

Case Number:	CM14-0000589		
Date Assigned:	01/17/2014	Date of Injury:	02/28/2003
Decision Date:	08/08/2014	UR Denial Date:	12/04/2013
Priority:	Standard	Application Received:	01/02/2014

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:

The patient is a 63-year-old female who has submitted a claim for past episodes of xerostomia secondary to the side effect of industrially related medications, periodontal disease, and bruxism associated with an industrial injury date of February 28, 2003. The patient has a known xerostomia, a noted adverse effect from multiple medications. She had local gingivitis related to tooth #19, exacerbated by xerostomia. She had internal derangement / dislocations in the right and left temporomandibular joint (TMJ). There was no comprehensive oral examination available. Treatment to date has included use of a continuous positive airway pressure (CPAP) machine, crowning of tooth #19, trigeminal appliance, and medications. Utilization review from December 03, 2013 denied the requests for surgical extraction of tooth #19 and grafts to stimulate gum tissue regeneration to tooth #19 because there was no objective information that these were unrestorable; and denied replacement of tooth made of porcelain fused to high noble metal for tooth #19, three-unit bridge on tooth #'s 18, 19, and 20, build-up on tooth #'s 18 and 20 and crowns and build ups on tooth #'s 13, 14, 29, and 30 because there was no objective information that these needed to be replaced / restored. There were no x-rays or photos to support the request.

IMR ISSUES, DECISIONS AND RATIONALES

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

Surgical Extraction (tooth #19): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation AETNA Clinical Policy Bulletin Number 0082 (www.aetna.com/cpb).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Center for Biotechnology Information's PubMed Database (www.ncbi.nlm.nih.gov/pubmed).

Decision rationale: The California MTUS Guidelines do 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 from PubMed was used instead. When dealing with patients with periodontal disease of variable severities, dentists must often choose between treating and restoring the involved tooth or indicating its extraction. Different criteria have been adopted in this decision-making process such as: severity of attachment loss, tooth mobility, furcation involvement, periodontal-endodontic lesion, possible systemic involvement due to the presence of periodontitis, radiographic bone loss greater than 50%, presence of extensive caries, among others. In this case, surgical extraction is being requested. However, there was no recent physical examination of the teeth / buccal mucosa available for review. The most recent dental report was from February 2013. The current clinical status of the patient is unknown. The medical necessity cannot be established due to insufficient information. Therefore, the request is not medically necessary.

Replacement Tooth (made of porcelain fused to high noble metal for tooth #19): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation AETNA Clinical Policy Bulletin Number 0082 (www.aetna.com/cpb).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation WebMD website - Dental Crowns (www.webmd.com).

Decision rationale: The California MTUS Guidelines do 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 article was used instead. A dental crown is a tooth-shaped cap that is placed over a tooth - to cover the tooth to restore its shape and size, strength, and improve its appearance. It may be needed to protect a weak tooth, to restore a broken tooth, to cover a tooth with a large filling, to hold a dental bridge, among others. In this case, a tooth replacement is being requested. However, there was no recent physical examination of the teeth / buccal mucosa available for review. The most recent dental report was from February 2013. The current clinical status of the patient is unknown. The medical necessity cannot be established due to insufficient information. Therefore, the request is not medically necessary.

Grafts (to stimulate gum tissue regeneration to tooth #19): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation AETNA Clinical Policy Bulletin Number 0082 (www.aetna.com/cpb).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation online article: Periodontal Surgery - Soft Tissue Graft Article (www.mountsinai.org).

Decision rationale: The California MTUS Guidelines do 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 article was used instead. Periodontal disease often refers to bacterial plaque and infections around the gum and tooth root. In its more advanced stages, surgery to create new gum tissue (and even bone growth) can be done. There are several techniques used to encourage new gum growth using donor tissue, fabricated material, or tissue from the roof of the patient's mouth. In this case, a graft is being requested to stimulate gum tissue. However, there was no recent physical examination of the teeth / buccal mucosa available for review. The most recent dental report was from February 2013. The current clinical status of the patient is unknown. The medical necessity cannot be established due to insufficient information. Therefore, the request is not medically necessary.

3-Unit Bridge (#18, 19 and 20): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation AETNA Clinical Policy Bulletin Number 0082 (www.aetna.com/cpb).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation WebMD website - Dental Health and Bridges (www.webmd.com).

Decision rationale: The California MTUS Guidelines do 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 article was used instead. A dental bridge is made up of two or more crowns for the teeth on either side of the gap. Dental bridges are supported by natural teeth or implants. Three main types of dental bridges are traditional bridges, cantilever bridges, and Maryland bonded bridges. Traditional bridges are made of porcelain fused to metal or ceramics. Cantilever bridges are used when there are adjacent teeth on only one side of the missing tooth. Maryland bonded bridges / resin-bonded bridge are made of porcelain or plastic teeth and gums supported by metal or porcelain framework. In this case, a dental bridge is being requested. However, there was no recent physical examination of the teeth / buccal mucosa available for review. The most recent dental report was from February 2013. The current clinical status of the patient is unknown. The medical necessity cannot be established due to insufficient information. Therefore, the request is not medically necessary.

Build-Ups (#18 and 20): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation AETNA Clinical Policy Bulletin Number 0082 (www.aetna.com/cpb).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation online article: Root Canal, Build-up, and Crown, Advance Dental (marcvancedmd.com).

Decision rationale: The California MTUS Guidelines do 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 article was used instead. After the root canal is completed, a buildup and crown preparation may be performed. A build-up is a filling that is done in the middle segment of the tooth to seal off the roots from future re-infection. In this case, a tooth build-up is being requested. However, there was no recent physical examination of the teeth / buccal mucosa available for review. The most recent dental report was from February 2013. The current clinical status of the patient is unknown. The medical necessity cannot be established due to insufficient information. Therefore, the request is not medically necessary.

Crowns and Build-Ups (#13, 14, 29 and 30): Upheld

Claims Administrator guideline: The Claims Administrator did not base their decision on the MTUS. Decision based on Non-MTUS Citation AETNA Clinical Policy Bulletin Number 0082 (www.aetna.com/cpb).

MAXIMUS guideline: The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation WebMD website - Dental Crowns (www.webmd.com).

Decision rationale: The California MTUS Guidelines do 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 article was used instead. A dental crown is a tooth-shaped cap that is placed over a tooth - to cover the tooth to restore its shape and size, strength, and improve its appearance. It may be needed to protect a weak tooth, to restore a broken tooth, to cover a tooth with a large filling, to hold a dental bridge, among others. In this case, both crown and build-up are being requested. However, there was no recent physical examination of the teeth / buccal mucosa available for review. The most recent dental report was from February 2013. The current clinical status of the patient is unknown. The medical necessity cannot be established due to insufficient information. Therefore, the request is not medically necessary.