

# Oral Surgery

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

## Other Surgical Procedures

*Oroantral fistula closure and Primary closure of a sinus perforation*

- Oral – antral communication must require surgical intervention for repair and healing.

*Mobilization of erupted or malpositioned tooth to aid eruption*

- Tooth must be ankylosed.
- May not be associated with an extraction.

*Biopsy of oral tissue*

- For pathological examination of abnormal tissue or lesion.
- Not to be used with apicoectomy / periradicular surgery.
- Copy of the pathology report and rationale for biopsy should be included with the claim submission.

*Brush biopsy*

- Sample collection of abnormally appearing mucosa or oral mucosal lesion.
- Biopsy may be required for definitive diagnosis.
- Brush biopsy is used as a screening technique and is usually not covered due to many false positive.

*Surgical excision of soft tissue lesions and intra-osseous lesions*

- Tissue's appearance must be documented and appear abnormal or suspicious on the image provided with the claim.

*Excision of bone tissue*

- Tissue's appearance must be documented and appear abnormal or suspicious on the image provided with the claim.

## Other Repair Procedures

*Osseous, osteoperiosteal, or cartilage graft of the mandible or maxilla*

- Procedure is considered necessary and appropriate when:
  - Performed to repair a significant osseous defect in the maxilla or mandible which may be caused by disease or injury, beyond that of a periodontal defect, commonly referred to as a block graft.
  - The procedure includes ridge augmentation or reconstruction to increase height, width and/or volume of the alveolar ridge.
  - The procedure includes obtaining and placing the graft material (autogenous graft or allograft) and any related follow up visit.
  - Placement of a barrier membrane, if used, may be reported separately.

*Sinus augmentation with bone or bone substitutes*

- The area must be edentulous.
- Must be done for implant site preparation.
- May be appropriate at time of implant placement when implant stability cannot be obtained with existing bone.
- Short, wide implant body use is contraindicated.
- Placed in the absence of sinus pathology.
- Implant and implant services are covered services in the plan.

### *Bone replacement graft for ridge preservation*

- Post extraction site presents with compromised bone mass.
- At least one osseous plate is fenestrated or presents with dehiscence or is fractured resulting in a major defect.
- Particular consideration for benefits will be given to:
  - Maxillary molar and premolar regions that may require grafting to provide adequate space between the sinus and the implant.
  - Maxillary and mandibular anterior regions that may require bone grafts for compromised (very thin osseous plate) facial bony walls.

### *Frenulectomy and Frenuloplasty D7960, D7963*

- Procedure is considered necessary and appropriate when:
  - The child is a young infant and the child is having difficulty “latching” or unable to latch for feeding.
  - Excessive lingual attachment is impeding speech or swallowing.
  - High labial attachment is preventing eruption of teeth.
  - High labial attachment is creating a diastema or causing tooth rotation.
  - Necessary to avoid or proceed with orthodontic treatment.

### *Surgical reduction of fibrous tuberosity*

- Soft tissue must be hypertrophied and interfere with occlusion or the restorative space for prosthetic restoration.
- Excessive tissue interferes with appropriate denture flange extension.