

Case Number:	CM13-0039692		
Date Assigned:	12/20/2013	Date of Injury:	07/01/2000
Decision Date:	07/24/2014	UR Denial Date:	09/20/2013
Priority:	Standard	Application Received:	10/07/2013

HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Dentistry and is licensed to practice in California. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The expert reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

Patient is a 56-year-old female who has submitted a claim for cervicalgia associated with an industrial injury date of 07/01/2000. Medical records from 2011 to 2013 were reviewed. Patient complained of somatic mid back pain, relieved upon intake of medications. Pain was described as burning, sharp, and stabbing. Aggravating factors included lifting, pushing, and pulling. Physical examination revealed tenderness at thoracic region, muscle spasm, and pain upon facetogenic maneuvers. Range of motion was normal. There was no documentation concerning oral examination. Treatment to date has included physical therapy, and intake of medications. Utilization review from 09/20/2013 denied the requests for dental stents, sinus and bone graft maxilla, mandible bone grafts, FGG (free gingival graft), implants, frenectomy because of no clear indication since the progress report only cited a request for CT scan.

IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

Dental Stents: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Role of Surgical Stents in Determining the Position of Implants, National Journal of Maxillofacial Surgery. pg. 20-23.

Decision rationale: The California MTUS does not specifically address this topic. Per the Strength of Evidence hierarchy established by the California Department of Industrial Relations, Division of Workers Compensation, the National Journal of Maxillofacial Surgery was used instead. It states that osseointegrated implants are a practical alternative to traditional prosthodontics; however, designing an implant-supported prosthesis with function and esthetics is a challenge. A stent is an appliance used for radiographic evaluation of height and width of the available bone during treatment planning for implant placement or during surgical procedures to provide site for optimum implant placement. In this case, there was no documented rationale for dental stent. Medical records submitted and reviewed failed to provide subjective complaints and objective findings pertaining to teeth or buccal mucosa. The medical necessity was not established due to insufficient information. Therefore, the request for dental stents is not medically necessary.

Sinus and Bone Graft Maxilla: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation New Bone Formation in the Maxillary Sinus Without Bone Grafts, Implant Dent. pg. 321-31.

Decision rationale: The California MTUS does not specifically address this topic. Per the Strength of Evidence hierarchy established by the California Department of Industrial Relations, Division of Workers Compensation, an article entitled, New Bone Formation in the Maxillary Sinus Without Bone Grafts was used instead. It states that various sinus augmentation procedures, using bone substitutes, have been used to place dental implants in the atrophic posterior maxilla. New bone formation without additional bone graft in the maxillary sinus is revealed from the clinical, radiographic, and histologic results, but furthermore long-term studies are needed to confirm this. In this case, there was no documented rationale for the procedure. Medical records submitted and reviewed failed to provide subjective complaints and objective findings pertaining to sinuses, teeth or buccal mucosa. The medical necessity was not established due to insufficient information. Therefore, the request for sinus and bone graft maxilla is not medically necessary.

Mandible Bone Grafts: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Autogenous Mandibular Bone Grafts and Osseointegrated Implants for Reconstruction of the Severely Atrophied Maxilla: A Preliminary Report, Journal of Oral Maxillofacial Surgery.

Decision rationale: The California MTUS does not specifically address this topic. Per the Strength of Evidence hierarchy established by the California Department of Industrial Relations, Division of Workers Compensation, the Journal of Oral Maxillofacial Surgery was used instead. The study presented results obtained with a new procedure for reconstruction of the severely atrophied maxillary alveolar ridge that involves the use of intramembranous corticocancellous bone grafts obtained from the mandibular symphysis fixed to the residual bone by endosseous implants. The previously observed rapid resorption of endochondral iliac crest onlay bone grafts and the number of lost implants can be significantly reduced if bone from the mandibular symphysis firmly anchored with titanium implants is used. In this case, there was no documented rationale for the procedure. Medical records submitted and reviewed failed to provide subjective complaints and objective findings pertaining to teeth or buccal mucosa. The medical necessity was not established due to insufficient information. Therefore, the request for mandible bone graft is not medically necessary.

FGG (Free Gingivital Graft): Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Gum Tissue Grafts, webmd.com.

Decision rationale: The California MTUS does not specifically address this topic. Per the Strength of Evidence hierarchy established by the California Department of Industrial Relations, Division of Workers Compensation, an online resource was used instead. Similar to a connective-tissue graft, free gingival grafts involve the use of tissue from the roof of the mouth. But instead of making a flap and removing tissue under the top layer of flesh, a small amount of tissue is removed directly from the roof of the mouth and then attached to the gum area being treated. This method is used most often in people who have thin gums to begin with and need additional tissue to enlarge the gums. In this case, there was no documented rationale for the procedure. Medical records submitted and reviewed failed to provide subjective complaints and objective findings pertaining to teeth, gums, or buccal mucosa. The medical necessity was not established due to insufficient information. Therefore, the request for FGG (free gingival graft) is not medically necessary.

Implants: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation webmd.com.

Decision rationale: The California MTUS does not specifically address this topic. Per the Strength of Evidence hierarchy established by the California Department of Industrial Relations, Division of Workers Compensation, an online resource was used instead. Dental implants are

replacement tooth roots. Implants provide a strong foundation for fixed (permanent) or removable replacement teeth that are made to match your natural teeth. In this case, there was no documented rationale for the procedure. Medical records submitted and reviewed failed to provide subjective complaints and objective findings pertaining to teeth, gums, or buccal mucosa. The medical necessity was not established due to insufficient information. Therefore, the request for implants is not medically necessary.

Frenectomy: Upheld

Claims Administrator guideline: The Claims Administrator did not cite any medical evidence for its decision.

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Frenectomy: A Review with the Reports of Surgical Techniques, Journal of Clinical and Diagnostic RNCBI as well as nlm.nih.gov.

Decision rationale: The California MTUS does not specifically address this topic. Per the Strength of Evidence hierarchy established by the California Department of Industrial Relations, Division of Workers Compensation, the Journal of Clinical and Diagnostic Research was used instead. Frenectomy is the complete removal of the frenum, including its attachment to the underlying bone. Frenectomy can be accomplished either by the routine scalpel technique, electrosurgery or by using lasers. The conventional technique involves excision of the frenum by using a scalpel. In this case, there was no documented rationale for the procedure. Medical records submitted and reviewed failed to provide subjective complaints and objective findings pertaining to teeth, gums, or buccal mucosa. The medical necessity was not established due to insufficient information. Therefore, the request for frenectomy is not medically necessary.