Restorative Foundation for an Indirect Restoration
Restorative foundation for an indirect restoration is indicated as a filler to eliminate undercuts, voids and other irregularities that have occurred during tooth preparation to create a more favorable tooth form for the retention of an indirect restoration.

Core Buildup (Including Any Pins When Required)
Core Buildup is indicated for teeth with significant loss of coronal tooth structure due to caries or trauma in which insufficient tooth structure remains to adequately retain an indirect restoration.

Core Buildup is not indicated for the following:
- As a filler to correct irregularities in preparation
- As a definitive composite or amalgam restoration
- For retention of intracoronal restorations

Post and Core
Post and core are indicated for the following:
- For teeth with significant loss of coronal tooth structure in endodontically treated teeth in which insufficient tooth structure remains to adequately retain an indirect restoration
- For Posts: when there is inadequate remaining tooth structure to support a core

Post and core are not indicated for teeth with short roots.
When anatomic features are available to retain the core (e.g., when canals and pulp chamber can retain a core), a Post is not indicated.

Pin Retention
Pin retention is indicated for teeth with significant loss of coronal tooth structure to allow retention of a direct restoration.

Pin retention is not indicated for the following:
- For restoration of teeth with significant malocclusion
- If the tooth cannot be properly restored with a direct restoration due to anatomic or functional considerations

Post Removal
Post removal is indicated for the following:
- When there has been loss of adequate retention
- In the case of fracture of tooth and/or Post and core
- When there is recurrent caries associated with Post and core
- When access is needed to root canal system for non-surgical endodontics
- When the tooth has a reasonable long-term prognosis for a new restoration
**Coverage Limitations**
- Pin retention and Post and core are subject to a 12-month waiting period
- Pin retention is limited to 2 Pins per tooth
- Recementation of Post and core is limited to those performed more than 12 months after the initial insertion

**Exclusions**
- Any dental procedure performed solely for cosmetic/aesthetic reasons
- Clinical situations that can be effectively treated by a less costly, dental appropriate alternative procedure will be assigned a benefit based on the least costly procedure

**DEFINITIONS**

**Core Buildup**: The replacement of a part or the entire crown of a tooth whose purpose is to provide a base for the retention of an indirectly fabricated crown. (ADA)

**Indirect Restoration**: A restoration fabricated outside the mouth. (ADA)

**Pin**: A small metal rod, cemented or driven into dentin to aid in retention of a restoration. (ADA)

**Post**: Rod-like component designed to be inserted into a prepared root canal space so as to provide structural support. This device can either be in the form of an alloy, carbon fiber or fiberglass, and Posts are usually secured with appropriate luting agents. (ADA)

**APPLICABLE CODES**

The following list(s) of procedure and/or diagnosis codes is provided for reference purposes only and may not be all inclusive. Listing of a code in this guideline does not imply that the service described by the code is a covered or non-covered health service. Benefit coverage for health services is determined by the member specific benefit plan document and applicable laws that may require coverage for a specific service. The inclusion of a code does not imply any right to reimbursement or guarantee claim payment. Other Clinical Policies and Coverage Guidelines may apply.

<table>
<thead>
<tr>
<th>CDT Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>D2949</td>
<td>Restorative foundation for an indirect restoration</td>
</tr>
<tr>
<td>D2950</td>
<td>Core buildup, including any pins when required</td>
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<tr>
<td>D2951</td>
<td>Pin retention – per tooth, in addition to restoration</td>
</tr>
<tr>
<td>D2952</td>
<td>Post and core in addition to crown, indirectly fabricated</td>
</tr>
<tr>
<td>D2953</td>
<td>Each additional indirectly fabricated post - same tooth</td>
</tr>
<tr>
<td>D2954</td>
<td>Prefabricated post and core in addition to crown</td>
</tr>
<tr>
<td>D2955</td>
<td>Post removal</td>
</tr>
<tr>
<td>D2957</td>
<td>Each additional prefabricated post – same tooth</td>
</tr>
<tr>
<td>D2999</td>
<td>Unspecified restorative procedure, by report</td>
</tr>
</tbody>
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**DESCRIPTION OF SERVICES**

There are situations when a tooth does not have sufficient remaining tooth structure to support the planned restoration. In these cases, the anatomical crown may be “built up” using a restorative material foundation. Posts and cores (for endodontically treated teeth) and pins may also be indicated to aid in retention. These procedures should be performed on teeth that have an overall favorable long-term prognosis.

**REFERENCES**

American Dental Association (ADA) CDT Codebook 2020
American Dental Association Glossary of Clinical and Administrative Terms.
GUIDELINE HISTORY/REVISION INFORMATION

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<tr>
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<tr>
<td>07/01/2020</td>
<td><strong>Definitions</strong>&lt;br&gt;• Added definition &quot;Indirect Restoration&quot;&lt;br&gt;<strong>Supporting Information</strong>&lt;br&gt;• Updated References section to reflect the most current information&lt;br&gt;• Archived previous policy version DCG021.04</td>
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INSTRUCTIONS FOR USE

This Dental Coverage Guideline provides assistance in interpreting UnitedHealthcare standard dental benefit plans. When deciding coverage, the member specific benefit plan document must be referenced as the terms of the member specific benefit plan may differ from the standard dental plan. In the event of a conflict, the member specific benefit plan document governs. Before using this guideline, please check the member specific benefit plan document and any applicable federal or state mandates. UnitedHealthcare reserves the right to modify its Policies and Guidelines as necessary. This Dental Coverage Guideline is provided for informational purposes. It does not constitute medical advice.