

# CORE BUILDUP, POST AND CORE AND PIN RETENTION

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## Related Dental Policies

- [Fixed Prosthodontics](#)
- [Non-Surgical Endodontics](#)
- [Single Tooth Indirect Restorations](#)

## INSTRUCTIONS FOR USE

This Dental Coverage Guideline provides assistance in interpreting UnitedHealthcare dental benefit plans. When deciding coverage, the member specific benefit plan document must be referenced. The terms of the member specific benefit plan document [e.g., Certificate of Coverage (COC), Schedule of Benefits (SOB), and/or Summary Plan Description (SPD)] may differ greatly from the standard benefit plan upon which this Dental Coverage Guideline is based. In the event of a conflict, the member specific benefit plan document supersedes this Dental Coverage Guideline. All reviewers must first identify member eligibility, any federal or state regulatory requirements, and the member specific benefit plan coverage prior to use of this Dental Coverage Guideline. Other Clinical Policies and Coverage Guidelines may apply. UnitedHealthcare reserves the right, in its sole discretion, to modify its Policies and Guidelines as necessary. This Dental Coverage Guideline is provided for informational purposes. It does not constitute medical advice.

## BENEFIT CONSIDERATIONS

Before using this guideline, please check the member specific benefit plan document and any federal or state mandates, if applicable.

### **Essential Health Benefits for Individual and Small Group**

For plan years beginning on or after January 1, 2014, the Affordable Care Act of 2010 (ACA) requires fully insured non-grandfathered individual and small group health plans (inside and outside of Exchanges) to provide coverage for Pediatric Dental Essential Health Benefits ("EHBs"). Large group plans (both self-funded and fully insured), and small group ASO plans, are not subject to the requirement to offer coverage for Pediatric Dental EHBs. However, if such plans choose to provide coverage for benefits which are deemed Pediatric Dental EHBs, the ACA requires all dollar limits on those benefits to be removed on all Grandfathered and Non-Grandfathered plans. The determination of which benefits constitute Pediatric Dental EHBs is made on a state by state basis. As such, when using this guideline, it is important to refer to the member specific benefit plan document to determine benefit coverage.

## COVERAGE RATIONALE

### **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:**

- When adequate tooth structure remains to retain a crown
- As a filler to correct irregularities in preparation

- As a definitive composite or amalgam restoration
- For retention of intracoronar restorations

### **Post and Core**

#### **Post and core are indicated for the following:**

- For teeth with **significant** loss of coronal tooth structure due to caries or trauma 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 the following:**

- For vital teeth
- For a post when anatomic features are available to retain the core (e.g., for molars, as canals and pulp chamber can usually retain a core)
- For teeth with short roots

### **Pin Retention**

#### **Pin retention is indicated for teeth with significant loss of coronal tooth structure due to caries or trauma, to allow retention of a direct restoration when preparation design alone is insufficient.**

#### **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 and Exclusions**

- Any dental procedure performed solely for cosmetic/aesthetic reasons (cosmetic procedures are those procedures that improve physical appearance)
- Fixed or removable prosthodontic restoration procedures for complete oral rehabilitation or reconstruction
- 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)

**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.

CDT Code	Description
D2949	Restorative foundation for an indirect restoration
D2950	Core buildup, including any pins when required
D2951	Pin retention – per tooth, in addition to restoration

CDT Code	Description
D2952	Post and core in addition to crown, indirectly fabricated
D2953	Each additional indirectly fabricated post - same tooth
D2954	Prefabricated post and core in addition to crown
D2955	Post removal
D2957	Each additional prefabricated post – same tooth
D2999	Unspecified restorative procedure, by report

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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 Association of Endodontists Guide to Clinical Endodontics; 6<sup>th</sup> edition. 2013.

American Dental Association Glossary of Clinical and Administrative Terms.

Boushell L, Wilder A. Sturdevant’s Art and Science of Operative Dentistry, 6th ed. St. Louis: Mosby c2013. Chapter 16, Complex Amalgam Restorations; p.429-30.

Rosenstiel S, Land M, Fujimoto J. Contemporary Fixed Prosthodontics, 5th ed. St. Louis: Mosby c2016. Part 1: Planning and Preparation, Chapter 3 Treatment Planning; p.77-85.

UnitedHealthcare Insurance Company Dental Certificate of Coverage 2012.

## GUIDELINE HISTORY/REVISION INFORMATION

Date	Action/Description
08/01/2018	<ul style="list-style-type: none"> <li>• Revised coverage rationale: <ul style="list-style-type: none"> <li>○ Replaced language indicating “core buildup is indicated for teeth with significant loss of coronal tooth structure (&gt;50%) due to caries or trauma <i>to aid in retention of an indirect restoration</i>” with “core buildup is indicated for teeth with significant loss of coronal tooth structure due to caries or trauma <i>in which insufficient tooth structure remains to adequately retain an indirect restoration</i>”</li> <li>○ Updated list of indications for post and core: <ul style="list-style-type: none"> <li>▪ Removed: <ul style="list-style-type: none"> <li>– For teeth with significant loss of coronal tooth structure due to caries or trauma in endodontically treated teeth (&gt;50%) to aid in retention of an indirect restoration</li> </ul> </li> <li>▪ Added: <ul style="list-style-type: none"> <li>– For teeth with significant loss of coronal tooth structure due to caries or trauma in endodontically treated teeth in which insufficient tooth structure remains to adequately retain an indirect restoration</li> <li>– For posts when there is inadequate remaining tooth structure to support a core</li> </ul> </li> </ul> </li> <li>○ Updated coverage limitations and exclusions; removed language indicating: <ul style="list-style-type: none"> <li>▪ Pin retention is limited to 2 pins per tooth; not covered in addition to cast restoration</li> <li>▪ Post and core is covered only for teeth that have had root canal therapy</li> <li>▪ Post removal is considered inclusive to retreatment procedure and not covered</li> <li>▪ Restorative foundation for an indirect restoration is not covered</li> </ul> </li> <li>• Updated supporting information to reflect the most current description of services and references</li> <li>• Archived previous policy version DCG021.02</li> </ul> </li> </ul>