



### CROWN, INLAY, ONLAY, AND VENEER REPAIRS

Policy # D004

Implementation Date: 1/1/09

Review Dates: 1/25/13, 1/28/16, 2/23/17

Revision Dates: 1/25/13, 1/28/16, 2/23/17, 10/19/2022

#### Disclaimer:

1. Policies are subject to change without notice.
2. Policies outline coverage determinations for Select Health Commercial and Select Health Advantage (Medicare/CMS) plans. Refer to the "Policy" section for more information.

#### Description

Repairs to a damaged crown, inlay, onlay, or veneer may vary considerably. A detailed report of the specific procedures and services performed is required with this procedure code.

#### Commercial Plan Policy

Select Health will only reimburse repairs to a damaged crown, inlay, onlay, or veneer when the following criteria is met:

- The restoration has been in place more than six months
- The codes are not being billed to report endodontic access closures.

#### Select Health Advantage (Medicare/CMS)

Select Health Advantage **will follow the commercial plan**

#### Billing/Coding Information

##### CDT CODES:

<b>D2980</b>	Crown repair necessitated by restorative material failure
<b>D2981</b>	Inlay repair necessitated by restorative material failure
<b>D2982</b>	Onlay repair necessitated by restorative material failure
<b>D2983</b>	Veneer repair necessitated by restorative material failure

#### Key References

1. Coding Companion for Dental Services – Ingenix (2016)
2. *Current Dental Terminology* (2016) – American Dental Association

#### Disclaimer

This document is for informational purposes only and should not be relied on in the diagnosis and care of individual patients. Dental Coding/Reimbursement policies do not constitute dental advice, plan preauthorization, certification, an explanation of benefits, or a contract. Members should consult with appropriate dental care providers to obtain needed dental advice, care, and treatment. Benefits and eligibility are determined before dental guidelines and payment guidelines are applied. Benefits are determined by the member's individual benefit plan that is in effect at the time services are rendered.

The codes for treatments and procedures applicable to this policy are included for informational purposes. Inclusion or exclusion of a procedure, diagnosis or device code(s) does not constitute or imply member coverage or provider reimbursement policy. Please refer to the member's contract benefits in effect at the time of service to determine coverage or non-coverage of these services as it applies to an individual member.

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Members may contact Customer Service at the phone number listed on their member identification card to discuss their benefits more specifically. Providers with questions about this Coverage Policy may call Select Health Dental Provider Relations at **800-538-5054**.

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