

**ENVOLVE DENTAL, INC.
INCLUDING ALL ASSOCIATED SUBSIDIARIES
CLINICAL POLICY AND PROCEDURE**

DEPARTMENT: Utilization Management	DOCUMENT NAME: Occlusal Guards
PAGE: 1 of 4	REFERENCE NUMBER: ENVD.UM.CP.0034
EFFECTIVE DATE: 06/30/2020	REPLACES DOCUMENT:
RETIRED: N/A	REVIEWED: 11/2021
SPECIALIST REVIEWED: Yes	REVISED:
PRODUCT TYPE: All	APPROVED DATE: 06/30/2020

IMPORTANT REMINDER:

This Clinical Policy has been developed by appropriately experienced and licensed health care professionals based on a thorough review and consideration of generally accepted standards of dental practice, peer-reviewed dental/medical literature, government agency/program approval status, and other indicia of dental/medical necessity.

The purpose of this Clinical Policy is to provide a guide to dental/medical necessity. Benefit determinations should be based in all cases on the applicable contract provisions governing plan benefits (“Benefit Plan Contract”) and applicable state and federal requirements including Local Coverage Determinations (LCDs), as well as applicable plan-level administrative policies and procedures. To the extent there are any conflicts between this Clinical Policy and the Benefit Plan Contract provisions, the Benefit Plan Contract provisions will control.

Clinical policies are intended to be reflective of current scientific research and clinical thinking. This Clinical Policy is not intended to dictate to providers how to practice dentistry, nor does it constitute a contract or guarantee regarding results. Providers are expected to exercise professional dental judgment in providing the most appropriate care, and are solely responsible for the dental advice and treatment of members.

SUBJECT:

Medical necessity guidelines for Occlusal Guards.

DESCRIPTION:

Occlusal Guards are removable dental appliances designed to minimize effects of bruxism or other occlusal factors. Occlusal Guards may be constructed of hard or soft material and may cover an entire or partial arch.

POLICY/CRITERIA:

Indications for Occlusal Guards include the following:

- When a patient exhibits signs and symptoms of bruxism or clenching of teeth that causes excessive occlusal wear or multiple fractures of natural teeth or restorations;

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- When multiple porcelain or ceramic restorations oppose natural teeth and have the potential to cause enamel wear.

Contraindications for Occlusal Guards include the following:

- When treating temporomandibular disorders or myofascial pain dysfunction;
- When used for orthodontic tooth movement.

REQUIRED DOCUMENTATION

- Clinical chart, treatment notes, and treatment plan documenting proposed course of treatment and conditions listed in the indications for use of Occlusal Guards;
- Diagnostic photographic images and/or radiographs demonstrating conditions requiring occlusal guard(s).

COVERAGE LIMITATIONS/EXCLUSIONS (Subject to State Regulations):

- One occlusal guard per person, per 36 months.

REFERENCES:

American Dental Association. CDT 2020: Dental Procedure Codes. American Dental Association, 2020.

Becker, IM. Comprehensive occlusal concepts in clinical practice. Wiley-Blackwell 2011.

Haywood, VB, and Bachand, W. Occlusal disease: The silent destroyer. Retrieved from: <https://success.ada.org/en/practice-management/dental-practice-success/summer-2016/occlusal-disease>. Accessed on June 19, 2020 (requires ADA membership).

CODING IMPLICATIONS:

Please refer to your State contract and Provider Manual for exact coverage implications.

The following codes for occlusal guards are recognized by Envolve Dental.

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- **D9942:** repair and/or reline of occlusal guard
- **D9943:** occlusal guard adjustment
- **D9944:** occlusal guard – hard appliance, full arch
- **D9945:** occlusal guard – soft appliance, full arch
- **D9946:** occlusal guard – hard appliance, partial arch
- **D9950:** occlusion analysis – mounted case
- **D9951:** occlusal adjustment – limited
- **D9952:** occlusal adjustment – complete

Envolve Dental complies with the coding guidelines of the health plan and/or State in which the client resides. When billing D9942 – D9952, the need for occlusal guards and associated procedures must be documented in the record. Abnormal comparative utilization of comprehensive examination coding is subject to retrospective review and chart audit. Envolve Dental recommends servicing providers to submit one or more of the following ICD-10 codes with occlusal guards (Box 34 and 34a of the ADA American Dental Association Dental Claim Form):

ICD-10 Code	ICD-10 Code Description
K03.0	Excessive attrition of teeth
K03.81	Cracked tooth
K03.89	Other specified diseases of hard tissues of teeth
K08.530	Fractured dental restorative material without loss of material
K08.531	Fractured dental restorative material with loss of material
K08.539	Fractured dental restorative material, unspecified
K08.81	Primary occlusal trauma
K08.82	Secondary occlusal trauma
M26.54	Insufficient anterior guidance
M26.55	Centric occlusion maximum intercuspation discrepancy
M26.56	Non-working side interference
M26.57	Lack of posterior occlusal support
S02.5	Fracture of tooth (traumatic)

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REVISION LOG

REVISION	DATE
Annual Review	11/2021