

Part 9: Fixed Prosthodontics

COMPREHENSIVE DENTAL REFERENCE GUIDE

Please use the Comprehensive Dental Reference Guide when preparing your claims and pre-treatment estimates for CareFirst BlueCross BlueShield and CareFirst BlueChoice, Inc., (collectively, "CareFirst"), CareFirst BlueCross BlueShield Medicare Advantage, The Dental Network, and the Federal Employee Program®.

- CDT code descriptions
- Utilization review perspectives on clinical presentations appropriate for benefit allowance
- CareFirst-required documentation to allow for processing
- Identification of codes that require a clinical review by our staff of licensed dentists

Selecting the most appropriate code to describe treatment rendered and providing required documentation streamlines the claims submission process.

These descriptions and directions are based on standard plan designs. Individual patient plans may vary. Verify benefits and eligibility for each patient before the appointment.

Current Dental Terminology (CDT) © American Dental Association (ADA). All rights reserved. There are important differences between CareFirst Dental's Processing Policies and Procedures and dental plan benefits and the processing policies and descriptors found in CDT.

CareFirst BlueCross BlueShield is the shared business name of CareFirst of Maryland, Inc. and Group Hospitalization and Medical Services, Inc. CareFirst BlueCross BlueShield Medicare Advantage is the shared business name of CareFirst Advantage, Inc., CareFirst Advantage, Inc., CareFirst Advantage PPO, Inc. and CareFirst Advantage DSNP, Inc. CareFirst BlueCross BlueShield Community Health Plan Maryland is the business name of CareFirst Community Partners, Inc., Inc. In Virginia, CareFirst MedPlus is the business name of First Care, Inc., Of Maryland (used in VA by: First Care, Inc.), CareFirst of Maryland, Inc., Group Hospitalization and Medical Services, Inc., CareFirst Advantage, Inc., CareFirst BlueCross BlueShield Community Health Plan District of Columbia, CareFirst BlueChoice, Inc., First Care, Inc., and The Dental Network, Inc. are independent Blue Cross and Blue Shield Association. BLUE CROSS*, BLUE SHIELD* and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Plans.



Fixed Prosthodontics: D6200–D6999

The information provided is based on general clinical policy and can vary for each patient's plan. Verify benefits and eligibility for each patient before the appointment, as there are differences among plans. The following information gives generalized clinical requirements and guidance for each CDT code.

	Fixed Prosthodontics			
Procedure Code	Description	Clinical Criteria and/or Policy*	Supporting Documentation Requirements	
D6205	Pontic—indirect resin-based composite	Benefits are typically allowed once every five years. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–5, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial-distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6210	Pontic—cast high noble metal	Benefits are typically allowed once every five years. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–5, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial-distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	

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^{*}Check patient eligibility including age and frequency limitations for each service.

		Fixed Prosthodontics	
Procedure Code	Description	Clinical Criteria and/or Policy*	Supporting Documentation Requirements
D6211	Pontic—cast predominantly base metal	Benefits are typically allowed once every five years. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–5, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial-distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.
D6212	Pontic—cast noble metal	Benefits are typically allowed once every five years. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–5, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial-distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.
D6214	Pontic—titanium	Benefits are typically allowed once every five years. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–5, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial-distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.
D6240	Pontic—porcelain fused to high noble metal	Benefits are typically allowed once every five years. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–5, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial-distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.

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	Fixed Prosthodontics			
Procedure Code	Description	Clinical Criteria and/or Policy*	Supporting Documentation Requirements	
D6241	Pontic—porcelain fused to predominantly base metal	Benefits are typically allowed once every five years. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–5, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial-distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6242	Pontic—porcelain fused to noble metal	Benefits are typically allowed once every five years. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–5, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6243	Pontic—porcelain fused to titanium and titanium alloys	Benefits are typically allowed once every five years. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–5, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial-distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6245	Pontic—porcelain/ceramic	Benefits are typically allowed once every five years. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–5, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial-distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	

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		Fixed Prosthodontics	
Procedure Code	Description	Clinical Criteria and/or Policy*	Supporting Documentation Requirements
D6250	Pontic—resin with high noble metal	Benefits are typically allowed once every five years. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–5, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial-distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.
D6251	Pontic—resin with predominantly base metal	Benefits are typically allowed once every five years. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–5, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial-distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.
D6252	Pontic—resin with noble metal	Benefits are typically allowed once every five years. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–5, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial-distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.
D6253	Provisional pontic—further treatment or completion of diagnosis necessary before final impression	This procedure is considered inclusive to the permanent prosthesis and cannot be billed to the member.	n/a
D6545	Retainer—cast metal for resinbonded fixed prosthesis	Benefits are typically allowed once every five years. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–5, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial-distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.

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	Fixed Prosthodontics			
Procedure Code	Description	Clinical Criteria and/or Policy*	Supporting Documentation Requirements	
D6548	Retainer-porcelain/ceramic for resin-bonded fixed prosthesis	Benefits are typically allowed once every five years. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–5, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial-distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6549	Resin retainer—for resinbonded fixed prosthesis	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6600	Retainer inlay—porcelain/ ceramic, two surfaces	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	

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	Fixed Prosthodontics			
Procedure Code	Description	Clinical Criteria and/or Policy*	Supporting Documentation Requirements	
D6601	Retainer inlay—porcelain/ ceramic, three or more surfaces	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6602	Retainer inlay—cast high noble metal, two surfaces	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6603	Retainer inlay—cast high noble metal, three or more surfaces	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	

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	Fixed Prosthodontics			
Procedure Code	Description	Clinical Criteria and/or Policy*	Supporting Documentation Requirements	
D6604	Retainer inlay—cast predominantly base metal, two surfaces	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6605	Retainer inlay—cast predominantly base metal, three or more surfaces	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6606	Retainer inlay—cast noble metal, two surfaces	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–1 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	

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	Fixed Prosthodontics			
Procedure Code	Description	Clinical Criteria and/or Policy*	Supporting Documentation Requirements	
D6607	Retainer inlay—cast noble metal, three or more surfaces	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6608	Retainer onlay—porcelain/ ceramic, two surfaces	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6609	Retainer onlay—porcelain/ ceramic, three or more surfaces	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	

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	Fixed Prosthodontics			
Procedure Code	Description	Clinical Criteria and/or Policy*	Supporting Documentation Requirements	
D6610	Retainer onlay—cast high noble metal, two surfaces	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6611	Retainer onlay—cast high noble metal, three or more surfaces	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6612	Retainer onlay—cast predominantly base metal, two surfaces	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	

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	Fixed Prosthodontics			
Procedure Code	Description	Clinical Criteria and/or Policy*	Supporting Documentation Requirements	
D6613	Retainer onlay—cast predominantly base metal, three or more surfaces	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6614	Retainer onlay—cast noble metal, two surfaces	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6615	Retainer onlay—cast noble metal, three or more surfaces	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	

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	Fixed Prosthodontics			
Procedure Code	Description	Clinical Criteria and/or Policy*	Supporting Documentation Requirements	
D6624	Retainer inlay—titanium	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6634	Retainer onlay—titanium	Benefits are typically allowed once every five years. Only one restoration will be considered if an inlay or onlay is billed for the same tooth. Limited to the replacement of permanent teeth. Must replace a missing permanent tooth (2–15, 18–31 only). Replacements of teeth 1, 16, 17 and 32 are not covered. Pontic space must be 75% of the mesial–distal length of the missing tooth. The associated abutment teeth must demonstrate a good five-year prognosis. If the retainer is denied, the pontic will be denied. Two pontic lengths, maximum. Cantilevers should not involve more than one pontic, and the related abutment must have at least 75% bone support. Non-functional teeth are not considered for benefits.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable.	
D6710	Retainer crown—indirect resinbased composite	Benefits are typically allowed once every five years, Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.	

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		Fixed Prosthodontics	
Procedure Code	Description	Clinical Criteria and/or Policy*	Supporting Documentation Requirements
D6720	Retainer crown—resin with high noble metal	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.
D6721	Retainer crown—resin with predominantly base metal	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.
D6722	Retainer crown—resin with noble metal	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.
D6740	Retainer crown—porcelain/ ceramic	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.

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	Fixed Prosthodontics					
Procedure Code	Description	Clinical Criteria and/or Policy*	Supporting Documentation Requirements			
D6750	Retainer crown—porcelain fused to high noble metal	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.			
D6751	Retainer crown—porcelain fused to predominantly base metal	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.			
D6752	Retainer crown—porcelain fused to noble metal	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.			
D6753	Retainer crown—porcelain fused to titanium and titanium alloys	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.			

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		Fixed Prosthodontics	
Procedure Code	Description	Clinical Criteria and/or Policy*	Supporting Documentation Requirements
D6780	Retainer crown—3/4 cast high noble metal	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.
D6781	Retainer crown—3/4 cast predominately based metal	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.
D6782	Retainer crown—3/4 cast noble metal	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.
D6783	Retainer crown—3/4 porcelain/ceramic	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.

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		Fixed Prosthodontics	
Procedure Code	Description	Clinical Criteria and/or Policy*	Supporting Documentation Requirements
D6784	Retainer crown—3/4 titanium and titanium alloys	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.
D6790	Retainer crown—full cast high noble metal	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.
D6791	Retainer crown—full cast predominantly base metal	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.
D6792	Retainer crown—full-cast noble metal	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.

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	Fixed Prosthodontics					
Procedure Code	Description	Clinical Criteria and/or Policy*	Supporting Documentation Requirements			
D6793	Provisional retainer crown— further treatment or completion of diagnosis necessary before the final impression	This procedure is considered inclusive to the permanent prosthesis and cannot be billed to the member.	n/a			
D6794	Retainer crown—titanium	Benefits are typically allowed once every five years. Limited to permanent teeth (2–15, 18–31). An endodontically treated tooth must show adequate root canal fill without excessive overfill or periapical pathology. Endodontics must be completed before teeth are prepared, and the bridge is placed. The tooth must present with a minimum of 50% bone support. The patient must be free of active periodontal disease. If pontics are allowed an alternate benefit, the abutment crowns (retainers) will be considered for benefits independently based on their clinical status. Non-functional teeth are not considered for benefits. Abutment teeth should demonstrate zero mobility.	Requires clinical review; pre-treatment estimate recommended. Requires submission of panoramic or full-mouth series radiographs, date of extraction, date of prior placement and other missing teeth, if applicable. Endodontically treated teeth require a periapical that demonstrates adequate fill within 2 mm of the radiographic apex.			
D6920	Connector bar	This procedure is typically not covered.	n/a			
D6930	Recement fixed partial denture	Benefits are typically available once per 12 months after six months have elapsed since the initial placement. Benefits are unavailable if performed on the same day as repairing or removing the bridge, as it is considered inclusive of the other procedure. As needed, adjusting/balancing the occlusion is part of the recementation procedure.	No documentation is required.			
D6940	Stress breaker	This procedure is typically not covered.	n/a			
D6950	Precision attachment	This procedure is typically not covered.	n/a			
D6980	Fixed partial denture repair necessitated by restorative material failure	This procedure is typically allowed once per tooth every 12 months and is necessitated by a restorative material failure.	No documentation is required.			
D6985	Pediatric partial denture, fixed	A fixed prosthetic restoration replaces one or more missing teeth in the primary, transitional or permanent dentition. This restoration attaches to natural teeth, tooth roots, or implants, and it is not removable by the patient. Growth must be considered when using fixed restorations in the developing dentition. Recommendations: Fixed prosthetic restorations to replace one or more missing teeth may be indicated to establish esthetics, maintain arch space or integrity in the developing dentition, prevent or correct harmful habits, or improve function.	Requires clinical review; pre-treatment estimate recommended. Requires a statement of medical necessity.			
D6999	Unspecified, fixed prosthodontic procedure, by report	An unspecified prosthodontic procedure requires a detailed narrative and necessary radiographs.	Requires clinical review; pre-treatment estimate recommended. Requires a statement of medical necessity and necessary radiographs.			

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