

Dental Network rules and tariffs

Dental benefits for Momentum Medical Scheme Ingwe Primary Care Network and Ingwe Active Network members

| Tariff code | Description | Tooth number required |
|-------------------------|--|-----------------------|
| Examinations | | |
| 8101 | Consultation (oral examination) - Maximum one per member per year | N |
| 8104 | Consultation (specific problem) - Designated service provider: Unlimited but managed (Momentum dental protocols) | N |
| 8109 | Infection control (gloves/masks) - Maximum two per service date | N |
| 8110 | Sterilised instrumentation - Maximum one per service date | N |
| 8145 | Local anaesthetic - Maximum one per service date | N |
| Diagnostic codes | | |
| 8107/ 8112 | Intra oral radiographs/bite wings - Designated service provider: Maximum four per member per year, combined limit per year | N |
| Preventive | | |
| 8163 | Fissure sealant - Maximum two per child per year - Patients younger than 12 | Y |
| 8155 | Polishing only - Maximum one per member per year | N |
| 8159 | Scaling and polishing - Maximum one per member per year | N |
| 8161 | Topical fluoride - Maximum one per child per year - Patients younger than 12 | N |
| 8935 | Septic socket treatment after extraction (if necessary) | Y |
| 8201 | Single extraction (1st extraction in quadrant) - Maximum four per year (in combination with 8202) | N |
| 8202 | Extraction (additional tooth in the same quadrant) - Authorisation required for any additional extractions (more than four per year) | Y |

| Tariff code | Description | Tooth number required |
|--|---|-----------------------|
| Restoration | | |
| Maximum of four allowed and additional four with authorisation | | |
| 8341 8367 | One surface amalgam restoration - Posterior teeth only (14-18, 24-28, 34-38, 44-48) | Y |
| 8342 8368 | Two surface amalgam restoration - Posterior teeth only (14-18, 24-28, 34-38, 44-48) | Y |
| 8343 8369 | Three surface amalgam restoration - Posterior teeth only (14-18, 24-28, 34-38, 44-48) | Y |
| 8344 8370 | Four surface amalgam restoration - Posterior teeth only (14-18, 24-28, 34-38, 44-48) | Y |
| 8351 | One surface resin restoration - Anterior teeth only (11-13, 21-23, 31-33, 41-43) | Y |
| 8352 | Two surface resin restoration - Anterior teeth only (11-13, 21-23, 31-33, 41-43) | Y |
| 8353 | Three surface resin restoration - Anterior teeth only (11-13, 21-23, 31-33, 41-43) | Y |
| 8354 | Four surface resin restoration - Anterior teeth only (11-13, 21-23, 31-33, 41-43) | Y |
| Emergency | | |
| 8131 | Dental pain treatment (emergency) - Only with diagnostic codes on the same service date for the same tooth number | Y |
| 8132 | Not covered on primary teeth - Only the initial emergency root canal treatment is covered not the subsequent root canal treatment | Y |
| 8307 | Pulp amputation (pulpotomy) - Only on primary teeth (51-55, 61-65, 71-75, 81-85) - Maximum of two per child younger than 12 without pre-authorisation and two with pre-authorisation (combined four per child per year) | Y |