



# Dental Policy

**Subject: Core Buildup - includes post and core procedures**

**Guideline #: 02 -901E**

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## Description

A building up of coronal tooth structure is necessary when there is insufficient remaining tooth structure and/or retention to retain a full coverage indirect restoration. A core buildup is not for:

- pulpal insulation
- a filler to eliminate any undercut, box form
- Concave irregularity in a tooth preparation.

The plan performs review of [core build-ups] due to contractual requirements that necessitate benefits for dental services meet specific contract requirements. For example, plan contract(s) may require the provision of benefits for services that meet generally accepted standards of dental care at the lowest cost that properly addresses the patient's condition. The conclusion that a particular service is medically or dentally necessary does not constitute an indication or warranty that the service requested is a covered benefit payable by the dental plan.

### Documentation Criteria #1

Must include recent, dated, properly identified pretreatment diagnostic radiographic image/s that include the radiographic apex. Clinical chart notes, intra-oral photographs, current dated 6-point periodontal charting, and history of periodontal therapy may also be required (see below).

### Adjunctive Documentation Criteria #2

When the necessity for core build-up is not obvious by radiographic image, in conjunction with an initial or replacement crown, additional diagnostic information is required.

- Clinical chart notes stating rationale
- Intra-oral photographs
- Initial placement when radiographic images do not demonstrate need after existing restoration removal

### Criteria

1. Documentation See above
2. Adjunctive documentation See above
3. Endodontic treatment of an anterior tooth does not automatically constitute necessity for a core buildup or post and core.
  - A significant portion of missing tooth structure (50% or more) due to caries, fracture, or defective restoration.
  - Insufficient tooth structure coronal to the intended restorative margin for adequate retention.
4. deleted
5. For posterior teeth a core build-up and/or post and core are a covered benefit only under the following circumstances:
  - A significant portion of missing tooth structure (50% or more) due to caries, fracture, or defective restoration.
  - Insufficient tooth structure coronal to the intended restorative margin for adequate retention.  
A crown or abutment is either existing (to be recemented) or is treatment planned.

6. Core buildup will not be considered when submitted for the purpose of pulp capping, insulation or protection of pulp, undercut block-outs, enhancement of box-form and fillers for reduction of final restorative material.
7. The diagnosis of "Cracked Tooth Syndrome" may not qualify a tooth for a core build-up.
8. Core buildups placed for repair of complications from attrition, abrasion, erosion, or abfraction are not covered services.
9. Core build-ups will not be considered for partial coverage indirect restorations, e.g. onlays, inlays, veneers, or ¾ crowns.
10. Core build-ups performed for correction of developmental or congenital defects are not covered.
11. For a primary tooth to be considered for a core buildup, the tooth must meet the same criteria for treatment as a permanent tooth. For a primary tooth within an adult dentition to be considered core build-up, radiographic images of the primary tooth must demonstrate an intact root structure, adequate periodontal support with no evidence of active periodontal disease, and occlusal function with an opposing tooth where the primary tooth meets criteria for full coverage indirect restoration coverage. Radiographic imaging must demonstrate no permanent tooth successor present or the permanent tooth successor is unlikely to erupt.
12. Deleted
13. The endodontic health, quality of existing endodontic therapy, and endodontic history of the tooth will be considered. Placement of a crown build up on a tooth with untreated or unresolved periapical or periradicular pathology will not be considered for benefit.
  - a. Untreated or unresolved periapical or periradicular pathology will not be considered for benefit. See Dental Policy 03-001 Endodontic Therapy.
  - b. Unresolved lesion in close proximity to the pulp chamber in the absence of treatment planned endodontic therapy. See Dental Policy 03-001 Endodontic Therapy.
  - c. A tooth with an overfill/underfill root canal obturation or poor condensation may not be considered. See Dental Policy 03-001 Endodontic Therapy.
  - d. Teeth with internal or external resorption may not be considered for benefit. See Dental Policy 03-001 Endodontic Therapy.
14. The periodontal health of the tooth and adjacent structures must be considered. Teeth demonstrating uncontrolled or untreated periodontal disease, evidenced by loss of supporting bone, will not be considered for core build-up placement.
15. Crown to root ratios that are poorer than 1:1 creates a less than ideal situation. Unfavorable crown to root ratios must include an assessment of the patient's full mouth dental condition, medical history, dental history, periodontal history, periodontal continuing care, long term prognosis, age, and occlusion.
16. Benefits for core build-ups will not be considered when subgingival/subosseous caries may potentially compromise periodontal health and restorative prognosis.
17. Deleted

**History**

Revision History	Version	Date	Nature of Change	SME
	revision	3-4-19	External facing policy	committee
	Revision	4/22/19	Criteria numbering	kahn