Fixed Prosthodontics
(For Ohio Only)

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Related References and Policies

- UnitedHealthcare Community Plan of Ohio Medicaid Dental Quick Reference Guide
- Dental Provider Manual: UnitedHealthcare Community Plan of Ohio

Application

This Dental Policy only applies to the state of Ohio. Any requests for services that are stated as unproven or services for which there is a coverage or quantity limit will be evaluated for medical necessity using Ohio Administrative Code 5160-1-01. Early and periodic screening, diagnostic, and treatment (EPSDT) covered dental service considerations are applied to members younger than age 21 years of age pursuant to Ohio Administrative Code 5160-1-14(C)(3).

Prior Authorization

The Ohio Department of Medicaid (ODM) determines coverage of dental services based on medical necessity, alignment with policy criteria, and clinical indications. CDT codes that are designated as covered by ODM are eligible for reimbursement when all applicable guidelines are met. For a comprehensive list of covered CDT codes, refer to the UnitedHealthcare Community Plan of Ohio Medicaid Dental Quick Reference Guide and/or Dental Provider Manual: UnitedHealthcare Community Plan of Ohio.

Non-covered codes may be reimbursable if special justification is submitted to include prior-authorization, clinical narrative of medical necessity, and supporting documentation including but not limited to clinical records, diagnostic imaging, periodontal charting, or any other relevant documentation to support the clinical rationale.

Description of Services

Fixed prosthodontics is the area of restorative dentistry that involves the replacement of missing teeth with custom made restorations that are permanently cemented and not removable. The term “fixed partial denture” is synonymous with “fixed bridge” or “bridgework”. The restoration used to replace a missing tooth is called a Pontic and the restorations placed on teeth on either side of it are called Retainer restorations or Abutments and are typically an onlay or a crown. There is some controversy regarding connecting natural teeth to implants with fixed prostheses. During function, the natural tooth has slight movement due to the presence of the periodontal ligament, while the implant is completely osseointegrated and does not move. This can create stress at the neck of the implant result in possible fracture, breakdown of osseointegration, and loosening of the implant and its components (Yilmaz). This type of restoration may be the best

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option in some situations and the decision should be made based on individual patient needs. (Al-Omiri). Cantilever and Resin Bonded bridges consist of a Pontic that is bonded to an adjacent teeth/tooth that have not been restored with an indirect restoration.

Definitions

Abutment: That part of a structure that directly receives thrust or pressure; an anchorage 2: a tooth, a portion of a tooth, or that portion of a dental implant that serves to support and/or retain prosthesis. (AP)

Cantilever Fixed Dental Prosthesis: A Fixed complete or partial denture in which the Pontic is cantilevered, (i.e., is retained and supported only on one end by one or more Abutments). (AP)

Connector Bar: A device attached to fixed partial denture Retainer or coping which serves to stabilize and anchor a removable overdenture prosthesis. (ADA)

Fixed Dental Prosthesis: The general term for any prosthesis that is securely fixed to a natural tooth or teeth, or to one or more dental implants/implant abutments; it cannot be removed by the patient. (AP)

Mixed Dentition: From approximately age 6 to 13 when primary and permanent teeth are present in the Mouth (AAPD).

Pontic: An artificial tooth on a Fixed Dental Prosthesis that replaces a missing natural tooth, restores its function, and usually fills the space previously occupied by the clinical crown. (AP)

Precision Attachment: An interlocking device, one component of which is fixed to an Abutment or Abutments, and the other is integrated into a removable dental prosthesis in order to stabilize and/or retain it. (AP)

Resin-Bonded Prosthesis (e.g., Maryland Bridge): A Fixed Dental Prosthesis that is luted to tooth structures, primarily enamel, which has been etched to provide mechanical retention for the resin cement. (AP)

Retainers: Any type of device used for the stabilization or retention of prosthesis. (AP)

Stress Breaker: The part of a tooth-borne and/or tissue-borne prosthesis designed to relieve the Abutment teeth and their supporting tissues from harmful stresses. (ADA)

Tooth Bounded Space: A space created by one or more missing teeth that has a tooth on each side. (ADA)

Clinical Indications

Covered Codes

None

Fixed Partial Dentures (FPD)

Fixed partial dentures may be indicated for the following:

- Replacement of missing permanent teeth in which the Retainer/Abutment teeth have a favorable long-term prognosis
- Replacement of one to two missing teeth in a Tooth Bounded Space

In addition to the above, the following applies:

- Resin Bonded appliances (e.g., Maryland Bridge) are indicated for the replacement of one missing tooth and unrestored/undamaged Retainer/Abutment teeth

Fixed partial dentures are not indicated for the following:

- Members with widespread active carious lesions or untreated decay
- When Retainer/Abutment teeth have untreated endodontic pathology or periodontal disease or an unfavorable crown:root ratio
- When teeth intended as Retainers/Abutments lack sound coronal tooth structure
- When a tooth to be used as a Retainer/Abutment has tipped or drifted into edentulous space
- Cantilever and Resin Bonded fixed partial dentures are not indicated for the following:

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- In an area with malocclusion, heavy occlusion or parafunctional habits (e.g., nail biting, bruxism, clenching)
- A Pontic width discrepancy
- Additionally, Resin Bonded appliances are not indicated in the following situations:
  - Compromised enamel
  - Deep vertical overlap

Provisional Fixed Partial Dentures

Provisional fixed partial dentures may be indicated for the following:

- When a permanent fixed partial denture does not have a favorable long-term prognosis
- To replace a lost tooth in members with a Mixed Dentition to allow maturity of the dentition and jaws before constructing a definitive fixed prosthetic appliance
- When a systemic medical condition prohibits the placement of a definitive fixed prosthetic appliance

Fixed Partial Denture Repair (Necessitated by Restorative Material Failure)

Fixed partial denture repair may be indicated when the appliance to be repaired is functional and has a favorable long-term prognosis.

Precision Attachments

Precision Attachments may be indicated for the following:

- When aesthetics need to be considered
- For the redistribution of occlusal forces
- To minimize trauma to soft tissue
- Control of loading and rotational forces
- When it is not possible to prepare two Retainers/Abutments with a common path of placement

Connector Bar

Connector Bars may be indicated to brace individual Retainer/Abutment teeth with considerable coronal length for enhanced stabilization of removable partial dentures, complete dentures and overdentures.

Stress Breaker (a Non-Rigid Connector)

Stress Breakers may be indicated for the following:

- When it is not possible to prepare two Retainers/Abutments with a common path of placement
- When the prognosis of a Retainer/Abutment is uncertain
- Control of loading and rotational forces
- Redistribution of occlusal forces

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 document and applicable laws that may require coverage for a specific service. The inclusion of a code does not imply any right to reimbursement or guarantee claim payment. Other Policies and Guidelines may apply.

CDT Code	Description
D6205	Pontic – indirect resin-based composite
D6210	Pontic – cast high noble metal
D6211	Pontic – cast predominantly base metal
D6212	Pontic – cast noble metal
D6214	Pontic – titanium and titanium alloys
D6240	Pontic – porcelain fused to high noble metal
D6241	Pontic – porcelain fused to predominantly
D6242	Pontic – porcelain fused to noble metal
D6243	Pontic – porcelain fused to titanium and titanium alloys

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CDT Code	Description
D6245	Pontic – porcelain/ceramic
D6250	Pontic – resin with high noble metal
D6251	Pontic – resin with predominantly base metal
D6252	Pontic – resin with noble metal
D6253	Interim pontic- further treatment or completion of diagnosis necessary prior to final impression
D6545	Retainer – cast metal for resin bonded fixed prosthesis
D6548	Retainer – porcelain/ceramic for resin bonded fixed prosthesis
D6549	Resin retainer – for resin bonded fixed prosthesis
D6600	Retainer inlay – porcelain/ceramic, two surfaces
D6601	Retainer inlay – porcelain/ceramic, three or more surfaces
D6602	Retainer inlay – cast high noble metal, two surfaces
D6603	Retainer inlay – cast high noble metal, three or more surfaces
D6604	Retainer inlay – cast predominantly base metal, two surfaces
D6605	Retainer inlay – cast predominantly base metal, three or more surfaces
D6606	Retainer inlay – cast noble metal, two surfaces
D6607	Retainer inlay – cast noble metal, three or more surfaces
D6608	Retainer onlay – porcelain/ceramic, two surfaces
D6609	Retainer onlay – porcelain/ceramic, three or more surfaces
D6610	Retainer onlay – cast high noble metal, two surfaces
D6611	Retainer onlay – cast high noble metal, three or more surfaces
D6612	Retainer onlay – cast predominantly base metal, two surfaces
D6613	Retainer onlay – cast predominantly base metal, three or more surfaces
D6614	Retainer onlay – cast noble metal, two surfaces
D6615	Retainer onlay – cast noble metal, three or more surfaces
D6624	Retainer inlay – titanium
D6634	Retainer onlay – titanium
D6710	Retainer crown – indirect resin-based composite
D6720	Retainer crown – resin with high noble metal
D6721	Retainer crown – resin with predominantly base metal
D6722	Retainer crown – resin with noble metal
D6740	Retainer crown – porcelain/ceramic
D6750	Retainer crown – porcelain fused to high noble metal
D6751	Retainer crown – porcelain fused to predominantly base metal
D6752	Retainer crown – porcelain fused to noble metal
D6753	Retainer crown – porcelain fused to titanium and titanium alloys
D6780	Retainer crown – 3/4 cast high noble metal
D6781	Retainer crown – 3/4 cast predominantly base metal
D6782	Retainer crown – 3/4 cast noble metal
D6783	Retainer crown – 3/4 porcelain/ceramic
D6784	Retainer crown – 3/4 titanium and titanium alloys
D6790	Retainer crown – full cast high noble metal
D6791	Retainer crown – full cast predominantly base metal
D6792	Retainer crown – full cast noble metal
D6793	Interim retainer crown- further treatment or completion of diagnosis necessary prior to final impression

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CDT Code	Description
D6794	Retainer crown – titanium and titanium alloys
D6920	Connector bar
D6930	Re-cement or re-bond fixed partial denture
D6940	Stress breaker
D6950	Precision attachment
D6980	Fixed partial denture repair necessitated by restorative material failure
D6985	Pediatric partial denture, fixed
D6999	Unspecified fixed prosthodontic procedure, by report

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Policy History/Revision Information

Date	Summary of Changes

12/01/2026	**Template Update**
	• Renamed Related Dental Policy to Related References and Policies
	• Reordered contents of policy
	  ○ Moved *Description of Services* and *Definitions* towards beginning of policy
	• Added *Prior Authorization* section
	• Renamed *Coverage Rationale* to *Clinical Indications*
	  ○ Added *Covered Codes*
	Supporting Information
	• Updated *Clinical Indications*
	  ○ Replaced ambiguous language
	  ▪ Replaced “rampant caries and/or poor oral hygiene” with “widespread active carious lesions or untreated decay”
	  ▪ Replaced “inadequate remaining tooth structure” with “lack sound coronal tooth structure”
	• Updated *References* section to reflect the most current information
	• Archived previous policy version CSDEN431OH.A

Instructions for Use

This Dental Policy provides assistance in interpreting the UnitedHealthcare Community Plan of Ohio dental benefit plans. When deciding coverage, the member specific benefit plan document must be referenced as the terms of the member specific benefit plans may differ. In the event of a conflict, the member specific benefit plan document governs. Before using this policy, 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 Policy is provided for informational purposes. It does not constitute the practice of medicine or medical advice.

Archived Policy Versions

Effective Date	Guideline Number	Guideline Title
11/01/2025 – 11/30/2026	CSDEN431OH.A	Fixed Prosthodontics
12/01/2023 – 10/31/2025	CSDEN312OH.A	Fixed Prosthodontics

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