

Delta Dental of Virginia Clinical Policy # 500

Subject Removable Partial Dentures	Originating Department Clinical Professional Services
	Signature Authority Dental Director

Type: New Replacement Revision Clarification

Date: 11/09/2009 **Revision Date:** 11/15/2011

Preamble:	<p>The Clinical Policy Bulletin is an expression of Delta Dental of Virginia's (DDVA) determination regarding whether certain services or supplies are medically or dentally necessary. DDVA bases its conclusions on a review of currently available clinical literature. This includes, but is not limited to, clinical outcome studies published in the peer-reviewed medical and dental literature, regulatory status of the technology, evidence-based guidelines of public health and health research agencies, evidence-based guidelines and positions of leading national health professional organizations, views of physicians and dentists practicing in relevant clinical areas, and other relevant factors. DDVA reserves the right to revise these policies as new clinical information is available and we welcome submission of further relevant information.</p> <p>A group may define covered dental services under their dental plan, as well as those services that may be subject to dollar caps or other limits. The plan documents outline covered benefits, exclusions and limitations. DDVA advises dentists and enrollees to consult the plan documents to determine if there are exclusions or other benefit limitations applicable to the service request. 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 DDVA. Some plans exclude coverage for services that DDVA considers either medically or dentally necessary. When there is a discrepancy between DDVA's clinical policy and the group's plan documents, DDVA is to defer to the group's plan documents as to whether the dental service is a covered benefit. In addition, if state or federal regulations mandate coverage then DDVA will adhere to the applicable regulatory requirement.</p>
History:	<p>A removable partial denture is a prosthetic device utilized to replace missing teeth and related tissues in either the maxillary (upper) or mandibular (lower) dental arches. The appliance consists of the replacement teeth that are fixed to a metal or resin plastic base, which attaches to the remaining, natural teeth used as anchorage to stabilize the denture in the affected arch. The removable partial denture attachments may be plastic or metal clasps, which secure the appliance to the abutment teeth for stability. Precision attachments, which negate the need for external clasps, are often utilized and are integrated into crowns placed on the abutment teeth. When the removable denture is provided by the dentist, it may feel awkward or bulky for several weeks. However, the patient will eventually become accustomed to the appliance. Inserting and removing the denture will require practice and is typically demonstrated to the patient by the dentist. It is important to follow all instructions. At first, the denture may be worn continuously and will help to make the denture feel more comfortable. However, wearing removable dentures continually (24 hours/day) is not recommended, as continued use can accelerate loss of bone, making the denture loose and complicating fabrication of a new denture.</p>

Policy:	<p>DDVA guidelines:</p> <ol style="list-style-type: none"> 1. Documentation for the need and appropriate placement of a removable partial denture (RPD) must be provided and should include radiographs of the entire mouth demonstrating the edentulous spaces, teeth to be replaced, and the abutment teeth to be used as anchorage. 2. The restorative and periodontal condition of the abutment teeth must be evaluated as teeth with untreated or uncontrolled caries or periodontal disease should not be used as abutment teeth until these conditions have been appropriately treated. 3. Teeth with unresolved periapical pathology, or persistent periapical pathology due to incomplete or failed endodontic therapy, should not be considered for use as abutment teeth until the pathology is treated appropriately. 4. A RPD will not be considered for treatment of temporomandibular joint dysfunction, alterations in vertical dimension, or for correction of developmental or congenital defects. 5. Placement of a removable partial denture and a fixed bridge will not be considered for the same arch. A removable partial denture will be considered adequate treatment if the total number of missing teeth in contralateral quadrants is three or more, and occlusal function of the entire arch can be adequately restored with a removable prosthesis. 6. Interim partial dentures, or “stayplates,” will be considered only for patients less than 16 years of age. 7. Removable partial dentures have a five year replacement limitation.
Codes(4):	D5211-D5281 – Partial Dentures, including Routine Post-delivery Care
References:	<ol style="list-style-type: none"> 1. Carr AB, McGivney GP and Brown DT. McCracken’s Removable Partial Prosthodontics, 11th edition, 2005, C. V. Mosby, Inc. 2. Zarb GA, Bolender CL, Hickey JC and Carlsson GE. Boucher’s Prosthodontic Treatment for Edentulous Patients, 12th edition, 2004, C. V. Mosby, Inc. 3. Phoenix RD, Cagna DR and Defreest CF. Stewart’s Clinical Removable Partial Prosthodontics, 3rd edition, 2003, Quintessence Publishing Co. Ltd. 4. American Dental Association. <i>Current Dental Terminology. CDT 2011-2012</i>; 33 (©ADA 2010).