item refers to additional treatment carried out as a result of the consultation referred to under items 8101 and 8103.	
8141	Inhalation sedation — first quarter-hour or part thereof	19,40
8143	Per additional quarter-hour or part thereof	10,50
	Note: No additional fee to be charged for gases used in the case of items 8141 and 8143.	
8144	Intravenous sedation	12,90
	EXTRACTIONS Extractions during a single visit	
8201	One	27,80
8202	Two	39,00
8203	Three	49,50
8204	Four	61,50
8205	Five	72,50
8206	Six	82,90
8207	Seven	94,20
8208	Eight	106,10
8209	Nine	116,60
8210	Ten	128,30
8211	Eleven	139,50
8212	Twelve	150,20
8213	Thirteen	161,60
8214	Fourteen	172,80
8215	Fifteen	183,30
8216	Sixteen	195,40
8217	Seventeen	205,70

Item	Procedure	R
8218	Eighteen or more	216,90
8221	Local treatment of post-extraction haemorrhage (excluding treatment of bleeding in the case of blood dyscrasias, e.g. haemophilia)	19,40
8223	Each additional visit	13,60
8225	Treatment of septic socket	19,40
8227	Each additional visit	13,60
	Prosthetics	
8231	Full upper and lower dentures (See note below item 8267)	442,40+L
8232	Full upper or lower dentures (See note below item 8267)	272,60+L
8233	Partial denture, one tooth	126,60+L
8234	Partial denture, two teeth	126,60+L
8235	Partial denture, three teeth	189,30+L
8236	Partial denture, four teeth	189,30+L
8237	Partial denture, five teeth	189,30+L
8238	Partial denture, six teeth	252,30+L
8239	Partial denture, seven teeth	252,30+L
8240	Partial denture, eight teeth	252,30+L
8241	Partial denture, nine or more teeth	252,30+L
8243	Additional fee where a soft base is incorporated with items 8231 to 8241	39,00+L
8255	Stainless steel clasp or rest, per clasp or rest	26,20+I
8257	Lingual bar or palatal bar, per lingual bar or palatal bar	31,50+L
	Note: Where items 8281 or 8269 are applied, items 8255 or 8257 may not be charged.	
8259	Re-base, per denture	104,10+L
8261	Re-model, per denture	169,60+L
8263	Re-line: Self-curing hard conditioner acrylic, per denture	65,10+L

Item	Procedure	R
8265	Tissue conditioner and soft self-cure interim reline, per denture	43,20+L
8267	Soft base reline, per denture (heat cured)	150,20+L
	Note: Not applicable when items 8231 to 8241 are carried out concurrently.	
8269	Repair of denture and/or addition of one or more teeth or clasps to denture	36,30+L
8273	Additional fee where impression is required for 8269	19,40+L
8279	Metal base to full denture, per denture	135,50+L
8281	Metal base to partial denture, per denture	336,80+L
	Note: 1. The fees for items 8279 and 8281 refer to the metal base only. An additional fee is then charged for the partial or full denture which is fitted to the base. 2. Where item 8281 is applied, items 8255 and 8257 cannot be charged.	
	Note: With the exception of diagnostic intra-oral radiographs, fees for only three further intra-oral radiographs may be charged for each completed root canal therapy on an anterior tooth and a further five intra-oral radiographs for each completed root-canal therapy on a multi-rooted tooth.	
	Endodontics	
8132	Emergency root-canal treatment	44,90
	Note: If an emergency root-canal treatment is followed by a completed root treatment at the same visit item 8132 cannot be charged.	
8301	Direct pulp capping	12,90
8303	Indirect pulp capping where permanent filling is not completed at same visit	36,00
	Note: Where Rubber Dam is applied for the endo- dontic procedures listed below, item 8350 may be applied.	

Item	Procedure	R
8304	Application of Rubber Dam, per arch (irrespective of number of teeth treated) when items 8307, 8330, 8334 to 8336 are carried out	21,70
8307	Amputation of pulp (pulpotomy)	36,00
8330	Preparatory visit — single-rooted tooth	27,80
8331	Maximum for 8330	110,90
8332	Preparatory visit — multi-rooted tooth	38,20
8333	Maximum for 8332	152,60
	Note: Items 8330, 8331, 8332 and 8333 shall not be charged at the same visit as items 8334, 8335 and 8336.	
8334	Root-canal therapy, excluding molars, first canal	124,20
8335	Root-canal therapy, molars, first canal	169,60
8336	Each additional canal (applicable to all teeth)	51,10
	Note: Where a root treatment is completed at one visit (i.e. pulp removal, debridgement, enlarging and filling canals, etc.) Modifier 8008 can be applied to items 8334, 8335 and 8336.	
	Plastic restorations	
	Note: Plastic restorations of the same material on posterior teeth are classified in accordance with the number of surfaces treated per tooth per visit, irrespective of whether the restorations are contiguous or not.	
8341	One surface	29,90
8342	Two surfaces	41,20
8343	Three surfaces	54,60
8344	More than three surfaces	67,30
8345	Preformed post reinforcement, per post	40,40
8347	Pin retention for restoration, first pin	27,80
8349	Maximum for pin retention, per tooth	55,30

Item	Procedure	R
	Plastic restorations using acid etch technique	
8350	Application of Rubber Dam, per arch (irrespective of number of teeth restored) when items 8351 to 8354 are carried out	21,70
8351	One surface	34,40
8352	Two surfaces	45,70
8353	Three surfaces	58,40
8354	More than three surfaces	70,50
	Note: Where items 8351 to 8354 are carried out on molars and premolars Modifier 8008 may be applied.	
8355	Composite Veneers (Laminated or Direct)	86,70+L
8356 8357	Bridge: Per abutment Per pontic (see 8420, 8422, 8424) Preformed metal crown	86,70+L 56,90
	INLAYS	
	Metal Inlays	
8361	One surface	86,70+L
8362	Two surfaces	126,60+L
8363	Three surfaces	211,30+L
8364	Four surfaces	255,40+L
8365	Five surfaces	255,40+L
	Ceramic or Resin Bonded Inlays	
8371	One surface	86,70+L
8372	Two surfaces	126,60+L
8373	Three surfaces	211,30+L
8374	Four surfaces	255,40+L
8375	Five surfaces	255,40+L

Item	Procedure	R
	Preformed Post and Core	
8376	Single post and core	70,50
8377	Double post and core	111,40
8378	Triple post and core	151,80
	Note: Items are inclusive of pins.	
	Post with thimble or coping	
8391	Single post	65,10+L
8393	Binary post	104,10+L
8395	Triple post	150,20+L
8396	Copings	42,70+L
8397	Cast core with pins	104,10+L
8398	Plastic core on pin reinforcing irrespective of number of pins	
	Crowns	
8401	Cast full crown	303,40+L
8403	Cast three-quarter crown	303,40+L
8405	Acrylic jacket crown	258,90+L
8407	Acrylic veneered crown	323,80+L
8409	Porcelain jacket crown	323,80+L
8411	Porcelain veneered crown	323,80+L
8413	Facing replacement	63,50+L
	Note: The fees in this section include cost of temporary or intermediate crowns.	
	Resin-bonded retainers	
	Maryland Bridges (see 8356) Per Pontic (see 8420, 8422, 8424)	
	Bridges (retainers as above)	
8420	Sanitary pontic	158,10+L

Item	Procedure	R
8422	Posterior pontic	211,30+L
8424	Anterior pontic including premolars	264,50+L
	General anaesthetics	
8499	The relevant items in the tariff of fees for medical aid as published in Government Notice 66 of 1993 shall apply to all general anaesthetics in dental procedures.	
	SPECIALIST PROSTHODONTISTS	
	TREATMENT PROCEDURES	
	Emergency treatment	
8511	Emergency treatment for relief of pain (where no other tariff item is applicable)	63,50
8513	Emergency crown (not applicable to temporary crowns placed during routine crown and bridge preparations)	104,10
8515	Recementation of inlay, crown or bridge, per abut-	40,40
8517	Reimplantation of a tooth, including fixation as required	107,80+L
	Provisional treatment	
8521	Provisional splinting-extracoronal wire, per sex-	86,70
8523	Provisional splinting-extracoronal wire plus resin, per sextant	126,60
8527	Provisional splinting-intracoronal wire or pins or cast bar, plus amalgam or resin, per dental unit included in the splint	40,40+L
8529	Provisional crown, which is not placed during routine crown preparation	104,10+L
8530	Preformed metal crown	88,30
	Occlusal adjustment	:
8551	Major occlusal adjustment	296,20
8553	Minor occlusal adjustment	93,40

Item	Procedure	R
	Ceramic or Resin Bonded Inlays	
8555	One surface	391,50+L
8556	Two surfaces	565,20+L
8557	Three surfaces	875,40+L
8558	Four surfaces	875,40+L
8559	Five surfaces	875,40+L
	Metal inlays	
8571	One surface	188,00+L
8572	Two surfaces	271,70+L
8573	Three surfaces	420,70+L
8574	Four surfaces	420,70+L
8575	Five surfaces	420,70+L
8577	Pin retention	62,70+L
	Post and copings	
8581	Single post	104,30+L
8582	Double post	150,20+L
8583	Triple post	188,00+L
8587	Copings	86,70+L
8589	Cast core with pins	148,20+L
8591	Plastic core on pin reinforcing irrespective of number of pins	104,10
	Connectors	
8597	Locks and milled rests	42,70+L
8599	Precision attachments	104,10+L
	Crowns	
8601	Cast three-quarter crown	420,70+L
8607	Porcelain jacket crown	420,70+L
8609	Porcelain veneered metal crown	525,40+L

Item	Procedure	R
	Bridges	
	Note: Resin-bonded retainers as above.	
8611	Sanitary pontic	317,40+L
8613	Posterior pontic	391,30+L
8615	Anterior pontic	420,70+L
	Resin-bonded retainers	
8617	Per abutment	129,50+L
	Per pontic (see 8611, 8613, 8615)	
	Conservative treatment of myofascial pain-dysfunction syndrome	.
8621	First visit	51,10
8623	Subsequent visit	38,20
	Endodontic procedures, etc.	
8631	Root-canal therapy, first canal	368,20
8633	Each additional canal	92,00
	Note: The above-mentioned endodontic fees included all X-rays and repeat visits.	
8635	Apexification of root canal, per visit	61,50
8637	Hemisection of a tooth or resection of root	148,20
8638	Incision and drainage of pyogenic abscess intra-oral approach	87,50
9015	Apicectomy, including retrograde root filling where necessary — anterior tooth	203,80
9016	Apicectomy including retrograde filling where necessary — posterior tooth	304,40
8640	Removal of fractured post or instrument from root canal	107,80
	Prosthetics (Removable)	
8641	Complete upper and lower dentures without primary complications	735,70+L

Item	Procedure	R
8643	Complete upper and lower dentures without major complications	1 364,90+L
8645	Complete upper and lower dentures with major complications	1 678,80+L
8647	Complete upper or lower dentures with primary complications	l 051,60+L
8661	Diagnostic dentures (inclusive of tissue conditioning treatment)	840,50+L
8662	Remounting and occlusal adjustment of dentures	121,10
8663	Chrome cobalt base for full denture (extra charge)	253,10+L
8665	Re-base, per denture	169,60+L
8667	Soft base, per denture (heat cured)	253,10+L
8668	Tissue conditioner, per denture	62,70
8669	Intra-oral reline of complete or partial denture	93,40
8671	Metal (e.g. chrome cobalt) partial denture	840,50+L
8672	Additional fee for altered cast technique for partial denture	32,90+L
8674	Additive partial denture	380,90+L
8679	Repairs	42,70+L

SPECIAL MAXILLO-FACIAL AND ORAL SURGEONS

See Rule 011

- 1. If procedures under tariff items 8201 to 8218 inclusive are carried out by specialists in maxillo-facial and oral surgery, the fees shall be equal to the appropriate tariff fee plus 50% (8002).
- 2. The fee for more than one operation or procedure **performed through the** same incision shall be calculated as the fee for the major operation plus the tariff for the subsidiary operation to a maximum of R96,60 for each such subsidiary operation or procedure (8005).
- 3. The fee for more than one operation or procedure performed under the same anaesthetic but through another incision shall be calculated on the tariff fee for the major operations plus:

- 75% for the second procedure or operation (8009).
- 50% for the third procedure or operation (8006).
- 25% for the fourth procedure or operation (8010).
- 10% for the fifth procedure or operation (8011).
- 5% for the sixth and subsequent procedures or operations (8012).

This rule shall not apply where two or more unrelated operations are performed by practitioners in different specialities, in which case each practitioner shall be entitled to the full fee for his or her operation.

If, within six months, a second operation for the same condition or injury is performed, the fee for the second operation shall be half of that for the first operation.

The tariff fee for an operation shall, unless otherwise stated, include normal post-operative care for a period not exceeding four months. If a practitioner does not himself or herself complete the post-operative care, he or she shall arrange for it to be completed without extra charge: Provided that in the case of post-operative treatment of a prolonged or specialised nature, such fee as may be agreed upon between the practitioner and the Commissioner may be charged.

- 4. The fee payable to an assistant practitioner shall be calculated at 15% of the fee of the practitioner performing the operation, with a minimum of R58,40 (8007).
- 5. The additional fee to all members of the surgical team for after-hours emergency surgery shall be calculated by adding 25% to the tariff fee of the procedure performed (8008).

See Rule 012

In cases where treatment is not listed in the tariff of fees for general dental practitioners or specialist prosthodontists then the appropriate fee listed in the tariff of fees for medical aid published in Government Notice 66 of 1993 shall apply and shall be charged, and the medical tariff item shall be indicated.

Item	Procedure	R
	Consultations and visits	
8901	Consultation at consulting rooms	51,10
8903	Consultation at hospital, nursing home or house	56,90
8904	Subsequent consultation at consulting rooms, hospital, nursing home or house	27,80
8905	Weekend visits and night visits between 17:00 and 08:00 of the following day	82,10

Item	Procedure	R
8907	Maximum fee per week for subsequent consulta-	94,20
	Note: "Subsequent consultation" shall mean, in connection with items 8904 and 8907, a consultation for the same traumatic condition provided that such consultation occurs within six months of the first consultation.	
	Investigations and records	
8107	Intra-oral radiographs, per film	17,80
8108	Maximum	143,60
8113	Occlusal radiographs	27,80
8115	Panoramic radiograph	86,70
8917	Biopsies: Intra-oral	104,70
8919	Biopsy of bone: Needle biopsy	180,90
8921	Biopsy of bone: Open	298,00
8811	Cephalometric radiograph and analysis	86,70
8813	Cephalometric radiograph and analysis plus hand- wrist or P-A radiograph	94,20
8815	Cephalometric radiograph and analysis plus hand- wrist and P-A radiograph	104,10
	Removal of teeth	
8924	More than eighteen teeth, per tooth	5,30
8957	Alveolotomy or alveolectomy — concurrent with or independent of extractions (per jaw)	248,40
8961	Implanting of teeth	407,20+L
8931	Local treatment of post-extraction haemorrhage (excluding treatment of bleeding in the case of blood dyscrasias, e.g. haemophilia)	136,30
8935	Treatment of post-extraction septic socket where patient is referred by member of any medical discipline	36,00
8937	Surgical removal of a tooth i.e. — raising of muco- periosteal flap, removal of bone and suturing	25,80

Item	Procedure	R
	Removal of roots	
8953	Surgical removal of residual roots of first tooth	181,00
8955	Surgical removal of residual root of each subsequent tooth. See Rule 011 - Notes 2 and 3.	
	Diverse procedures	
8908	Removal of roots from maxillary antrum involving Caldwell-Luc and closure of oral antral communication	618,24
8909	Closure of oral antral fistula — acute or chronic	474,60
8910	Removal of roots from maxillary antrum	186,30
8911	Caldwell-Luc procedure	186,30
8965	Peripheral neurectomy	407,20
8997	Sulcoplasty or Vestibuloplasty	933,30+L
8999	Deepening the vestibular sulcus: Plastic repair	248,40+L
9001	Deepening the buccal or labial sulcus: Buccal inlay	565,70+L
9003	Repositioning mental foramen and nerve, per side	565,70+L
9005	Alveolar ridge augmentation by bone graft	950,50+L
	Sepsis	
9011	Incision and drainage of pyogenic abscesses (intra-oral approach)	116,20
9013	Extra-oral approach, e.g. Ludwig's angina	158,10
9015	Apicectomy including retrograde filling where necessary — anterior teeth	203,80
9016	Apicectomy including retrograde filling where necessary — posterior teeth	408,00
9017	Decortication, saucerisation and sequestrectomy for osteomyelitis of the mandible	839,00
9019	Sequestrectomy — intra-oral	180,90
	TRAUMA	
	Treatment of associated soft tissue injuries	
9021	Minor	203,80

Item	Procedure	R
9023	Major	430,30
	Mandibular fractures	
9025	Treatment by closed reduction, with inter-maxillary fixation	452,10
9027	Treatment of compound fracture, involving eyelet wiring	634,60
9029	Treatment by metal cap splintage or Gunning's splints	703,50+L
9031	Treatment of open reduction with restoration of occlusion by splintage	1 041,90+L
	Maxillary fractures with special attention to occlusion	
9035	Le Fort I or Guérin fracture	636,20+L
9037	Le Fort II or middle-third of face	1 041,90+L
9039	Le Fort III or craniofacial disjunction or comminuted mid-facial fractures requiring open reduction and splintage	1 493,70+L
	Zygoma/Orbit/Antral — Complex fractures	
9041	Gillies or temporal elevation	452,10
9043	Unstable and/or comminuted zygoma, treatment by open reduction or Caldwell-Luc operation	905,50
9045	Requiring multiple interosseous wiring or bone graft	1 357,70
	Deformities	
	Note: For items 9047 to 9072 the full fee may be charged i.e. notes 2 and 3 (see Rule 011) will not apply.	
9047	Operation for the improvement or restoration of occlusal and masticatory function, e.g. bilateral osteotomy, open operation (with immobilisation)	1 900,80+L
9049	Anterior segmental osteotomy of mandible (Köle)	1 583,70+L
9051	Genioplasty	905,50
9055	Maxillary posterior segment osteotomy (Schukardt) — 1 or 2 stage procedure	1 583,70+L

Item	Procedure	R
9057	Maxillary anterior segment osteotomy (Wassmund) — 1 or 2 stage procedure	1 583,70+L
9059	Le Fort I osteotomy	2 980,00+L
9061	Palatal osteotomy	1 041,90+L
9063	Le Fort II osteotomy for correction of facial deformities or faciostenosis and post-traumatic deformities	3 804,90+L
9069	Functional tongue reduction (partial glossectomy)	679,70
9071	Geniohyiodotomy	407,20
9072	Functional closure of the secondary oro-nasal fistula and associated structures with bone grafting (complete procedure)	2 980,00+L
	Temporomandibular joint procedures	
	(Investigation as in preceding section)	
9073	Conservative treatment of temporomandibular joint derangement of dysfunctional with bite plate	113,40+L
9075	Condylectomy or coronoidectomy or both (extra-oral approach or menisectomy)	950,50
9053	Coronoidectomy (intra-oral approach)	565,70
9077	Intra-articular injection, per injection	68,10
9079	Subsequent injection	27,00
9081	Condyle neck osteotomy (Ward/Kostecka)	452,10
9083	Temporomandibular artroplasty, e.g. eminenectomy (Le Clerk and Toller procedure)	1 131,70
9085	Reduction of temporomandibular joint dislocation without anaesthetic	89,90
9087	Reduction of temporomandibular joint dislocation, with anaesthetic	180,90
9089	Reduction of temporoandibular joint dislocation, with anaesthetic and immobolisation	452,10
9091	Reduction of temporomandibular joint dislocation requiring open reduction	950,50

Item	Procedure	R
	Salivary glands	
9095	Removal of salivary gland	543,60
	Implants	
*9180	Placement of sub-periosteal implant — Preparatory procedure/operation	625,00
*9181	Placement of sub-periosteal implant prosthesis/operation	625,00
*9182	Placement of endosteal implant, per implant	312,50+L
*9183	Placement of osseointegrated implant and abutment, single implant per jaw	325,10
*9184	Placement of osseointegrated implant and abutment, two implants per jaw	425,20
*9185	Placement of osseointegrated implant and abutment, three implants per jaw	525,30
*9186	Placement of osseointegrated implant and abutment, four implants per jaw	625,00
*9187	Placement of osseointegrated implant and abutment, five implants per jaw	725,10
*9188	Placement of osseointegrated implant and abutment, six implants per jaw	825,10
*9189	Cost of Implants	By arrange- ment
:	*Note: 1. The fee includes subsequent exposure and placement of transmucosal extensions. 2. For items 9180 to 9188 the full fee may be charged, i.e. notes 2 and 3 of Rule 011 shall not apply.	