

# Dental Implant Placement and Treatment of Peri-Implant Defects/Disease

**Policy Number:** DCP007.16

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[➔ Instructions for Use](#)

<b>Table of Contents</b>	<b>Page</b>
<a href="#">Coverage Rationale</a> .....	1
<a href="#">Definitions</a> .....	2
<a href="#">Applicable Codes</a> .....	2
<a href="#">Description of Services</a> .....	3
<a href="#">References</a> .....	3
<a href="#">Policy History/Revision Information</a> .....	4
<a href="#">Instructions for Use</a> .....	5

## Related Dental Policies

- [Dental Barrier Membrane Guided Tissue Regeneration](#)
- [Non-Surgical Periodontal Therapy](#)
- [Surgical Endodontics](#)
- [Surgical Periodontics: Mucogingival Procedures](#)
- [Surgical and Partial Extractions of Erupted Teeth and Removal of Retained Roots](#)

## Coverage Rationale

The success of implants and related prostheses is highly dependent on site and individual patient selection. For edentulous arches, typically 4-6 implants are indicated to support a fixed or removable maxillary or mandibular prosthesis.

### Dental Implant Placement

Guidelines for [Dental Implant](#) placement:

- May be placed at time of extraction
- Implant site is free of infection
- Implant must be a minimum of 1.5-2 mm from adjacent tooth roots if natural teeth are present
- Implant must be a minimum of 3 mm from adjacent implants

Individual factors to consider when treatment planning for implants:

- Patient is able and/or willing to actively participate (e.g., proper oral hygiene, routine dental care)
- Occlusal load
- Bone quality/quantity
- History of or active periodontal disease
- Adequate space exists to appropriately restore the implant
- Patient age
- The presence of conditions/treatment that may interfere with the normal healing response. Conditions include but are not limited to:
  - Chemotherapy
  - Radiation therapy to the head and neck
  - Uncontrolled diabetes and hypertension
  - Recent heart attack or stroke
  - Anticoagulant therapy
  - Blood dyscrasias
  - IV bisphosphonate therapy
  - Estrogen deficiency
- Significant psychiatric disorder or impairment
- Intellectual disability
- Lifestyle risk factors:
  - Smoking
  - Drug addiction

- Alcoholism

## Treatment of Peri-Implant Defect/Disease

Treatment of [Peri-Implant Defects/Disease](#) includes:

- Non-surgical periodontal therapy
- Surgical treatment including flap and closure that may include osseous contouring

Treatment of Peri-Implant Defects/Disease is not indicated if an implant is mobile.

## Definitions

**Dental Implant:** A device specially designed to be placed surgically within or on the mandibular or maxillary bone as a means of providing for dental replacement prosthesis. (ADA)

**Peri-Implant Defects/Disease:** Inflammatory conditions affecting the soft and hard tissues around Dental Implants (AAP). Peri-Implant Diseases are classified into two categories:

- Peri-Implant Mucositis: Inflammation is found only around the soft tissues
- Peri-Implantitis: Inflammation is found around the soft tissue and there is deterioration in the bone supporting the Dental Implant

## 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
D6010	Surgical placement of implant body: endosteal implant
D6011	Surgical access to an implant body (second stage implant surgery)
D6012	Surgical placement of interim implant body for transitional prosthesis: endosteal implant
D6013	Surgical placement of mini-implant
D6040	Surgical placement: eosteal implant
D6049	scaling and debridement of a single implant in the presence of peri-implantitis inflammation, bleeding upon probing and increased pocket depths, including cleaning of the implant surfaces, without flap entry and closure
D6050	Surgical placement: transosteal implant
D6051	Placement of interim implant abutment
D6081	Scaling and debridement of a single implant in the presence of mucositis, including inflammation, bleeding upon probing and increased pocket depths; includes cleaning of the implant surfaces, without flap entry and closure
D6089	Accessing and retorquing loose implant screw - per screw
D6100	Surgical Removal of implant body
D6101	Debridement of a peri-implant defect or defects surrounding a single implant, and surface cleaning of the exposed implant surfaces, including flap entry and closure
D6102	Debridement and osseous contouring of a peri-implant defect or defects surrounding a single implant and includes surface cleaning of the exposed implant surfaces, including flap entry and closure
D6103	Bone graft for repair of peri-implant defect – does not include flap entry and closure
D6104	Bone graft at time of implant placement
D6105	Removal of implant body not requiring bone removal or flap elevation
D6106	Guided tissue regeneration - resorbable barrier, per implant

CDT Code	Description
D6107	Guided tissue regeneration - non-resorbable barrier, per implant
D6190	Radiographic/surgical implant index, by report
D6193	Replacement of an implant screw
D6199	Unspecified implant procedure, by report

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## Description of Services

A Dental Implant is a titanium alloy prosthesis that replaces the roots of teeth lost due to injury or disease. Once integrated into bone (osseointegration), implants are restored with a crown for individual teeth, or as a retainer tooth for an implant supported bridge. Implants may also be used to prevent resorption of existing bone or aid in retention for full and partial removable dentures.

While generally safe, the placement of a Dental Implant is not without risk. These include injury to surrounding tissues (e.g., sinus perforation, jawbone fracture, nerve damage), failure to osseointegrate, difficulty with oral hygiene, and inadequate function/occlusion (FDA). For fully edentulous arches, most commonly 4-6 implants are used to support an implant assisted complete denture, or an implant supported fixed prosthesis (Narcisi et al., 2019). Correct positioning and spacing of adjacent implants is critical to avoid excessive resorption of crestal bone, loss of papilla (inter-implant mucosal fill), and difficulty with proper restoration (De Angelis, 2025; Ramanauskaitė, 2018).

Peri-Implant Disease can occur around implants in the same way as natural teeth, and prevention includes daily removal of plaque by brushing and flossing, as well as routine monitoring as part of preventive dental care. Risk factors include a history of periodontal disease, smoking, poor plaque control, and diabetes, as well as individual patient considerations.

Pursuant to CA AB2585: While not common in dentistry, nonpharmacological pain management strategies should be encouraged if appropriate.

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## Policy History/Revision Information

Date	Summary of Changes
04/01/2026	<p><b>Coverage Rationale</b></p> <ul style="list-style-type: none"> <li>● Added language stating typically 4-6 implants are indicated to support a fixed or removable maxillary or mandibular prosthesis for edentulous arches</li> <li>● Revised guidelines for Dental Implant placement:               <ul style="list-style-type: none"> <li>○ Added guideline requiring “Implant must be a minimum of 3 mm from adjacent Implants”</li> <li>○ Replaced guideline requiring “Implant must be a minimum of 1.5-2 mm from adjacent tooth roots” with “Implant must be a minimum of 1.5-2 mm from adjacent tooth roots if natural teeth are present”</li> </ul> </li> </ul> <p><b>Supporting Information</b></p> <ul style="list-style-type: none"> <li>● Updated <i>Description of Services</i> and <i>References</i> sections to reflect the most current information</li> <li>● Archived previous policy version DCG007.15</li> </ul>

## Instructions for Use

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