INVISALIGN CASE FLOW APPOINTMENTS

A = 10 mins assistant time

D = 10 mins doctor time

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ADA Code | Inhouse Code | Description | Fee | Scheduling Units |
| D8660 | CONINV | Invisalign Consult | NC | ADA |
| Use codes for individual items | DIAINV | Diagnostic Records for Invisalign | $500 | AAAAAAAAA |
| D9450 | CLINCK | ClinCheck Review (if necessary) | NC | ADA |
| D8090 | INVISA | Comprehensive Ortho Case Initial Delivery | 50% of balance | AAADDDAAA |
| D8670/90 | DELAL | Routine Aligner Delivery (4-6 wks after initial delivery) | NC | ADA |
| D8670/90 | IPR | IPR and Aligner Delivery | NC | ADA |
| D8680 | ESSIX | Appliance Impression | NC | AA |
| D8680 | VIVERA | Vivera Retainer iTero Scan | NC | AAAAA |
| D8680 | DELRET | Retainer Delivery | NC | AAA |
| D8999 | OA | Adjust Bite | NC | ADDDA |