POLICY STATEMENT:

I. Based on our criteria and assessment of the peer-reviewed literature, traditional or \( \frac{3}{4} \) dental crowns are considered **medically appropriate** for the following conditions:
   A. To replace a large filling that encompasses at least half the width of a tooth;
   B. Following a root canal in order to prevent the tooth from fracturing;
   C. For a patient with cracked tooth syndrome in which fracture(s) inside the tooth cause pain upon chewing;
   D. For a tooth missing either the facial/buccal or lingual/palatal walls (due to disease or not present upon eruption of the tooth); or
   E. For severe tooth decay in which most of the original tooth has been destroyed.

II. Based on our criteria and assessment of the peer-reviewed literature, traditional or \( \frac{3}{4} \) dental crowns are considered **not medically necessary** when placed in order to cover a misshaped or severely discolored tooth.

III. Based on our criteria and assessment of the peer-reviewed literature, dental veneers placed on the frontal surface of anterior teeth (teeth 6-11 or 22-27) are considered **medically appropriate** for the following conditions:
   A. To replace a large filling the encompasses at least half the width of a tooth; or
   B. Following a root canal in order to prevent the tooth from fracturing.

IV. Based on our criteria and assessment of the peer-reviewed literature, dental veneers are considered **not medically necessary** when placed in order to cover:
   A. Severely discolored tooth/teeth;
   B. Worn down, misaligned, uneven or irregularly shaped tooth/teeth;
   C. Teeth with gaps between them to close the space between the teeth;
   D. Teeth in a patient with cracked tooth syndrome;
   C. A broken cusp in which the cusp has broken off at the tooth; or
   D. Severe tooth decay in which most of the original tooth has been destroyed.

Refer to Corporate Medical Policy #7.01.21 regarding Dental and Oral Care under Medical Plans.
Refer to Corporate Medical Policy #7.03.01 regarding Coverage for Ambulatory Surgery Unit (ASU) and Anesthesia for Dental Surgery.

Refer to Corporate Medical Policy #11.01.15 regarding Medically Necessary Services.
Refer to Corporate Medical Policy #13.01.01 regarding Dental Implants.

Refer to Corporate Medical Policy #13.01.03 regarding Dental Inlays and Onlays.
Refer to Corporate Medical Policy #13.01.04 regarding Periodontal Scaling and Root Planing.
Refer to Corporate Medical Policy #13.01.05 regarding Periodontal Maintenance.
POLICY GUIDELINES:

I. Generally, crown replacements are eligible for coverage no sooner than five (5) years after replacement. Refer to the member’s subscriber contract for specific crown replacement benefits.

II. The Federal Employee Health Benefit Program (FEHBP/FEP) requires that procedures, devices or laboratory tests approved by the U.S. Food and Drug Administration (FDA) may not be considered investigational and thus these procedures, devices or laboratory tests may be assessed only on the basis of their medical necessity.

DESCRIPTION:

Dental crowns replace the exterior portion of a tooth to re-establish its original shape and function and to create a natural appearance. Crowns are the treatment of choice in situations where tooth decay has destroyed most of the original tooth, when a traumatic event has caused damage, or in cases where most of the tooth is restored by a dental restoration. They are also an option for people who grind and clench their teeth so much that the original structure of their teeth has been compromised.

A dental crown is a tooth-shaped "cap" that is placed over a tooth in order to restore a tooth’s shape and size, strength, and/or improve its appearance. A traditional crown encases the entire visible portion of a tooth from top of tooth to the gum line. A ¾ crown covers the entire exposed surface of the tooth except the visible surface next to the lip (labial) or cheek (buccal).

Dental veneers, also known as porcelain veneers or dental porcelain laminates, are wafer-thin, custom-made shells of tooth-colored materials designed to cover the labial/facial/frontal surface of a tooth/teeth. Dental veneers are made from porcelain or resin composite materials.

With dental veneers, as opposed to dental crowns, the natural teeth remain largely intact with only a minimal amount of the tooth being altered to fit the veneer. Veneers are not used to treat the lingual, or back, surface of the teeth.

CODES:  Number Description

Eligibility for reimbursement is based upon the benefits set forth in the member’s subscriber contract.

CODES MAY NOT BE COVERED UNDER ALL CIRCUMSTANCES. PLEASE READ THE POLICY AND GUIDELINES STATEMENTS CAREFULLY.

Codes may not be all inclusive as the ADA code updates may occur more frequently than policy updates.

CDT:  Number Description

D2710 Crown – resin-based composite (indirect)
D2712 Crown – ¾ resin-based composite (indirect)
D2720 Crown – resin with high noble metal
D2721 Crown – resin with predominantly base metal
D2722 Crown – resin with noble metal
D2740 Crown – porcelain/ceramic substrate
D2750 Crown – porcelain fused to high noble metal
D2751 Crown – porcelain fused to predominantly base metal
D2752 Crown – porcelain fused to noble metal
D2780 Crown – ¾ cast high noble metal
D2781 Crown – ¾ cast predominantly base metal
D2782 Crown – ¾ cast noble metal
D2783 Crown – ¾ porcelain/ceramic
D2790  Crown – full cast high noble metal
D2791  Crown – full cast predominantly base metal
D2792  Crown – full cast noble metal
D2794  Crown – titanium

REFERENCES:
Cleveland Clinic. Dental crowns. Last reviewed 4/15/15
Jan;8(1):5-11.
31;(12):CD005512.
* key article

KEY WORDS:
Crowns, Veneers

CMS COVERAGE FOR MEDICARE PRODUCT MEMBERS

Based upon review, dental crowns and veneers are not addressed in a National or Local Medicare coverage
determination or policy. However, dental services are addressed in Chapter 16, Section 140 of the Medicare Benefit
Policy Manual which addresses General Exclusions from Coverage – Dental Services Exclusion and states “Items and
services in connection with the care, treatment, filling, removal, or replacement of teeth, or structures directly supporting
the teeth are not covered”. Please refer to the following website for Medicare Members: