



Dental Clinical Policy

Subject: Surgical Placement of Implant Body

Guideline #: 06-101

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Description

A dental implant is a type of surgical component used to replace a missing tooth or multiple teeth. It is a durable and long-lasting solution that mimics the natural tooth's structure and function.

Implant Fixture: This is a small, screw-shaped post usually made of biocompatible titanium. It is surgically placed into the jawbone and acts as the root of the artificial tooth.

Clinical Indications

Dental implants to replace missing natural teeth may be considered appropriate as a result of accidental traumatic injuries, extensive structural damage, pathological disorders, congenital/developmental anomalies.

The replacement of multiple teeth by dental implants in the same arch is not appropriate (unless specified by group contract) when other less costly dental services are capable of adequately restoring the occlusion to function. The prosthetic restoration of dental implants may be subject to alternate benefit plan provisions.

Criteria

1. Archived
2. Current (within 12 months), dated, diagnostic, pretreatment radiographic images to include full mouth series, panoramic, and/or other appropriate radiographic images.
3. A comprehensive treatment plan may be requested including periodontal status. This may include documentation of a history of definitive periodontal treatment, including maintenance, for the remaining teeth.
4. Archived
5. Archived
6. Archived
7. A patient's sensitivity (allergy) to denture restorative materials may be considered a qualification for dental implant placement. This condition must be documented by a physician and dental provider's letters of medical/dental necessity as well as a copy of the laboratory analysis of the allergy.
8. Archived

9. Benefits for implant placement is not considered for the correction of developmental or congenital defects (contract dependent).
10. Archived
11. Immediate placement of an implant body in a tooth extraction site is an acceptable procedure.

Coding

The following codes for treatments and procedures applicable to this document are included below 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.

CDT

<i>Including, but not limited to, the following:</i>	
D6010	surgical placement of implant body (fixture): endosteal implant
D6011	second stage implant surgery
D6012	surgical placement of interim implant body (fixture) for transitional prosthesis: endosteal implant
D6013	surgical placement of mini implant
D6040	surgical placement: eposteal implant
D6050	surgical placement: transosteal implant
D6100	Surgical removal of implant body
D6104	Bone Graft at the Time of Implant Placement
D6106	Guided Tissue Regeneration (Implant Site, Resorbable Barrier)
D6107	Guided Tissue Regeneration (Implant Site, Non-Resorbable Barrier)
D6198	Remove interim implant component – removal of implant component (e.g., interim abutment; provisional implant crown) originally placed for a specific clinical purpose and period of time determined by the Dentist.
D7993	Surgical placement of craniofacial implant – extra oral
D7994	Surgical placement: zygomatic implant

ICD-10 CM Diagnoses for Dental Diseases and Conditions: See the current CDT code book for details

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History				
Revision History	Version	Date	Nature of Change	SME
	initial	12/14/2016		Rosen
	Revision	02/05/2018	Related Dental Policies, Appropriateness and Medical necessity	M Kahn
	Revision	03/11/2020	Annual Revision	Committee
	Revised	12/05/2020	Annual Review	Committee
	Revised	08/19/2021	Annual Review	Committee

	Revised	11/07/2022	Annual Review	Committee
	Revised	10/25/2023	Annual Review	Committee
	Revised	10/29/2024	Minor editorial refinements to description, clinical indications, criteria, and reference; intent unchanged.	Committee
	Reviewed	10/28/2025	No change	Dr. Balikov

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