



# Dental Clinical Criteria

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*Last Revised: 1/2024*

# Endodontics

## Requests for services must meet the following basic criteria:

### *Endodontic therapy on primary teeth (D3230, D3240)*

- Tooth must demonstrate advanced caries or trauma.
- Root fracture must be absent.
- Clinical crown must be sufficient to retain a restoration, prefabricated resin or stainless steel crown.
- Tooth must not be near exfoliation—root resorption may not exceed 50 percent.

### *Endodontic therapy on permanent teeth (initial treatment and re-treatment) (D3230, D3240)*

- Allowed services for teeth # 2–15, 18–31. Third molars that are necessary to support the occlusion may be considered (#1, 16–17, 32).
- All canals must be instrumented, cleaned and sealed within 2mm of the radiographic apex.
- Tooth must present with documented endodontic pathology and symptoms.
- Tooth must be restorable.
- Tooth must present with at least 50 percent bone support.
- Patient must be free of periodontal disease.

### *Bone graft in conjunction with periradicular surgery (D3428—D3429)*

- Documented surgical defect must be large enough to require graft for adequate healing without significant residual defect.

### *Biologic materials to aid in soft and osseous tissue regeneration in conjunction with periradicular surgery*

- Biologic materials must result in significant improvement in tissue regeneration and healing.
- May be considered inclusive (no additional fee is paid by the member or CareFirst) by CareFirst when used in conjunction with bone grafting and/or guided tissue regeneration (GTR).

### *Guided tissue regeneration, resorbable barrier, per site, in conjunction with periradicular surgery (D3432)*

- Use of the resorbable barrier for GTR must result in significant improvement in tissue regeneration and healing.
- This code is not to be used for resorbable or non-resorbable membranes, allogenic grafting materials or other extra charges. the grafting codes include the material unless otherwise indicated.

### *Canal preparation and fitting of preformed dowel or post (D3950)*

- This service is considered inclusive when submitted in conjunction with post/core placement by the same practitioner on the same tooth.
- This service may be covered by an endodontist when performed as ancillary to endodontic therapy but not by the dentist who is preparing the canal for the post and also placing the post and fabricating the core.