Harvard Pilgrim Health Care | TUFTS Health Plan

Point32Health companies

Payment Policy:
# Oral Surgery

**Applies to:**

**Commercial Products**

☒ Harvard Pilgrim Health Care Commercial products
☒ Tufts Health Plan Commercial products

**Public Plans Products**

☒ Tufts Health Direct – A Massachusetts Qualified Health Plan (QHP) (a commercial product)
☒ Tufts Health Together – MassHealth MCO Plan and Accountable Care Partnership Plans
☒ Tufts Health RITogether – A Rhode Island Medicaid Plan
☒ Tufts Health One Care – A dual-eligible product

**Senior Products**

☒ Tufts Health Plan Senior Care Options (SCO) (a dual-eligible product)
☒ Tufts Medicare Preferred HMO/PPO (Medicare Advantage products)

## Policy

Point32Health reimburses medically necessary oral surgery services to contracted providers when the service is a covered benefit. Dental benefits may vary greatly among employer groups and by member's benefit plan document.

## Prerequisites

Applicable Point32Health referral, notification, and authorization policies may apply. Refer to the appropriate sections within the Provider Manuals for more information.

## General Benefit Information

Services are pursuant to the member's benefit plan documents and are subject to applicable member out-of-pocket cost (e.g., copayment, coinsurance, deductible). Member eligibility and benefit specifics should be verified prior to initiating services.

Use of non-contracted labs may have the unintended consequence of subjecting the member to unnecessary services not ordered by the treating provider or other unreasonable financial exposure. In such circumstances, Point32Health may hold the ordering provider accountable for any inappropriate behavior on the part of the nonparticipating lab that has been selected.

**Massachusetts and Rhode Island Fully Insured Groups**

Except as noted below, coverage for services related to teeth is limited to the emergency treatment of accidental injury to sound and natural teeth by a source external to the mouth. Treatment must be rendered within 48 hours of the injury and is limited to x-rays and emergency oral surgery to temporarily stabilize tissue and/or repositioning of the fractured teeth. Restorative services including crowns, fillings, and root canals are not covered.

## Point32Health Reimburses

- An assistant surgeon for those procedures included in the CMS-approved assistant surgeon list
- Biopsy of mouth or jaw oral lesions
- Incision and drainage of significant odontogenic infection, including antibiotic management (if member has drug benefit)
- Office examinations for covered services
- Removal of benign or malignant tumors or cysts of the mouth
- Removal of impacted teeth fully or partially impacted in bone including per- and post-operative care, x-rays and anesthesia
- Surgical treatment of jaw injury or disease

- Surgery for the treatment of TMD/TMJ
- TMD/TMJ initial consultation only (including exam and panoramic x-ray) by an oral surgeon to evaluate symptoms
- Treatment of cleft palate and cleft lip in compliance with the MA state mandate

## Point32Health Does *Not* Reimburse*

- Alveoloplasty, except to prep the mouth for prosthesis
- Dental prosthesis designed to replace teeth lost through infection, disease, decay or the treatment of these conditions
- Endodontic care
- Oral surgical or dental services associated with the removal of teeth for the treatment of baby bottle syndrome
- Prosthodontic services or devices including bridges, dentures, crowns, etc.
- Repair of dentures, crowns, bridges, or other dental appliances damaged as a result of accidental injury
- Replacement of teeth lost during intubation
- Restorative treatment including fillings, bonding, caps and/or amalgam

*Unless otherwise indicated by plan benefit design

## Provider Billing Guidelines and Documentation

Providers are reimbursed according to the applicable contracted rates and fee schedules.

**Harvard Pilgrim Health Care**

| Code | Description | Comment |
|---|---|---|
| 70350, 70355, or D0340 | The work-up necessary to develop the surgical treatment plan for orthognathic surgery | Reimbursed with the following diagnosis codes: ICD-10 Covered Indications |
| D8070 | Comprehensive orthodontic treatment of the transitional dentition | Reimbursed only with the following diagnosis codes in the primary position: ICD-10 Covered Indications |

**Cleft Palate Treatment**
Harvard Pilgrim Health Care reimburses cleft palate procedures in compliance with the MA state mandates up to the age of 18 when one of the following diagnoses are submitted in the primary position:

ICD-10 Covered Indications

**Other Information**

- Bill the same procedure performed multiple times at the same session on one line with a count
- Use CPT codes when available or, in the absence of CPT codes, use the most current version of CDT codes
- The global surgical period is determined using the CMS designation and guidelines

**Tufts Health Public Plans**
Oral surgery claims for emergency conditions should be submitted to Tufts Health Plan.

## Related Policies and Resources

**Payment Policies**

- Anesthesia
- Dental care
- Evaluation and Management
- General Coding and Claims Editing
- Non-Covered Services
- Surgery
- Unlisted Procedure Codes

**Clinical Policies**

- Clinical Review of Dental Services in Medical Benefit
- Custom Fabricated Oral Appliances for Obstructive Sleep Apnea (OSA)
- Dental Implants
- Dental Procedures Requiring Hospital/Facility-Based Care

- Orthognathic Surgery for Severe Oral-Maxillofacial Functional Disorders
- Temporomandibular Joint (TMJ) Disorder Treatment

**Additional Resources**

- Medicare Benefit Policy Manual, Chapter 15 “Covered Medical and Other Health Services”, §150
- Medicare Benefit Policy Manual, Chapter 16 “General Exclusions From Coverage”, §140

## Publication History

12/01/2025: Policy moved to new template; includes all lines of business

## Background and Disclaimer Information

This policy applies to the products of Harvard Pilgrim Health Care and Tufts Health Plan and their affiliates, as identified in the check boxes on the first page for services performed by contracted providers.

Payment is based on member benefits and eligibility on the date of service, medical necessity review, where applicable, and the provider’s network participation agreement with the Plan. As every claim is unique, this policy is neither a guarantee of payment, nor a final indication of how specific claim(s) will be adjudicated. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization, and utilization management requirements (when applicable), adherence to Plan policies and procedures, and claims editing logic. An authorization is not a guarantee of payment.

Point32Health reserves the right to amend a payment policy at its discretion. CPT and HCPCS codes are updated as applicable; please adhere to the most recent CPT and HCPCS coding guidelines.

We reserve the right to conduct audits on any provider and/or facility to ensure accuracy and compliance with the guidelines stated in this payment policy. If such an audit determines that a provider/facility did not comply with this payment policy, Harvard Pilgrim Health Care and Tufts Health Plan will expect the provider/facility to refund all payments related to noncompliance.