



Dental Clinical Policy

Subject: Removal of Teeth

Guideline #: 07-101

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Description

A surgical extraction involves the removal of a tooth from its socket within the jawbone through incisions and/or bone removal, and specialized instruments, often necessitated by factors like impaction, severe damage, or complex anatomical considerations.

Clinical Indications

Indications for the removal (extraction) of teeth include pain, dental caries, periodontal disease, periapical pathology, split tooth (cracked tooth), tooth mobility, internal or external root resorption, infection, severe anomaly of the crown/root precluding prosthetic/restorative treatment and traumatic injuries to teeth. Additional considerations include loss of pulp vitality typically secondary to infection, ectopic position in the dental arch which may cause damage to other teeth, teeth in the line of jaw fracture, prophylactic removal of teeth made necessary as the result of, but not limited to, organ transplant, chemotherapy, radiation therapy, prosthetic heart valve replacement, joint replacement or for orthodontic purposes.

Removal of teeth is contractually not benefited if the teeth do not present with one of the indications above, is considered for patient or dentist convenience, or for cosmetic reasons.

Note: Whether a service is covered by the plan, when any service is performed in conjunction with or in preparation for a non-covered or denied service, all related services are also either not covered or denied.

Criteria

1. Current (within 12 months), dated, diagnostic, pretreatment periapical or panoramic images must be provided for all extractions.
2. **D7140- Extraction, erupted tooth or exposed root (elevation and/or forceps removal).** This procedure includes removal of tooth structure, minor smoothing of socket bone, and closure, as necessary.
3. **D7210- Extraction, erupted tooth requiring removal of bone and/ or**

sectioning of tooth and including elevation of mucoperiosteal flap if indicated. This procedure includes related cutting of gingiva and bone, removal of tooth structure, minor smoothing of socket bone and closure.

4. A tooth is considered impacted when it cannot fully erupt into function due to an abnormal position or impingement of other anatomic structures which block the normal eruption pathway. An impacted tooth removal may not be benefited unless there is associated pathology.
5. **D7220- Removal of impacted tooth- soft tissue.** This procedure includes occlusal surface of tooth covered by soft tissue; requires mucoperiosteal flap elevation.
6. **D7230- Removal of impacted tooth- partially bony.** This procedure includes part of crown covered by bone; requires mucoperiosteal flap elevation and bone removal.
7. **D7240- Removal of impacted tooth- completely bony.** This procedure includes most or all of crown covered by bone; requires mucoperiosteal flap elevation and bone removal.
8. **D7241- removal of impacted tooth- completely bony, with unusual surgical complications.** Special considerations may be made for the removal of a completely bony impacted mandibular tooth with unusual complications if supported by clinical notes and/or narrative that include:
 - a. Intimate involvement of the tooth roots with the mandibular canal
 - b. Intimate involvement of the tooth roots with the roots of the adjacent tooth
 - c. The mandibular ramus obstructs eruption and therefore access for tooth removal
 - d. The tooth is unusually low relative to the adjacent lower molar
 - e. Access and angulation of the tooth complicates removal without injury to the adjacent tooth
9. **D7241- removal of impacted tooth- completely bony, with unusual surgical complications.** Special considerations may be made for the removal of a completely bony impacted maxillary tooth with unusual complications if supported by clinical notes and/or narrative that include:
 - a. Proximity to the maxillary sinus
 - b. The impacted tooth is located above the roots of the adjacent tooth and is angular
10. Erupted third molar teeth do not automatically require special surgical techniques such as mucoperiosteal flap elevation or bone removal. Appropriate coding should be based on how the tooth is positioned in the oral cavity and current condition.
11. **D7250-Removal of residual tooth roots (cutting procedure).** This procedure includes cutting of soft tissue and bone, removal of tooth structure, and closure.
12. Most dental plans cover the removal of symptomatic and/or pathologic erupted or bone impacted teeth. Some plans, by contract, require bone impacted third molar teeth to be either symptomatic or pathologic to qualify for benefits. Dependent upon plan design, when a third molar is symptomatic or pathologic, benefits might be available to remove the opposing, asymptomatic, non-pathologic third molar on the same date of service.
13. **D7251-Coronectomy- intentional partial tooth removal, impacted teeth only.**
This procedure includes intentional partial tooth removal is performed when a

neurovascular complication is likely if the impacted tooth is removed.

14. Archived
15. Archived
16. Extraction of fully erupted primary teeth that are not submitted with codes D7111 or D7140 will require supporting documentation for benefit determination.
17. **D7252-Partial extraction for immediate implant placement.** Sectioning the root of a tooth vertically, then extracting the palatal portion of the root.

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 Including, but not limited to, the following:

D7111	Extraction, coronal remnants – deciduous tooth
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)
D7210	Surgical removal of erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap, if indicated
D7220	Removal of impacted tooth, soft tissue
D7230	Removal of impacted tooth, partially bony
D7240	Removal of impacted tooth, completely bony
D7241	Removal of impacted tooth, completely bony, with unusual surgical complications
D7250	Surgical removal of residual tooth roots (cutting procedure)
D7251	Coronectomy – intentional partial tooth removal
D7252	Partial extraction for immediate implant placement

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

References

1. U.S Food & Drug Administration. The Selection of Patients for Dental Radiographic Examinations. fda.gov. Revised 2012.
2. American Association of Oral and Maxillofacial Surgeons. Clinical Paper: The Management of Impacted Third Molar Teeth. aaoms.org. Published 2017.
3. Pogrel MA. Coronectomy: Partial Odontectomy or Intentional Root Retention. Oral Maxillofac Surg Clin North Am. 2015;27(3):373-382. doi:10.1016/j.coms.2015.04.003
4. CDT 2026 Current Dental Terminology, American Dental

History

Revision History	Version	Date	Nature of Change	SME

initial	09/21/2015		Dr. Koumaras and Dr. Kahn
Revision	02/08/2017	Criteria, Coding, definitions	Dr. Kahn
Revision	01/17/2018	criteria	Dr. Kahn
Revision	02/06/2018	Related Dental Policies,	Dr. Kahn

		Appropriateness and medical necessity	
Revision	10/07/2020	Annual Review	Committee
Revised	12/05/2020	Annual Review	Committee
Revised	10/30/2021	Annual Review	Committee
	Revised	11/11/2022	Annual Review and integrated 07-201
	Revised	11/01/2023	Annual Review
	Revised	10/31/2024	Minor editorial refinements to description, clinical indications, criteria (added line #17), and reference; intent unchanged.
	Reviewed	10/30/2025	No changes
			Dr. Balikov

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