## Preauthorization (PA) Requirements Effective January 1, 2026

To ensure medical necessity and prevent service duplication, PA is required for the procedures below. Our new system is programmed to automatically detect and verify PA requirements during claim processing. Claims for these procedures without PA will be denied. Please update your processes and notify staff to ensure compliance.

Codes	Procedure
D2960	Labial veneer (resin laminate) - direct
D2961	Labial veneer (resin laminate) - indirect
D2962	Labial veneer (porcelain laminate) - indirect
D6090	Repair implant abutment supported prosthesis

CDT Codes	Conditions
D2542 – D2664	Onlays: Pre-auth required for restoration protection of teeth with tooth surface loss (TSL) due to attrition or abrasion
D2710 – D2794 and D2928 – D2934	Custom and Pre-Fabricated Crowns: Pre-auth required for restoration protection of teeth with tooth surface loss (TSL) due to attrition or abrasion
D2710 – D2794	Custom Crowns: Pre-auth required for crowning of peg laterals (tooth #7 and #10)
D2799	Interim crown – further treatment or completion of diagnosis necessary prior to final impression: Pre-auth required for restoration protection of teeth with tooth surface loss (TSL) due to attrition or abrasion and crowning of peg laterals
D2910	Re-cement or re-bond inlay, onlay, veneer or partial coverage restoration: Pre-auth required if initially placed for restoration protection of teeth with tooth surface loss (TSL) due to attrition or abrasion or crowning of peg laterals
D2915	Re-cement cast or re-bond indirectly fabricated post and core: Pre-auth required if initially placed for restoration protection of teeth with tooth surface loss (TSL) due to attrition or abrasion or crowning of peg laterals
D2920: Re-cement or re-bond crown: Pre-auth required if initially placed for restoration	protection of teeth with tooth surface loss (TSL) due to attrition or abrasion or crowning of peg laterals

This list is subject to change. For the latest PA list, visit www.pehp.org/providers/dental-preauthorization.

We will no longer accept unspecified CDT codes (e.g., D9999) on submitted claims. All procedures must be reported using the most specific and appropriate CDT code available. Claims submitted with unspecified codes may be denied or delayed pending resubmission with proper coding.

## **How to Request PA**

- 1. Log in to the New Portal and choose Office Management -> Communications Archive from the menu on top.
- 2. Search a provider from your office.
- 3. Find the authorization form under the Document Type drop-down menu.
- 4. Complete form and return to us via Message Center in the New Portal.

Questions? Contact us via the Message Center in the New Provider Portal or call us at 801-366-7555.

