SURGICAL EXTRACTION OF Erupted Teeth and Retained Roots

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COVERAGE RATIONALE

Surgical Extraction of an Erupted Tooth

Surgical Extraction of an Erupted Tooth is indicated for any of the following:

- No clinical crown is visible in the mouth
- There is insufficient remaining clinical crown to allow a non-surgical extraction
- The fracture of a tooth or roots during a non-surgical extraction procedure
- Erupted teeth with unusual root morphology (dilacerations, cementosis)
- Erupted teeth with developmental abnormalities that would make non-surgical extraction unsafe or cause harm
- When fused to an adjacent tooth
- In the presence of periapical lesions
- For maxillary posterior teeth whose roots extend into the maxillary sinus
- When severe crowding or ectopic position of the tooth is present
- When tooth has been crowned or been treated endodontically
- Other conditions as deemed necessary by a licensed dentist

Surgical Extraction is not indicated for the following:

- When a conservative non-surgical procedure is possible
- When the Indications for Coverage criteria above are not met

Surgical Removal of Residual Tooth Roots

Surgical Removal of Residual Tooth Roots is indicated for the following:

- When tooth roots or fragments of tooth roots remain in the bone following a previous incomplete tooth extraction
- Extreme tooth decay resulting in the destruction of the dentition to the extent that only root tips remain

DEFINITIONS

Surgical Extraction of an Erupted Tooth: A tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated. Includes related cutting of gingiva and bone, removal of tooth structure, minor smoothing of socket bone and closure. (ADA, 2017)


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.
Surgical extraction is the removal of a tooth that presents clinically with a condition that does not safely or adequately allow access using a non-surgical approach. Surgical extractions require an incision, elevation, and bone removal when indicated. It may be an entire tooth, or any part of a tooth, including retained roots. All surgical extractions include the administration of local anesthesia, suturing if needed, and routine post-operative care. The procedure and benefit is based on surgical indications, not on the specialty of provider.

REFERENCES

American Dental Association (ADA) Glossary of Dental Clinical and Administrative Terms.

GUIDELINE HISTORY/REVISION INFORMATION

Date | Action/Description
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02/01/2019 | • Reorganized policy template:
| | o Simplified and relocated Instructions for Use
| | o Removed Benefit Considerations section
11/01/2018 | • Updated coverage rationale; replaced language indicating “surgical extraction of an erupted tooth is not proven or indicated for the [listed conditions]” with “surgical extraction of an erupted tooth is not indicated for the [listed conditions]”
| | • Updated supporting information to reflect the most current references
| | • Archived previous policy version DCG005.03

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.