

# Fixed Prosthodontics

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[➔ Instructions for Use](#)

| Table of Contents  | Page |
|--|------|
| <a href="#">Coverage Rationale</a> .....                     | 1    |
| <a href="#">Definitions</a> .....                            | 2    |
| <a href="#">Applicable Codes</a> .....                       | 3    |
| <a href="#">Description of Services</a> .....                | 5    |
| <a href="#">References</a> .....                             | 5    |
| <a href="#">Guideline History/Revision Information</a> ..... | 5    |
| <a href="#">Instructions for Use</a> .....                   | 6    |

## Related Dental Policy

- [Removable Prosthodontics](#)

## Coverage Rationale

[➔ See Benefit Considerations](#)

### Fixed Partial Dentures (FPD)

Fixed partial dentures may be indicated for the following:

- Replacement of missing permanent teeth in which the Retainer/Abutment teeth have a favorable long term prognosis
- Replacement of one to two missing teeth in a Tooth Bounded Space

In addition to the above, the following applies:

- Resin bonded appliances (e.g., Maryland Bridge) are indicated for the replacement of one missing tooth and unrestored/undamaged Retainer/Abutment teeth

Fixed partial dentures are not indicated for the following:

- Members with rampant caries and/or poor oral hygiene
- When Retainer/Abutment teeth have untreated endodontic pathology or periodontal disease or an unfavorable crown: root ratio
- When teeth intended as Retainers/Abutments have inadequate remaining tooth structure
- When a tooth to be used as a Retainer/Abutment has tipped or drifted into edentulous space
- Cantilever and resin bonded fixed partial dentures (Maryland Bridge) are not indicated for the following:
  - In an area with malocclusion, heavy occlusion or parafunctional habits (e.g., nail biting, bruxism, clenching)
  - A Pontic width discrepancy
  - Additionally, resin bonded appliances are not indicated in the following situations:
    - Compromised enamel
    - Deep vertical overlap

### Provisional Fixed Partial Dentures

Provisional fixed partial dentures may be indicated for the following:

- When a permanent fixed partial denture does not have a favorable long term prognosis
- To replace a lost tooth in young members to allow maturity of the dentition and jaws before constructing a definitive fixed prosthetic appliance
- When a systemic medical condition prohibits the placement of a definitive fixed prosthetic appliance

## Fixed Partial Denture Repair (Necessitated by Restorative Material Failure)

Fixed partial denture repair may be indicated when the appliance to be repaired is functional and has a favorable long term prognosis.

## Precision Attachments

Precision Attachments may be indicated for the following:

- When aesthetics need to be considered
- For the redistribution of occlusal forces
- To minimize trauma to soft tissue
- Control of loading and rotational forces
- When it is not possible to prepare two Retainers/Abutments with a common path of placement

## Connector Bar

Connector Bars may be indicated to brace individual Retainer/Abutment teeth with considerable coronal length for enhanced stabilization of removable partial dentures, complete dentures and overdentures.

## Stress Breaker (a Non-Rigid Connector)

Stress Breakers may be indicated for the following:

- When it is not possible to prepare two Retainers/Abutments with a common path of placement
- When the prognosis of a Retainer/Abutment is uncertain
- Control of loading and rotational forces
- Redistribution of occlusal forces

## Coverage Limitations

- Repairs or adjustments performed more than 12 months after the initial insertion; limited to 1 per consecutive 6 months
- Subject to a 12 month Waiting Period
- Replacement of fixed prosthesis, if damage or breakage was directly related to provider error: This type of replacement is the responsibility of the Dentist. If replacement is necessary because of member non-compliance, the member is liable for the cost of replacement
- Replacement of fixed prosthesis previously submitted for payment under the plan is limited to 1 time per consecutive 60 months from initial or supplemental placement
- Clinical situations that can be effectively treated by a less costly alternative procedure will be assigned a benefit based on the least costly procedure

## Exclusions

- Limited to 1 time per tooth per consecutive 60 months
- Stress breakers, and Connector Bars are not covered
- Any Dental Procedure performed solely for cosmetic/aesthetic reasons (cosmetic procedures are those procedures that improve physical appearance)
- Fixed prosthodontic restoration procedures for complete oral rehabilitation or reconstruction
- Attachments to fixed bridgework
- Procedures related to the reconstruction of a member's correct vertical dimension of occlusion (VDO)
- Placement of fixed partial dentures solely for the purpose of achieving periodontal stability

## Definitions

**Abutment:** That part of a structure that directly receives thrust or pressure; an anchorage 2: a tooth, a portion of a tooth, or that portion of a dental implant that serves to support and/or retain prosthesis. (AP)

**Cantilever Fixed Dental Prosthesis:** A Fixed complete or partial denture in which the Pontic is cantilevered, (i.e., is retained and supported only on one end by one or more Abutments). (AP)

**Connector Bar:** A device attached to fixed partial denture Retainer or coping which serves to stabilize and anchor a removable overdenture prosthesis. (ADA)

**Fixed Dental Prosthesis:** The general term for any prosthesis that is securely fixed to a natural tooth or teeth, or to one or more dental implants/implant abutments; it cannot be removed by the patient. (AP)

**Pontic:** An artificial tooth on a Fixed Dental Prosthesis that replaces a missing natural tooth, restores its function, and usually fills the space previously occupied by the clinical crown. (AP)

**Precision Attachment:** An interlocking device, one component of which is fixed to an Abutment or Abutments, and the other is integrated into a removable dental prosthesis in order to stabilize and/or retain it. (AP)

**Resin-Bonded Prosthesis (e.g., Maryland Bridge):** A Fixed Dental Prosthesis that is luted to tooth structures, primarily enamel, which has been etched to provide mechanical retention for the resin cement. (AP)

**Retainers:** Any type of device used for the stabilization or retention of prosthesis. (AP)

**Tooth Bounded Space:** A space created by one or more missing teeth that has a tooth on each side. (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 Policies and Guidelines may apply.

| CDT Code | Description   |
|----------|---|
| D6205    | Pontic – indirect resin based composite   |
| D6210    | Pontic – cast high noble metal  |
| D6211    | Pontic – cast predominantly base metal  |
| D6212    | Pontic – cast noble metal   |
| D6214    | Pontic – titanium and titanium alloys   |
| D6240    | Pontic – porcelain fused to high noble metal  |
| D6241    | Pontic – porcelain fused to predominantly   |
| D6242    | Pontic – porcelain fused to noble metal   |
| D6243    | Pontic – porcelain fused to titanium and titanium alloys  |
| D6245    | Pontic – porcelain/ceramic  |
| D6250    | Pontic – resin with high noble metal  |
| D6251    | Pontic – resin with predominantly base metal  |
| D6252    | Pontic – resin with noble metal   |
| D6253    | Provisional pontic – further treatment or completion of diagnosis necessary prior to final impression |
| D6545    | Retainer – cast metal for resin bonded fixed prosthesis   |
| D6548    | Retainer – porcelain/ceramic for resin bonded fixed prosthesis  |
| D6549    | Resin retainer – for resin bonded fixed prosthesis  |
| D6600    | Retainer inlay – porcelain/ceramic, two surfaces  |
| D6601    | Retainer inlay – porcelain/ceramic, three or more surfaces  |
| D6602    | Retainer inlay – cast high noble metal, two surfaces  |
| D6603    | Retainer inlay – cast high noble metal, three or more surfaces  |

| CDT Code | Description   |
|----------|---|
| D6604    | Retainer inlay – cast predominantly base metal, two surfaces  |
| D6605    | Retainer inlay – cast predominantly base metal, three or more surfaces  |
| D6606    | Retainer inlay – cast noble metal, two surfaces   |
| D6607    | Retainer inlay – cast noble metal, three or more surfaces   |
| D6608    | Retainer onlay – porcelain/ceramic, two surfaces  |
| D6609    | Retainer onlay – porcelain/ceramic, three or more surfaces  |
| D6610    | Retainer onlay – cast high noble metal, two surfaces  |
| D6611    | Retainer onlay – cast high noble metal, three or more surfaces  |
| D6612    | Retainer onlay – cast predominantly base metal, two surfaces  |
| D6613    | Retainer onlay – cast predominantly base metal, three or more surfaces  |
| D6614    | Retainer onlay – cast noble metal, two surfaces   |
| D6615    | Retainer onlay – cast noble metal, three or more surfaces   |
| D6624    | Retainer inlay – titanium   |
| D6634    | Retainer onlay – titanium   |
| D6710    | Retainer crown – indirect resin based composite   |
| D6720    | Retainer crown – resin with high noble metal  |
| D6721    | Retainer crown – resin with predominantly base metal  |
| D6722    | Retainer crown – resin with noble metal   |
| D6740    | Retainer crown – porcelain/ceramic  |
| D6750    | Retainer crown – porcelain fused to high noble metal  |
| D6751    | Retainer crown – porcelain fused to predominantly base metal  |
| D6752    | Retainer crown – porcelain fused to noble metal   |
| D6753    | Retainer crown – porcelain fused to titanium and titanium alloys  |
| D6780    | Retainer crown – 3/4 cast high noble metal  |
| D6781    | Retainer crown – 3/4 cast predominantly base metal  |
| D6782    | Retainer crown – 3/4 cast noble metal   |
| D6783    | Retainer crown – 3/4 porcelain/ceramic  |
| D6784    | Retainer crown – 3/4 titanium and titanium alloys   |
| D6790    | Retainer crown – full cast high noble metal   |
| D6791    | Retainer crown – full cast predominantly base metal   |
| D6792    | Retainer crown – full cast noble metal  |
| D6793    | Provisional retainer crown – further treatment or completion of diagnosis necessary prior to final impression |
| D6794    | Retainer crown – titanium and titanium alloys   |
| D6920    | Connector bar   |
| D6930    | Re-cement or re-bond fixed partial denture  |
| D6940    | Stress breaker  |
| D6950    | Precision attachment  |
| D6980    | Fixed partial denture repair necessitated by restorative material failure                                     |
| D6985    | Pediatric partial denture, fixed  |
| D6999    | Unspecified fixed prosthodontic procedure, by report  |

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## Description of Services

Fixed prosthodontics is the area of restorative dentistry that involves the replacement of missing teeth with custom made restorations that are permanently cemented and not removable. The term “fixed partial denture” is synonymous with “fixed bridge” or “bridgework”. The restoration used to replace a missing tooth is called a pontic and the restorations placed on teeth on either side of it are called retainer restorations or abutments and are typically an onlay or a crown. There is some controversy regarding connecting natural teeth to implants with fixed prostheses. During function, the natural tooth has slight movement due to the presence of the periodontal ligament, while the implant is completely osseointegrated and does not move. This can create stress at the neck of the implant result in possible fracture, breakdown of osseointegration, and loosening of the implant and it’s components (Yilmaz). This type of restoration may be the best option in some situations and the decision should be made based on individual patient needs. (Al-Omiri). A resin bonded bridge consists of a pontic that is bonded to an adjacent teeth/tooth that have not been restored with an indirect restoration.

## References

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## Guideline History/Revision Information

| Date       | Summary of Changes   |
|------------|--|
| 05/01/2021 | <p><b>Coverage Rationale</b></p> <ul style="list-style-type: none"><li>Reclassified the following procedures/situations as “Coverage Limitations” (previously listed as “Exclusions”):<ul style="list-style-type: none"><li>Replacement of fixed prosthesis, if damage or breakage was directly related to provider error: This type of replacement is the responsibility of the Dentist; if replacement is necessary because of member non-compliance, the member is liable for the cost of replacement</li><li>Replacement of fixed prosthesis previously submitted for payment under the plan is limited to 1 time per consecutive 60 months from initial or supplemental placement</li><li>Clinical situations that can be effectively treated by a less costly alternative procedure will be assigned a benefit based on the least costly procedure</li></ul></li></ul> |

| Date | Summary of Changes  |
|------|---|
|      | <p data-bbox="337 138 639 170"><b>Supporting Information</b></p> <ul data-bbox="337 176 1455 235" style="list-style-type: none"> <li data-bbox="337 176 1455 203">• Updated <i>Description of Services</i> and <i>References</i> section to reflect the most current information</li> <li data-bbox="337 207 889 235">• Archived previous policy version DCG017.06</li> </ul> |

## 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.