

Implants and Related Services

Requests for services must meet the following basic Clinical Criteria:

1. Limited to the replacement of permanent teeth (2 – 15, 18 – 31 only).
2. Replacements of teeth 1, 16, 17 and 32 are not covered unless in functional occlusion and necessary to maintain occlusal support.
3. Implant must have good crown to “root” ratio.
4. Must be fully osseointegrated.
5. Must not have more than two (2) threads exposed above the alveolar crest.
6. Implant must not be closer than 1.5 mm to adjacent roots or implants.
7. The alveolar ridge must present with good quality bone of adequate mass and density.
8. When adjacent teeth require crowns or demonstrate significant disease or injury and/or there are multiple missing teeth, a more conservative treatment modality may be considered as an alternate benefit to treat the condition and replace all missing teeth, e.g., a fixed bridge or a partial denture.
9. Consideration must be given to using the natural teeth as abutments for a fixed bridge as an alternate benefit in cases where an edentulous space is bordered by broken down, grossly decayed, fractured or heavily restored teeth. These teeth must meet the criteria for crowns or abutments.
10. Implants may be contraindicated in young patients whose growth is expected to continue.
11. When three (3) or more teeth are missing in the same arch bilaterally, consideration will be given to a removable partial denture as an alternate benefit (least expensive alternative treatment (LEAT)).
12. Immediate placement of an implant body into an extraction site is an acceptable procedure in many cases. These procedures may include placement of autogenous or allograft bone material in conjunction with GTR membrane.
13. Biologic mediators, Extracellular Matrix Derivative (EMD) may be considered incidental by CareFirst when used in conjunction with bone grafting and/or GTR.
14. Active periodontal disease must have been treated and under control before implant placement to avoid possible complications.
15. No benefit will be allowed in conjunction with a mini implant supported fixed prosthetic device (crown, bridge).

Other General Considerations:

1. The use of synthetic bone graft material is not recommended since these materials appear to act as bone fillers, but do not generate the formation of new bone or periodontal membrane.
2. Implants may not be covered in some plans.
3. If implants are not covered, then all services associated with the implant service including but not limited to maintenance and repairs, periodontal services for implants and implant removal are excluded from coverage.
4. In the case of surgical placement of implants, there is no alternative surgical treatment option; therefore, no alternate benefit is available. An alternate benefit may be applied to the prosthetic portion of the implant treatment plan (implant abutments and crowns, removable full or partial dentures).

Second stage implant surgery

- This code describes the surgical access to an implant body for placement of a healing cap or to enable placement of an abutment.
- Most implants do not require a second stage surgery. Will be permitted a benefit allowance only in limited situations when uncovering an implant is necessary. Rationale for need should be submitted with the claim.
- Includes flap procedure and suturing.
- Not medically necessary for mini-implant.

Surgical placement of mini implant

- Mini implants are indicated for retention of full dentures that would otherwise be unstable.
- Not indicated to retain or support fixed or removable partial dentures.
- Not indicated to retain or support crowns.
- Includes the retrofitting of existing prosthesis.
- Does not require surgical flap and osteotomy.
- Does not require second stage surgery.
- Does not require surgical stent for placement.

Bone graft or repair of periimplant defect

- Necessary when there is an osseous or soft tissue defect at an existing implant site.
- May be necessary when surgical intervention is required to access the defect.
- Does not include flap entry and closure.
- Does not include barrier membrane or biologic materials.
- Do not use codes D4263, D4264 or D7953.

Bone graft at time of implant placement

- Bone graft may be indicated to repair an osseous defect or improve significantly debilitated architecture.
- Grafting may be indicated when implant is placed immediately into an extraction socket.
- Do not use D4263, D4264 or D7953 to report bone grafting in conjunction with implant placement.